

# **Marisco Group Operations Manual**

**Version 1.02**

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## Directors' Authorisation for Implementation and Regular Review

Prepared on: 13-09-21


Last Review: 16-09-21

To be reviewed on: 13 Dec 2021

Prepared by: Ralph Elliott-King – Financial Risk and Safety Director

The directors require all employees of the three companies that form the Marisco Group (Marisco South Ltd, Marisco Electricals Ltd, and South Coast OSH Training Ltd, henceforth referred to as either *Marisco* or the *organisation*) to adhere to and carry out their duties at work in accordance with the principles and rules set out in this operations manual.

This operations manual was reviewed and approved by:



Samuel R Clover



Ralph Elliott-King



Samuel Woodhams

On: 16-09-21

This operations manual supersedes and replaces any previous versions published.

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## Contents

### ISO 9001:2015 Policy

#### Quality Management System

MP1.1 Policy Statement

MP1.2 Scope

System Processes

- Core Processes
  - CP1. Design and development processes
  - CP2. Operational processes
  - CP3. Planning and risk management
- Support Processes
  - SP1. Document management
  - SP2. Leadership, training and competence
  - SP3. Maintenance
  - SP4. Monitoring, measurement, analysis and evaluation
  - SP5. Purchasing
- Management Processes
  - MP2. Corrective actions & improvement
  - MP3. Internal audits
  - MP4. Management review
  - MP5. Management systems

### ISO 45001:2018 Policy

#### Occupational Health and Safety Management Systems

MP1.1 Policy Statement

MP1.2 Scope

System Processes

- Core Processes
  - CP1. Operational processes
  - CP2. Planning and risk management
- Support Processes
  - SP1. Document management
  - SP2. Leadership, training and competence

- SP3. Monitoring and measurement
- SP4. Procurement
- Management Processes
  - MP2. Corrective actions and improvement
  - MP3. Internal Audits
  - MP4. Management review
  - MP5. Management system

## ISO 14001:20145 Policy

### Environmental Management Systems

#### MP1.1 Policy Statement

#### MP1.2 Scope

#### System Processes

- Core Processes
    - CP1. Operations processes
    - CP2. Planning and risk management
  - Support Processes
    - SP1. Document management
    - SP2. Leadership, training and competence
    - SP3. Monitoring and measurement
  - Management Processes
    - MP2. Corrective actions and improvements
    - MP3. Internal audits
    - MP4. Management review
    - MP5. Management systems
-

# ISO 9001:2015

## MP1.1 ISO 9001:2015 Policy

Marisco (the 'Organisation') aims to provide defect-free products and services to its customers on time and within budget.

The Organisation operates a Quality Management System that has gained ISO 9001:2015 certification, including aspects specific to its scope of certification.

The management is committed to:

- Develop and improve the Quality Management System
- Continually improve the effectiveness of the Quality Management System
- The enhancement of customer satisfaction.

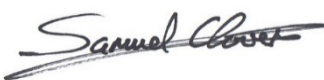
The management has a continuing commitment to:

- Ensure that customer needs and expectations are determined and fulfilled with the aim of achieving customer satisfaction
- Communicate throughout the Organisation the importance of meeting customer needs and all relevant statutory and regulatory requirements
- Establish the Quality Policy and to set Quality Objectives at relevant functions, levels and processes
- Ensure that the Management Reviews set and review the Quality Objectives, and report on the internal audit results as a means of monitoring and measuring the processes and the effectiveness of the Quality Management System
- Ensure the availability of resources.

All personnel understand the requirements of this Quality Policy and abide with the contents of the Quality Management System.

The Organisation constantly monitors its quality performance and implements improvements when appropriate. This Quality Policy is regularly reviewed in order to ensure its continuing suitability. Copies of the Quality Policy are made available to all members of staff and to relevant interested parties.


This policy was reviewed and approved by:



Samuel R Clover



Ralph Elliott-King



Samuel Woodhams

Date of Issue: 16-09-21

Date of next Review: 01-09-2022

## MP1.2 ISO 9001:2015 SCOPE

### Scope Statement

Marisco has determined the scope of the management system and this is recorded on the ISO 9001:2015 Certificate as follows:

1. The Provision of Property Refurbishment and Construction Services.

### Location

The scope of the management system applies to the following geographical locations:

Unit J5 The Fulcrum 6 Vantage Way, Poole, BH12 4NU.

### Permissible Exclusions

The following clauses of ISO 9001:2015 were determined to be not applicable:

- 8.3 - Design and Development - No design or development work are carried out.

### Scope of the Management System

The Management System demonstrates the Organisation's:

- Ability to consistently provide products and services that meet customer and applicable statutory and regulatory requirements.
- Ability to determine both the external and internal contexts in which it operates and shall monitor and review the issues which arise.
- Aims to identify the needs and expectations of interested parties.
- Aims to enhance customer satisfaction through the effective application of the Quality Management System, including processes for improvement of the System and the assurance of conformity to customer and applicable statutory and regulatory requirements.
- Achievement of Quality Objectives.

## Overview

Our management system processes are split between Core, Support and Management.

Core processes are those that are central to what the Company does to deliver its goods and services.

Support processes are those that support the core processes and enable the Company to deliver its goods and services.

Management processes include the setting of objectives and reviewing the performance of the management system against them before planning future changes to achieve continual improvement by review (Plan, Do, Check. Act cycle).

### ISO 9001:2015 CORE PROCESS

## CP1. DESIGN & DEVELOPMENT PROCESSES

### Clause 8.3

#### Design And Development

Design and development activities may form part of the Organisation's ongoing policy of continuous improvement of existing products or the development of new products.

#### Design Not Applicable

The Organisation does not currently undertake any design activities or other similar processes addressed by this Section of the Standard. Should this situation change, by customer demand or any other reason, appropriate procedures will be developed and introduced. The Management Review process continuously monitors this situation



## ISO 9001:2015 CORE PROCESS

### CP2. OPERATIONAL PROCESSES

Clause 7.1.5.1, 8.1, 8.2, 8.5, 8.6

#### Planning Process

The following are used in the work planning process:

- Project Log
- JobLogic
- Job Sheets
- Job Files stored on the Marisco One Drive (MOD)
- Annual Leave Records
- Shared MS Outlook Electronic diaries
- Job Allocations via JobLogic
- Weekly management meetings
- Pre-start meetings
- Risk Assessments & Method Statements
- Safe Systems of Work
- Drawings
- Specifications
- Work Instructions
- Customer Contracts.

Work is planned and scheduled to an agreed programme to meet customer requirements and to ensure the project is completed on time and within budget.

Regular weekly informal meetings take place at which any significant issues are discussed, and appropriate action is agreed and implemented, as necessary. Notes may be added to the job information for future reference.

If required, a site visit may be conducted to determine planning and other requirements relating to the work.

Personnel are allocated to a job based on qualifications, skills required, workloads and their availability.

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A formal review of all information provided by the customer and the acceptance criteria is carried out at appropriate stages and in conjunction with the customer when necessary.

Confirmed projects are recorded on the Project Log Schedule available for all managers to review on the MOD. Individual Project folders are created within the *07. Managers Folder* on the MOD where all relevant documentation is stored with a standard folder directory as follows:

- 1.1 Project Risk Assessment Module (PRAM) (Interactive Excel Spreadsheet)
- 1.2 Client's work schedule and Variation orders
- 1.3 Asbestos Survey (if required)
- 1.4 Project documentation
- 1.5 Sales Invoices
- 1.6 Legal and incident history

The office-based operations management team (Lead: Ken Mantock + team) are responsible for updating the Office Project Log on a daily basis and pre-populating the individual project folders with the available information concerning the commissioning of the work.

## Refurbishment Tender Work

Most of Marisco's work consists of completing a series of relatively low-risk and low-value refurbishment work on social housing properties operated by local authorities and housing associations in the southern regions of Hampshire, Dorset, Wiltshire, and Somerset counties. They are commissioned under over-arching tender agreements where the method of notifying works, supplying specifications and managing the project through to completion and invoicing follow a standard and well understood procedure.

The project is assigned to an Site Manager who then becomes responsible for taking forward the detailed planning to execute and complete the project. This includes liaising with all stakeholders in the project to:

- Decide and book in the commencement and completion dates.
- Pre-order any non-standard stock materials or sub-contracted services required.
- Visit the site to complete the project's PRAM (risk assessments).
- Prepare a full **Site File** for all works (unless the work involved will involve tasks that can be completed within 6 hours, in which case a Short-Form RAM is completed).
- Book the operatives to the project taking care to ensure the correct processes are completed in a logical order to complete the job in the most efficient way (critical

pathway planning). We are currently integrating Joblogic into our system to facilitate a more effective allocation of our available staff.

- Manage operations on the site by frequent visits over the entire life of the project to ensure the work is carried out to accepted building safety standards and all relevant Regulations are complied with.
- Liaise with the clients and other external contractors to ensure the works are being conducted in accordance with their expectations.
- Attend works completion hand-over meeting and deal with any outstanding remedial

## **Notifiable Private Construction Project Works where we are the Principal Contractor and Undertake Design work under the CDM Regulations.**

We have started looking at this kind of work in September 2021, but we have yet to accept such a project.

Whenever it is considered that specialist skills or materials are required for jobs an approved sub-contractor or supplier may be selected in accordance with the Organisation's purchasing procedures.

The Managing Director ensures that, adequate human resources are available that are suitably qualified to conduct work activities in accordance with specific customer requirements and any applicable legislative or regulatory requirements.

## **Commission of our Services**

Enquiries are received or acquired by the following means:

- Telephone, letter and e-mail
- Established customer (direct customers and main contractors)
- Established industry contacts
- Approved contractor status Invitation to Tender
- Our website and other marketing initiatives.

The enquiry is reviewed by the Organisation to ensure the customer's requirements can be met.

If after review the Organisation decides it does not have the capability to fulfil the requirements of the enquiry, the enquirer is advised of the Organisation's decision to decline to proceed.

All relevant enquiries where a decision has been taken to proceed are recorded on a master quotation log on the MOD designed to manage the process. The enquiry record includes the following, as appropriate:

- Quotation number
- Customer name
- Date
- Contact name
- Contact details
- Description
- Customer reference, if any
- Customer drawing number, if any
- Drawing revision number and issue number.

Quotations are prepared and submitted by appropriate means together with a copy of the Organisation's terms and conditions of supply.

Copies of all Quotations submitted are retained in the appropriate file on the system.

Any queries relating to the Quotation are discussed until resolved.

If an amended Quotation is issued, the superseded information is clearly identified should it be required for future reference.

No work is commenced until a written instruction is received from the customer.

The customer's order is reviewed against all previous documentation and correspondence in order to ensure anomalies do not exist. When anomalies occur, the customer is informed and the situation resolved before any further commitment by the Organisation.

Customer Orders are accepted in the form of Purchase Orders, Contracts, written acceptances of Quotations or other written instruction from the customer.

### **Framework Agreements**

Ongoing contracts have been established with local councils and housing associations.

Orders/Work Schedules are received by email.

The order is priced up using the agreed schedule of rates.

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When a Customer Order is received, the following actions are taken:

- The Order is recorded in the Project Log system.
- A unique Project number is allocated.
- A Project folder is created labelled with the Project number and customer name.
- All documentation relating to that order is stored on MOD with the project folder.

Any required parts, materials or equipment are ordered in accordance with the relevant procedures set out in the purchasing section of this management system.

If the customer wishes to change an Order, then depending on the nature, extent and timing of the change, this is agreed with the customer and confirmed by an exchange of e-mails or letters. Updates to Purchase Orders, where received, may be requested and/or supplied.

Copies of the following records are retained within the MOD Project Folder:

- Latest Quotation with all previous versions
- Customer Order
- Customer Drawings/Specifications
- Asbestos Survey reports
- Details of any BIM / Recording requirements
- Details of any special circumstances we should be aware of concerning the location, nature of the use of the building (e.g. it operates as HMO or refuge), or any special needs of the occupants (safe-guarding, two-to-attend, Covid vaccination status, disabled, etc).

## **Production And Service Provision Specific Work Instructions**

Due to the nature of the Organisation's activities/processes, documented generic work instructions are not considered appropriate.

For each new project, a **Site File** is prepared the following format with contents:

- Project number and Site address
  - Customer name and address with key contact details
  - Delivery and completion dates with any billing stage payment dates
  - Site conduct instructions and rules with standard HSE H&S Notice
  - Health and Safety risk assessments and relevant Safe Systems of Works
  - Management or Demolition and Refurbishment Asbestos Survey(s) depending upon whether the tasks involved include disturbing the fabric of the building.
  - Site worker and visitors sign-in and sign-out schedules.
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- Various useful info-sheets, near-miss, accident reporting, and work permit forms.
- Signatures of Site manager(s) to confirm the project has been properly planned and will be carried out in accordance with building safety standards and all appropriate Regulations.

‘Quality Inspections’ are completed as appropriate and approved by a Supervisor.

Final signoff is confirmed using the Customers own completion documentation or on the Job Sheet. Operatives complete a Timesheet. Sub-contractors complete the Job Sheet and submit their invoices for payment.

### Identification And Traceability

Required identification and traceability is recorded and retained.

This may include:

- Project numbers
- Customer name
- Material traceability.

The status of a job and those responsible for its processing can be traced by referring to the Project folder and the Site File Folder and related records as applicable.

The traceability of individual staff training, competence and qualifications is retained in accordance with the training and competence process.

### Property Belonging To Customers Or External Providers

Where customer property (e.g. free issue materials, premises, tools, personal data) is required as part of the contract, appropriate measures are taken to maintain the integrity and security of the property.

Customer property is clearly identified, verified and protected.

All data and information provided by customers are treated as confidential in accordance with the requirements of the Data Protection Act 2018 and are protected using suitable physical and electronic protection methods.

Customers are notified of any loss, corruption, or other damage to their data, information or property.

Prior to commencing work, the customer site and any facilities are checked to confirm that they are appropriate for the proposed work. Any anomalies or potential problems are notified to the customer.

### **Preservation Identification**

All documents and data are identified.

Equipment, stock and materials are identified by the manufacturer's labelling, job reference number, warehouse locations and/or can be visually identified by personnel.

Risk Assessments are carried out and documented.

### **Protection**

Electronic data, products, materials, equipment and hard copy documentation are protected through the implementation of the relevant processes established in this Management System.

Products, materials and equipment are retained within the manufacturer's protective packaging when provided until required.

Most building materials are ordered and delivered directly to site on a just in time basis. Stores stock and materials are retained in the manufacturer's protective packaging on suitable racking until it is required for processing.

All work is carried out with due regard to the relevant Health & Safety and subsequent Risk Assessments in operation at the time.

All staff are issued with appropriate Personal Protective Equipment (PPE) for work activities undertaken.

All data stored on the Organisation's computer system is suitably protected such that only authorised employees have access to the relevant levels of the system.

### **Handling**

The Organisation has defined a Health & Safety Policy and documented procedures and processes including Risk Assessments and Method Statements relating to its activities. Whenever a process is to be undertaken that is not included in the Health & Safety Manual, a process-specific Risk Assessment is completed detailing the Method Statement identified to control the process.

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Handling and operation of items and equipment within the Organisation are by recognised safe methods with appropriately trained and competent operators.

Full consideration is given to the potential dangers of using any materials labelled as hazardous, which may include MSDS and CoSHH.

Personnel are instructed to refer to guidance displayed on packaging where this supersedes previous instruction/documentation.

## Storage

Appropriate retention of documentation and data is provided through the implementation of the relevant procedures established in this Management System.

All materials and products are stored in accordance with the manufacturer's recommendations.

Information and data provided by the customer are stored in the relevant files on the Organisation's system.

Hazardous materials such as chemicals are stored in safe and secure areas and in accordance with any legislative or regulatory requirements in place.

Adequate and appropriate storage areas on-site are identified and allocated at the planning stage of each job.

## Post Delivery Activities

As applicable, the Organisation conducts the following activities that are considered "post-delivery activities":

- All products are covered by the manufacturer's standard warranty and can be returned in accordance with any applicable terms and conditions.
- Products and/or services supplied by the Organisation are done so in accordance with any applicable statutory and regulatory requirements in place.
- Certificates of Conformity and/or Declarations of Performance are provided on request.
- The Organisation ensures that appropriate liability insurance is maintained should there be any issue in relation to any statutory and/or regulatory requirements in conjunction with its business activities.
- Regular reviews of customer feedback are undertaken to ensure contractual obligations are maintained.
- A 12-month warranty is provided on all services and materials provided by the Organisation subject to fair wear and tear.



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The Organisation is required to provide a response to the satisfaction of the client in accordance with the relevant requirements of the Construction (Design and Management) Regulations (CDM) 2015 and other legal and regulatory requirements in force.

Projects bound by CDM Regulations 2015 are handled by the project co-ordinator. This will include the issue of such documents as:

- Snagging
- Practical Completion
- Defects Liability
- Final Completion 'End of Defects' Certificate
- Operations & Maintenance Manuals
- Health & Safety File Management.

If it is found that any of its products or services has failed to meet the contractual requirements, then immediate steps are taken to remedy the situation and to fulfil the Organisation's obligations.

There are no further specific statutory and regulatory requirements, contractual obligations or supplementary services that are required to be fulfilled after the Organisation's products and services have been delivered.

## **Control Of Changes**

A formal change control process is in place to ensure the proper evaluation and approval of all proposed significant changes to production and service provision.

Formal changes to processes and documentation will be used by the Organisation when changes are considered significant. Minor changes may be made without formal control, however the decision on what constitutes a significant or minor change must be agreed upon by those involved in the change.

A record of such significant changes including details of the methodology and those responsible for authorising the change is to be recorded on a Change Request Log/Change Implementation Plan/Change Request Form.

Additionally, comprehensive e-mail records and computer system notes are recorded of any changes identified by either the Organisation or customer as part of the service provision.

## Release Of Products And Services

The Organisation conducts such interim checks as are commensurate with the complexities of the job or project, and, in accordance with agreements with customers, appropriate records are maintained on the computer system and the Project Folder documentation.

Final signoff is confirmed using the customers own completion documentation or on the Project Schedules designed for each job as necessary.

Invoices are generated and issued to the customer upon completion of the overall project or significant milestones, in accordance with any contractual arrangements.

All work is carried out by suitably trained and experienced personnel under the supervision of senior management.

## ISO 9001:2015 CORE PROCESS

### CP3. PLANNING AND RISK MANAGEMENT

Clause 4.1, 4.2, 4.3, 6.1, 6.2

#### CONTEXT OF THE ORGANISATION

The Organisation's external and internal context is determined, identified, evaluated and reviewed through processes such as:

- Informal Discussion
- Operational, Financial and Commercial Reviews
- Board Meetings
- The Business Plan
- Project Reviews both internal and with customers
- Pre-commencement Meetings.

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Where required, the Organisation may request or retain the services of external consultants with the appropriate competence with regard to the external or internal context.

## **UNDERSTANDING THE NEEDS AND EXPECTATIONS OF INTERESTED PARTIES**

The Organisation's external and internal interested parties together with their needs and expectations have been determined and detailed in the Interested Parties Log in the Template Library.

As new interested parties are determined, their needs and expectations are added to the Interested Parties Log as necessary.

The Interested Parties Log is reviewed at least annually as part of the Management Review.

## **Scope Of The Management System**

The Scope of the Organisation's Management System has been defined and documented and is subject to periodic review to ensure its continuing relevance.

Any non-applicabilities or exclusions are specified within the Scope.

## **Risks & Opportunities And Quality Objectives**

The Organisation considers the context of the Organisation and the requirements of interested parties in order to define all relevant risks and opportunities.

As identified, the Organisation:

- Takes appropriate action to address the identified risks and opportunities.
- Integrates and implements the agreed actions throughout the Quality Management System.
- Continuously evaluates the effectiveness of the actions.

Please refer to our [Risk Register](#).

Risks and opportunities are considered as part of the following:

- Management Review.
- Contract Risk and Opportunity Reviews.
- Senior Management Team Meetings.
- Strategy/Business Plans.
- Board Meetings.

## Quality Objectives

Management is responsible for ensuring that the Organisation takes appropriate actions and documents objectives to address its:

- Compliance obligations
- Applicable requirements
- Risks and opportunities.

Suitable plans have been developed to achieve the Quality Objectives, including the required actions and resources, responsibilities, timescales and evaluation of results.

Quality Objectives are recorded on the Objectives Register in the Template Library.

The Objectives Register is reviewed and amended at regular intervals to reflect the business strategy and Quality Objectives.

## ISO 9001:2015 SUPPORT PROCESSES

### SP1. DOCUMENT MANAGEMENT

Clause 7.5

#### Documented Information General

The following items are particularly significant in contributing to the Management System(s) and ensuring the effective operation and control of its procedures:

- Management System Policies.
- Processes and Procedures.
- Required Records.
- Policies.
- The Organisation's Health & Safety System.
- Relevant standards, legislation, regulations, codes of practice, advisory information and publications.
- Relevant external documents.

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## Creating And Updating

When updating or creating documented information, the Organisation ensures that it is:

- Suitably identified and described
- In a suitable format
- Approved and reviewed for ongoing suitability and adequacy.

New document templates are approved and controlled.

When creating documented information, consideration is given to such matters as:

- Software version control
- Compatibility with technology, i.e. Tablet, Smartphone
- Accessibility for those with special needs, i.e. audio version.

## Control Of Documented Information

Documents of external origin, determined by the Organisation to be necessary for the planning and operation of the Management System, are appropriately controlled.

Templates are periodically reviewed for style and technical content prior to their issue and overall as part of the Management Review process for their continued suitability.

All system designs/drawings are considered as controlled and, as such, are recorded.

The Organisation may receive drawings, documents and/or data at the start of a job. Information provided by customers is verified by the application of the relevant procedures relating to production and service provision.

Electronic documented information is maintained and adequately protected to ensure resilience.

Records and similar documents are retained as required by legal, regulatory and/or contractual requirements.

Documents and records are reviewed and updated as required. Superseded documents are clearly identified as such if they are required for future reference, or they are withdrawn and disposed of in order to prevent the unintended use of obsolete information.

## ISO 9001:2015 SUPPORT PROCESSES

### SP2. LEADERSHIP, TRAINING & COMPETENCE

Clause 5.1, 5.3, 7.1.2, 7.1.6, 7.2, 7.3, 7.4

#### Leadership And Commitment

Top management demonstrates its leadership and commitment to the Management System by:

- Defining Management System related responsibilities
- Ensuring the implementation of the Management System and its integration into the Organisation's business processes
- Promoting the process approach and risk based thinking
- Ensuring that all required resources are available
- Understanding and meeting its customer and compliance requirements
- Focusing on continual improvement.

Please see reference material retained in the Document Library and Template Library that includes but is not limited to:

- Objectives
- Processes, Policies and Procedures
- Risk Register
- SWOT Analysis
- Internal Audits
- Management Reviews.

#### Roles, Responsibilities And Authorities

Top Management ensures that responsibilities and authorities for roles within the Management System are defined and understood throughout the Organisation.

The Responsibilities Table or Structure Chart can be found in the Document Library.

#### Resources

The Organisation ensures sufficient internal and external resources including competent people and other resources to respond to customer demands within a timescale that would be reasonably expected by the customer and the needs of the business. Any issues with adherence to deadlines are communicated to relevant parties and alternative arrangements agreed.

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The Organisation considers:

- The level of existing internal resources in terms of their capabilities and constraints
- Resources which need to be obtained from external providers.

The identification of revised or additional resources required to implement and improve the processes of the Management System takes place as part of day-to-day management as well as part of the Management Review.

### Organisational Knowledge

The Organisation determines and maintains the knowledge necessary for the operation of its processes and to achieve conformity of products and services by:

- Learning from failures, near missed situations and successes.
- Gathering knowledge from 3rd parties.
- Sharing knowledge amongst staff through mentoring and succession planning.
- Conferences.
- Benchmarking.
- Awareness sessions.
- Documented information.

### Competence And Awareness

Members of staff and other interested parties receive appropriate training during their employment for or on behalf of the Organisation. This includes the Management System(s) Policy and individual roles and responsibilities within the operation of the Management System(s) and the achievement of relevant Objectives.

Appropriate training methods and aides are used that may include:

- Internal training
- External training
- Electronic media
- Technical Manuals
- Demonstrations
- Induction training
- Plant and equipment training
- Audio/visual presentations
- Customer training

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- Supplier training
- Toolbox Talks
- One-to-one mentoring
- E-learning
- Health & Safety awareness and training
- Environmental awareness and training.

Evidence of qualifications, training certificates, licences, skills and competencies of prospective employees where specialist skills are required is obtained and recent previous employment references are requested.

Training and competency requirements may be identified as a result of:

- Performance reviews
- New personnel
- New equipment and/or technology
- Revised legal and/or regulatory requirements (e.g. Health & Safety)
- Revised industry standards
- Management Reviews
- Employee request.

Records of staff training and competence are retained and are periodically reviewed.

The effectiveness of training carried out is recorded and evaluated through the competence that has been achieved. Control of the training process is in accordance with role responsibilities and job descriptions.

For quick reference, a training/skills matrix is maintained by the Organisation identifying the key skills attained by each member of staff.

## Communication

The Organisation has identified internal and external communications relating to the Management System including:

- What the Organisation communicates.
- When the Organisation communicates.



- Who the Organisation communicates with.
- How the Organisation communicates.
- Who takes part in communications.

Information is communicated in accordance with the needs and expectations of all internal and external interested parties and when deemed necessary, a record of communication is kept.

## ISO 9001:2015 SUPPORT PROCESSES

### SP3. MAINTENANCE

Clause 7.1.3, 7.1.4, 7.1.5.2

#### Infrastructure

The Organisation ensures that a suitable environment is maintained taking into account the social and psychological factors affecting staff to provide safe systems of work and the ability to achieve conformity to product and service requirements by the implementation of the following procedures.

#### Vehicles

All Organisationally owned/leased vehicles are serviced and maintained in accordance with the manufacturer's recommendations and any applicable regulations. All service and maintenance records are retained as part of the Organisation's Quality Records.

The Organisation ensures that appropriate insurance cover is in place for all company vehicles and drivers.

The Organisation carries out checks of the Driving Licences of all staff whom it authorises to use company vehicles. Such checks are carried out at least annually and the results recorded as part of the Quality Records.

Whenever staff are required to use their own vehicles on company business, the Organisation verifies, at least annually, that the staff member holds appropriate insurance, checks the driving licence and retains a record of the checks as part of the Organisation's Quality Records.

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## Tools & Equipment

Operatives and supervisory staff monitor the performance of tools and equipment daily. Any required preventive maintenance is carried out in-house in order to ensure continuing process capability.

Under no circumstances is unserviceable or suspected faulty equipment activated or operated without prior authority or instructions.

Lifting equipment owned or hired in by the Organisation is serviced in accordance with the manufacturer's recommendations, and LOLER regulations, with suitable records of thorough examinations held on file. This includes Fork Lift Truck, Hoists and Slings.

Details of all maintenance and repairs carried out are retained as part of the Organisation's Quality Records.

Portable Appliance Testing requirements are identified by the Organisation and where required, records are maintained.

## It System

The Organisation's computer system is serviced and maintained by a member of staff with the appropriate knowledge. The Organisation also has access to an approved external IT Provider as necessary.

## Fire & Safety

The Organisation has a detailed written Fire Risk Assessment and associated Fire Emergency Plan in place for each operating site. Fire Risk Assessments are reviewed as required.

The Organisation maintains a Fire Log Book, detailing all required maintenance of fire fighting equipment and tests/drills carried out.

Adequate first aid kits, First Aiders and appropriate PPE are provided. Staff are responsible for checking its condition and for advising supervisory staff of any loss or damage. Records of all induction and ongoing PPE equipment issued are recorded.

A CoSHH Register is maintained at every operating site that is reviewed at least annually. Risk Assessments and Material Data Sheets are provided to staff as appropriate.

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In addition, the H&S Representative carries out regular formalised H&S Inspections of all warehouse areas and operating sites, and these are recorded and retained as part of the Quality Records.

Risk Assessments and Method Statements are completed in preparation for work being carried out in areas where Health & Safety is of paramount importance.

## **Waste Management**

When required, the Organisation uses only approved Licenced Waste Carriers and conducts annual checks to ensure that the appointed Waste Carriers continue to hold appropriate Licences. Waste generated on site may be returned to the Organisation or disposed of using the customer's waste management facilities.

## **Buildings & Structures**

The suitability of buildings, equipment and workspace is reviewed during Management Review and periodic internal management meetings.

A Visitor Log is maintained for access control and safety purposes.

## **Calibration**

The Organisation does not use any equipment that requires any accurate measuring/monitoring requirements. Therefore, this Section is not applicable to the nature of the Organisation's current activities. The Management Review process monitors this situation.

Should these circumstances change, any equipment used for final verification would be calibrated and traceable to National Standards or, if not possible, the methods of calibration defined.

**ISO 9001:2015 SUPPORT PROCESSES****SP4. MONITORING, MEASUREMENT, ANALYSIS & EVALUATION**

## Clause 9.1

**General**

The Organisation monitors, measures, analyses and improves its processes in order to:

- Demonstrate conformity of its activities
- Ensure conformity to the Quality Management System
- Continually improve the effectiveness of the Quality Management System.

Information obtained by analysis may relate to:

- Trends
- Operational performance
- Levels of customer satisfaction
- Overall effectiveness and efficiency.

Monitoring and measurement of processes are achieved by the implementation of Internal Audit and Management Review procedures.

The monitoring and measurement of processes are facilitated by, although not restricted to, the following:

- Quality Audit Records
- Customer Feedback Records
- Non-conformance Records
- Key Performance Indicators.

Whenever significant deficiencies are identified, appropriate action is agreed, implemented and recorded in accordance with the relevant non-conformity and corrective action procedures set out in this Management System.

**Customer Satisfaction**

Communications from customers, whether positive or negative are recorded on a Customer Feedback Log during the year and from this information the Organisation can review its performance for various aspects of the business.

Customer satisfaction is monitored throughout the project delivery process and is discussed at operational meetings.

Customer review meetings are held with significant customers at regular intervals, during which opportunities are taken to gather feedback in relation to the Organisation's performance across current and past projects.

Any testimonial feedback received from customers is reviewed and retained on file pending addition to the Organisation's marketing initiatives upon written consent having been granted by the customer.

## Analysis And Evaluation

The following are analysed in order to identify risks, trends and opportunities for corrective and/or improvement actions:

- Customer Satisfaction Monitoring Records
- Product and/or Service Conformity Records
- Product and/or service trends
- Results of Internal Audits as a measurement of the effectiveness of the Management System
- Non-conformance Records.

The analysed information is presented as critical input into the Management Review process.

## ISO 9001:2015 SUPPORT PROCESSES

### SP5. PURCHASING

#### Clause 8.4

#### Sub-Contractor Process

All new sub-contractors are required to undergo a sub-contractor appraisal process, which includes, as a minimum:

- Insurance checks and verification
- Training records and evidence
- Certification/Accreditation/registration evidence.

Sub-contractors are subject to the same site rules and safe work methods overseen by the Site Manager.

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Sub-contractors are monitored and subject to the same performance assessments as the Organisation's own staff.

The Site Manager must approve all invoices submitted by the Sub-contractor, the details are cross-checked against the Job

Sheet details and once confirmed, the invoice is passed for payment.

## Purchasing Process

Suppliers (including providers and/or sub-contractors) are assessed on their ability to provide the type, specification of product, service and quality required by the Organisation. On approval, details are given to the relevant department, to arrange credit terms, etc.

The selection of suppliers is based on the consideration of some or all of the following criteria:

- Historical usage and supply performance
- Quality of product or service
- Specialist Supplier
- Industry or management system certifications
- Customer specified
- Review of initial orders, samples or prototypes
- Completion of a Provider Quality Questionnaire
- Availability of materials.

A record of suppliers meeting the Organisation's supplier criteria is held. Before a Supplier is added, the Organisation's approval procedure is followed.

Suppliers are monitored, reviewed and re-evaluated on a regular basis to ensure that materials and/or services meet with Order requirements. This may include the completion of a Contractor Evaluation Form and/or Sub-contractor Monitoring Form.

The specific areas applicable for monitoring and measurement processes may be selected from the following aspects:

- Supplier Controls and Non-conformance Reporting
- Documentation failures
- Product quality & sustainability
- Price and delivery
- Benchmarking.

Suppliers are selected from the Approved List of Suppliers. If a product is required from an unlisted supplier, arrangements are made to review that supplier; this may include the completion of a Provider Quality Questionnaire, which includes confirming if they are to invoice us under the HMRC's Domestic VAT Reverse Accounting rules.

Purchase orders are submitted to suppliers by appropriate means, generally e-mail, referenced by the Order Number, derived from the job details, for traceability purposes. Information shown may include:

- Product and part number
- Type
- Specification
- Quantity
- Delivery Instructions
- Price quoted
- Additional information.

Whenever the Order cannot be confirmed in writing or inspected at the point of purchase, the Supplier is requested to read back the Order details in order to confirm that the requirements have been clearly understood.

On receipt of goods, an inspection is carried out in order to ensure that they conform to the original Order requirements and for any damage. Any discrepancies, i.e. shortage or damage, are noted on the Delivery/Collection Note and reported for further action.

Whenever a requirement of the product specification, additional documentation may also be requested such as:

- Certificates of Conformity
- Certificate of Testing
- Warranty
- CoSHH Data Sheets.

Discrepancies of a significant nature are documented on the Non-Conformance Log, and an email may be forwarded to the Supplier for actioning and then filed for review at Management Review.

Continual issues that arise with suppliers may result in their removal as approved suppliers

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**ISO 9001:2015 MANAGEMENT PROCESSES****MP2. CORRECTIVE ACTIONS & IMPROVEMENT**

Clause 8.7, 10

**Control of Non-Conforming Outputs**

The details of all products and services not meeting the required specification are recorded on the Non-conformance Log.

Non-conforming outputs result in one or more of the following:

- Correction of the immediate problem
- Segregation, containment, return or suspension of provision of products or services
- Informing the customer
- Obtaining authorisation for acceptance under concession.

Conformity to requirements is verified following correction and recorded on the Non-conformance Log.

Significant activities not meeting the requirements of the Management System or agreements with customers are suspended pending further action.

All materials, products, services and sub-contractor performance not meeting the required specification are clearly identified and/or segregated pending a decision regarding their further disposition.

Significant problems are addressed in accordance with the nature of the problem (e.g. staff performance issues, customer complaints etc.) and are recorded.

Actual and potential non-conformities identified can include the following:

- Customer complaints
- Failure to deliver order or service
- Failure in essential plant/equipment
- Process and Management System failure
- Quality failure that cannot be easily rectified at insignificant cost
- Damaged/defective products detected after quality release or during installation
- Faulty, shortfall or non-delivery of a purchase order or service from a provider.



The Quality Manager ensures that immediate and sufficient countermeasures are taken to correct non-conformances by repair, re-work, rectification, operational change, etc.

### **Corrective Action**

Any activities not meeting the requirements of the Management System are recorded on the Non-conformance Logs, along with any corrective actions.

An investigation is undertaken to determine the cause of each incident or non-conformance.

The corrective actions taken to prevent recurrence of non-conformances, and those records and reports generated, are regularly reviewed at Management Reviews in order to identify any trends and to determine the effectiveness of preventive measures taken.

Revised procedures are developed and implemented as considered appropriate and are reviewed accordingly.

New significant risks or opportunities may be identified as a result of the non-conformance process.

### **Continual Improvement**

The effectiveness of the Management System is continually reviewed and improved through the Management Review process and the associated Management Review Agenda.

## ISO 9001:2015 MANAGEMENT PROCESSES

### **MP3. INTERNAL AUDITS**

#### Clause 9.2

#### **Internal Audit Programme**

An Audit Programme is maintained ensuring that the Management System(s) is verified in accordance to the defined Audit Programme. The Audit Programme takes into consideration the importance of the process, with those areas considered critical being audited more frequently.

Additional Audits may be conducted outside the planned intervals depending on the following:

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- Results of previous Audits
- Organisational changes.

## Internal Audit Process

Internal Audits are carried out according to the following procedures:

- Internal Audits are scheduled and undertaken at planned intervals as per the Audit Programme which determines which parts of the Management System(s) are to be audited.
- A member of staff, independent of the activity to be audited wherever possible, is appointed to conduct the Audit.
- The Auditor refers to the Processes documented in the Management System to determine the activities to be audited.
- The Auditor advises any personnel concerned that an Internal Audit is to be undertaken and answers any questions they may have regarding the Audit.
- The Auditor audits the process, which may include all or some of the following methods:
  - Interviewing members of staff.
  - Observing the process being carried out.
  - Reviewing any records/documents.
- The Auditor maintains a record of the process audited, the evidence viewed and the findings of the Audit.
- Any non-conformities that are raised and agreed during the Audit should follow the Organisation's Non-conformance Process.
- The results of the Internal Audits are reported to relevant Management and also discussed during the next Management Review.
- All documentation relating to Internal Audits is retained for inspection by QMS International at the annual Surveillance Audit.

## • ISO 9001:2015 MANAGEMENT PROCESSES

### MP4. MANAGEMENT REVIEW

#### Clause 9.3

#### Management Review

Following certification, an initial Management Review is carried out within two months and then Management Reviews are held at an agreed frequency of no greater than six months following the Management Review Agenda.

The findings of Management Reviews are documented and retained and distributed in accordance with the Organisation's document control and communication procedures set out in this Management System.

Management Review is identified as a critical component to ensure the continual improvement of the Management System. The purpose of the reviews is to undertake an evaluation of performance to ensure that the Management System continues to be:

- Suitable – Does it still fit the Organisation, its operations and culture?
- Adequate – Is it still appropriate and sufficient?
- Effective – Does it still achieve the intended outcomes?

## • ISO 9001:2015 MANAGEMENT PROCESSES

### MP5. QUALITY MANAGEMENT SYSTEM

Clause 4.4, 6.3

#### Management System And Its Processes

The Organisation has established and operates a Management System in accordance with the requirements of the International Standard through the defined processes and documented information that can be found in:

- This QMS Connect Management System
- The Document Library
- The Template Suite
- The Organisation's Policies, Processes and Procedures stored on the MOD.

The Organisation maintains and retains documented information where required by the International Standard.

The Management System is based on the Plan-Do-Check-Act cycle as follows:

- Plan** Establish objectives, processes and resources to deliver results and to address risk and opportunity.
  - Do** Implement the plan; operate and support the process to realise the product and service.
-

- Check** Monitor, study, chart and evaluate the performance and outcomes against the targeted objectives.
- Act** Analyse to determine causes of deficiencies. Take actions to improve performance.

## The Training Cycle



### Planning Of Change

Formal changes to the Quality Management System will be used by the Organisation when changes are considered significant. Minor changes may be made without formal control, however the decision on what constitutes a significant or minor change must be agreed upon by those involved in the change.

Final authorisation for any significant changes is given by the Managing Director.

### Change Process

Proposed changes to the Management System are carried out in a planned manner and whenever deemed necessary, recorded and circulated to relevant interested parties for comment. When made, all changes are reflected in the Quality Management System and communicated to relevant interested parties.

The impact of any significant change is monitored.

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Whenever changes are recorded, they are documented on the Change Request Log/Change Implementation Plan/Change Request Form in the Template Library.

# ISO 45001:2018

## MP1.1 ISO 45001:2018 Policy

The Marisco Occupational Health and Safety Policy is managed and published on the organisation's website. To view the extant policy, click [here](#).

## MP1.2 ISO 45001:2018 Scope

### Scope Statement

Marisco has determined the scope of the management system and this is recorded on the ISO 45001:2018 Certificate as follows:

1. The Provision of Property Refurbishment and Construction Services

### Location

The scope of the management system applies to the following geographical locations:

1. Unit J5, The Fulcrum, 6 Vantage Way, Poole, BH124NU.

### No Permissible Exclusions

### Scope of the Management System

The Management System helps the Organisation to achieve the intended outcomes of its OH&S Management System, which provide value for health & safety requirements, the Organisation itself and interested parties. Consistent with the Organisation's OH&S Policy, the intended outcomes of the OH&S Management System include:

- Enhancement and continual improvement of OH&S performance
- Fulfilment of legal and other compliance obligations
- Achievement of OH&S Objectives.

It is applicable to the OH&S risks under the Organisation's control, taking into account factors such as the context in which the Organisation operates and the needs and expectations of its workers and other interested parties.

## Overview

Our management system processes are split between Core, Support and Management.

Core processes are those that are central to what the Company does to deliver its goods and services.

Support processes are those that support the core processes and enable the Company to deliver its goods and services.

Management processes include the setting of objectives and reviewing the performance of the management system against them before planning future changes to achieve continual improvement by review (Plan, Do, Check. Act cycle).



## ISO 45001:2018 CORE PROCESSES

### CP1. OPERATIONS PROCESSES

Clause 6.1.3, 9.1.2, 8.1.2, 8.1.3, 8.2

#### Planning Process

Operational control is documented and maintained by the use of procedures set out in:

- The Organisation's ISO 14001 Environmental Management System
- The Organisation's ISO 9001 Quality Management System
- The Organisation's ISO 45001 OH&S Management System
- OH&S Actions contained within the H&S Policy/System
- The Legal Register
- Training Programmes
- CoSHH Assessments and Method Statements
- The Organisation's operational procedures documents
- The Organisation's Health & Safety Management System.

The Organisation ensures that OH&S MS requirements including changes that might have an adverse impact are considered for all related organisational processes, including those specifically related to its products or services, considering each stage of its manufacture and installation, as applicable.

#### Eliminating Hazards And Reducing OH&S Risks

The Organisation has implemented and documented a process to eliminate hazards and reduce OH&S risks, using the following:

- Risk Assessments/Method Statements
- Accidents/Incidents and Near Miss data
- Safe working practices
- Work instructions
- Safe systems of work
- Monitoring of H&S Performance
- Workplace inspections.

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The process follows the Health & Safety hierarchy of controls relating to elimination of hazards and reduction of OH&S Risks.

## Management Of Change

The Organisation is responsible for assessing all proposed changes that impact the OH&S Performance and/or risk including the following:

- New products, services and processes
- Changes to existing products, services and processes
- Workplace locations and surroundings
- Work organisation
- Working conditions
- Equipment
- Workforce
- Changes to legal requirements and other requirements
- Changes in knowledge or information about hazards and OH&S risks
- Developments in knowledge and technology.

When made, all changes are reflected in the OH&S Management System or H&S document, as appropriate, and communicated to relevant interested parties.

The Organisation monitors the impact of any change and proposes further change in the event of adverse consequences.

## Emergency Preparedness And Response

The potential for and response to accidents and emergency situations across all processes are identified and documented as part of the planned response included on Risk Assessments and Method Statements or other document including an Emergency Response Plan and related communication.

Prior to or at the start of every project, any additional project-specific potential accident and/or emergency situations are also identified.

Accident and emergency response procedures are periodically tested in order to ensure that the required prevention or mitigation of any adverse impact is achieved. A record of the testing is maintained.

The Organisation provides relevant information and training related to emergency preparedness and response, as appropriate, to relevant interested parties, including persons working under its control.

Existing procedures are reviewed and revised following any unexpected incident having a significant Impact.

## Evaluation Of Compliance

The Organisation ensures that a review of its obligations is carried out and appropriate records are maintained.

Management Review activities include a review of all significant findings identified during such compliance reviews and determination of any appropriate actions which need to be taken.

## ISO 45001:2018 CORE PROCESSES

### CP2. PLANNING & RISK MANAGEMENT

Clause 4.1, 4.2, 4.3, 6.1, 6.1.2, 6.1.4, 6.2

#### Context Of The Organisation

The Organisation's external and internal context has been determined, taking into account such factors and aspects as detailed in the SWOT Analysis document in the Template Library.

The SWOT Analysis document is reviewed at least annually during Management Review and then updated accordingly.

In addition, a staff handbook is maintained incorporating all significant business Policies; this is issued to all staff on commencement of employment and following any updates.

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Communication of significant internal and external context takes place through:

- Distribution of Meeting Minutes
- Availability of the OHS Policy
- Staff Meetings
- Web site
- Chat Software
- Staff Handbook.

## Understanding The Needs And Expectations Of Workers And Other Interested Parties

The Organisation has determined its relevant interested parties, along with their requirements with regard to the Management System.

The interested parties that are relevant to the Management System are defined as:

- Customers
- Employees
- Providers
- Management Shareholders
- Statutory and Regulatory bodies
- Industry bodies
- External Audit parties
- Neighbouring residents & businesses.

The significant requirements of these interested parties include:

- The consistent provision of products and services which meet customer requirements
- The continual enhancement of customer satisfaction
- A safe and pleasant working environment
- Adherence to legal and regulatory requirements.

## Scope Of The Management System

The Scope of the Organisation's Management System has been defined and documented and is subject to periodic review to ensure its continuing relevance.

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Any non-applicabilities or exclusions are specified within the Scope.

## **Actions To Address Risks & Opportunities**

OH&S Management System planning forms part of the Management Review process.

The Organisation holds regular management and operational review meetings to set and monitor the OH&S related Objectives, ensuring that risks and opportunities are included as part of this process to the extent considered necessary.

Wherever risks and opportunities are identified in the template suite and where considered appropriate by management, suitable treatment is documented and implemented.

The Organisation's OH&S hazards relating to its activities have been identified. Detailed Risk Assessments are in place for all identified hazards and recorded in the form of Risk Assessments.

In identifying hazards, account is taken of:

- Physical processes, i.e. working at height
- Chemical and/or biological, i.e. Wile's Disease
- Psychosocial activities, i.e. stress, bullying, harassment
- Physiological, i.e. extreme temperatures
- Mechanical and/or electrical
- All personnel including sub-contractors, visitors and other interested parties
- All facilities including those provided by others.

Risk Assessments can be defined as follows:

- Generic Risk Assessments
- Site Risk Assessment
- Operational Risk Assessments
- Dynamic Risk Assessment – to identify change to a Risk Assessment during works.

Applicable legislation and regulations are identified and maintained as part of day-to-day management activities and more formally during Management Reviews and are documented within the Compliance Register held as part of the Template Suite.

The Organisation may subscribe or have access to various trade associations or websites that issue regular newsletters or similar publications that contain specific OH&S information and highlights

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revised or anticipated legal changes that have, or may have, an impact on the Organisation's identified OH&S Hazards.

The Organisation regularly reviews relevant OH&S regulations, as listed on the Government Legislation [webpage](#) and as applicable to:

- Activities
- Processes including equipment
- Materials
- Workers
- Those affected by our activities including residents, neighbours and members of the public
- Location including any special facilities needed.

Any applicable new information is copied to all relevant personnel in the form of some or all of the following:

- Noticeboards
- Toolbox Talks
- Site Inductions
- Newsletters: For example monthly topics reproduced on the back of timesheets.

Any changes to legislation are recorded within the Arrangement section which may include the following:

- H&S Policy
- Compliance Register
- Or equivalent record.

The H&S Policy, Compliance Register and any associated information are updated accordingly to reflect the amendments. Changes are identified through reference to Statutory Instruments the Government [website](#).

Arrangements are evaluated against the Health & Safety guidelines as set out by the HSE on their [website](#).

Management is responsible for ensuring that the Organisation takes appropriate actions to address its:

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- Significant OH&S Hazards and Risks
- Compliance obligations
- Risks and opportunities
- Objectives and Targets.

## OH&S Objectives

The Organisation's Objectives and Targets can take into account:

- The Organisation's compliance obligations
- The Organisation's significant OH&S Hazards
- The Organisation's technological options
- The Organisation's financial options
- The Organisation's operational options
- The Organisation's business requirements
- The views of external interested parties
- Internal feedback.

As part of Management Review, the Organisation's OH&S Hazards are reviewed in order to ensure that the information is kept up to date.

## ISO 45001:2018 SUPPORT PROCESSES

### SP1. DOCUMENT MANAGEMENT

#### Clause 7.5

#### Documented Information General

The following items are particularly significant in contributing to the Management System(s) and ensuring the effective operation and control of its procedures:

- Management System Policies.
- Processes and Procedures.
- Required Records.
- Policies.

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- The Organisation's Health & Safety System.
- Relevant standards, legislation, regulations, codes of practice, advisory information and publications.
- Relevant external documents.

## Creating And Updating

When updating or creating documented information, the Organisation ensures that it is:

- Suitably identified and described
- In a suitable format
- Approved and reviewed for ongoing suitability and adequacy.

New document templates are approved and controlled.

When creating documented information, consideration is given to such matters as:

- Software version control
- Compatibility with technology, i.e. Tablet, Smartphone
- Accessibility for those with special needs, i.e. audio version.

## Control Of Documented Information

Documents of external origin, determined by the Organisation to be necessary for the planning and operation of the Management System, are appropriately controlled.

Templates are periodically reviewed for style and technical content prior to their issue and overall as part of the Management Review process for their continued suitability.

All system designs/drawings are considered as controlled and, as such, are recorded.

The Organisation may receive drawings, documents and/or data at the start of a job. Information provided by customers is verified by the application of the relevant procedures relating to production and service provision.

Electronic documented information is maintained and adequately protected to ensure resilience.

Records and similar documents are retained as required by legal, regulatory and/or contractual requirements.

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Documents and records are reviewed and updated as required. Superseded documents are clearly identified as such if they are required for future reference, or they are withdrawn and disposed of in order to prevent the unintended use of obsolete information.

## ISO 45001:2018 SUPPORT PROCESSES

### SP2. LEADERSHIP, TRAINING & COMPETENCE

Clause 5.1, 5.3, 7.1.2, 7.1.6, 7.2, 7.3, 7.4

#### Leadership And Commitment

Top management demonstrates its leadership and commitment to the Management System by:

- Defining Management System related responsibilities
- Ensuring the implementation of the Management System and its integration into the
- Organisation's business processes
- Promoting the process approach and risk based thinking
- Ensuring that all required resources are available
- Understanding and meeting its customer and compliance requirements
- Focusing on continual improvement.

Please see reference material retained in the Document Library and Template Library that includes but is not limited to:

- Objectives
- Processes, Policies and Procedures
- Risk Register
- SWOT Analysis
- Internal Audits
- Management Reviews.

#### Roles, Responsibilities And Authorities

Top Management ensures that responsibilities and authorities for roles within the Management System are defined and understood throughout the Organisation.

The Responsibilities Table or Structure Chart can be found in the Document Library.

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## PARTICIPATION AND CONSULTATION

### Participation

Matters addressed at the Health & Safety Meeting include:

- Review of the Objectives and Targets Register
- Review of existing legislation and regulations and any changes
- Incidents and Accidents
- Near Misses
- Health & Safety performance
- Environmental health
- Procurement
- Staff training status and expected requirements
- Improvements
- Any other information as relevant.

The above provide the basis for the meeting agenda.

Employees and sub-contractors have open access to the competent person for the Organisation on a confidential basis to discuss specific or general Occupational Health & Safety matters.

### Consultation

Consultation with internal and external interested parties includes the following:

- Undertaking of risk assessments
- The introduction of new procedures or processes
- The introduction of new technology
- Changes in key personnel
- The provision of information, Instruction and training with respect to section 2 (2) C of the Health & Safety at Work Act 1974
- Feedback opportunities.

Appropriate methods of communicating OH&S information and instruction are used including:

- Circulation of written Health & Safety Risk Assessments
- H&S Meetings if held
- Toolbox Talks

- E-mail
- Memoranda
- Newsletters
- Signage.

## Resources

The Organisation ensures sufficient internal and external resources including competent people and other resources to respond to customer demands within a timescale that would be reasonably expected by the customer and the needs of the business. Any issues with adherence to deadlines are communicated to relevant parties and alternative arrangements agreed.

The Organisation considers:

- The level of existing internal resources in terms of their capabilities and constraints
- Resources which need to be obtained from external providers.

The identification of revised or additional resources required to implement and improve the processes of the Management System takes place as part of day-to-day management as well as part of the Management Review.

## Competence And Awareness

Members of staff and other interested parties receive appropriate training during their employment for or on behalf of the Organisation. This includes the Management System(s) Policy and individual roles and responsibilities within the operation of the Management System(s) and the achievement of relevant Objectives.

Appropriate training methods and aides are used that may include:

- Internal training
  - External training
  - Electronic media
  - Technical Manuals
  - Demonstrations
  - Induction training
  - Plant and equipment training
  - Audio/visual presentations
  - Customer training
  - Supplier training
-

- Toolbox Talks
- One-to-one mentoring
- E-learning
- Health & Safety awareness and training
- Environmental awareness and training.

Evidence of qualifications, training certificates, licences, skills and competencies of prospective employees where specialist skills are required is obtained and recent previous employment references are requested.

Training and competency requirements may be identified as a result of:

- Performance reviews
- New personnel
- New equipment and/or technology
- Revised legal and/or regulatory requirements (e.g. Health & Safety)
- Revised industry standards
- Management Reviews
- Employee request.

Records of staff training and competence are retained and are periodically reviewed.

The effectiveness of training carried out is recorded and evaluated through the competence that has been achieved. Control of the training process is in accordance with role responsibilities and job descriptions.

For quick reference, a training/skills matrix is maintained by the Organisation identifying the key skills attained by each member of staff.

## Communication

The Organisation has identified internal and external communications relating to the Management System including:

- What the Organisation communicates.
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- When the Organisation communicates.
- Who the Organisation communicates with.
- How the Organisation communicates.
- Who takes part in communications.

Information is communicated in accordance with the needs and expectations of all internal and external interested parties and when deemed necessary, a record of communication is kept.

## ISO 45001:2018 SUPPORT PROCESSES

### SP3. MONITORING, MEASUREMENT, ANALYSIS & EVALUATION

#### Clause 9.1

##### General

The Organisation monitors, measures, analyses and improves its processes in order to:

- Demonstrate conformity of its activities
- Ensure conformity to the Quality Management System
- Continually improve the effectiveness of the Quality Management System.

Information obtained by analysis may relate to:

- Trends
- Accidents/Incidents/Near-Misses
- Operational Performance
- Overall effectiveness and efficiency.

Monitoring and measurement of processes are achieved by the implementation of Internal Audit and Management Review procedures.

Documents used to facilitate the monitoring and measurement of processes include but are not limited to:

- OHS Audit Records
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- Accident Records
- Near-miss Reports
- Customer Feedback Records
- Non-conformance Records
- Key Performance Indicators.

Whenever significant deficiencies are identified, appropriate action is agreed, implemented and recorded in accordance with the relevant non-conformity and corrective action procedures set out in this Management System.

### Analysis and Evaluation

The following are analysed in order to identify risks, trends and opportunities for corrective and/or improvement actions:

- Customer Satisfaction Monitoring Records
- Accidents/Incidents/Near-Miss Records
- Results of Internal Audits as a measurement of the effectiveness of the Management System
- Non-conformance Records.

The analysed information is presented as critical input into the Management Review process.

### Evaluation of Compliance

The Organisation ensures that a review of its obligations is carried out and appropriate records are maintained.

Management Review activities include a review of all significant findings identified during such compliance reviews and determination of any appropriate actions which need to be taken.

## ISO 45001:2018 SUPPORT PROCESSES

### SP4. PROCUREMENT

#### Clause 8.4

#### Procurement

Contractors are assessed on their H&S criteria and their ability to provide the type, specification of product, service and quality.

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Contractors are monitored and reviewed on a regular basis.

On allocation of a service provider to a project, they can request a copy of the Site File in advance, and their staff will be required to undergo a site induction, which includes accessing and reading the Site File on site. The Site File includes:

- Project number and Site address
- Customer name and address with key contact details
- Delivery and completion dates with any billing stage payment dates
- Site conduct instructions and rules with standard HSE H&S Notice
- Health and Safety risk assessments and relevant Safe Systems of Works
- Management or Demolition and Refurbishment Asbestos Survey(s) depending upon whether the tasks involved include disturbing the fabric of the building.
- Site worker and visitors sign-in and sign-out schedules.
- Various useful info-sheets, near-miss, accident reporting, and work permit forms.
- Signatures of Site manager(s) to confirm the project has been properly planned and will be carried out in accordance with building safety standards and all appropriate Regulations.
- Emergency procedures and First Aid services
- Site Rules
- Additional information as applicable to the project.

The operatives carry out their work in accordance to the Site File, Job Specification and any other information communicated during a project timeframe.

Throughout the duration of the project, the Organisation will conduct inspections and site audits to monitor and measure OH&S performance. These may include such aspects as:

- PPE in use
- Equipment inspections
- Toolbox Talks
- Variations from the contract
- Additional aspects as relevant to the project.

Throughout the duration of the project, relevant site-specific documentation is maintained.

## Outsourcing

The Organisation ensures that OH&S requirements and appropriate controls are in place for outsourced processes that are within the Organisation's functioning and its scope of the OH&S Management System.

## ISO 45001:2018 MANAGEMENT PROCESSES

### MP2. CORRECTIVE ACTIONS & IMPROVEMENT

Clause 8.7, 10

#### Control Of Non-Conforming Outputs

The details of all products and services not meeting the required specification are recorded on the Non-conformance Log.

Non-conforming outputs result in one or more of the following:

- Correction of the immediate problem
- Segregation, containment, return or suspension of provision of products or services
- Informing the customer
- Obtaining authorisation for acceptance under concession.

Conformity to requirements is verified following correction and recorded on the Non-conformance Log.

Significant activities not meeting the requirements of the Management System or agreements with customers are suspended pending further action.

All materials, products, services and sub-contractor performance not meeting the required specification are clearly identified and/or segregated pending a decision regarding their further disposition.

Significant problems are addressed in accordance with the nature of the problem (e.g. staff performance issues, customer complaints etc.) and are recorded.

Actual and potential non-conformities identified can include the following:



- Customer complaints
- Failure to deliver order or service
- Failure in essential plant/equipment
- Process and Management System failure
- Quality failure that cannot be easily rectified at insignificant cost
- Damaged/defective products detected after quality release or during installation
- Faulty, shortfall or non-delivery of a purchase order or service from a provider.

The Quality Manager ensures that immediate and sufficient countermeasures are taken to correct non-conformances by repair, re-work, rectification, operational change, etc.

## CORRECTIVE ACTION AND IMPROVEMENT

### Corrective Action

Any activities not meeting the requirements of the Management System are recorded on the Non-conformance Logs, along with any corrective actions.

An investigation is undertaken to determine the cause of each incident or non-conformance.

The corrective actions taken to prevent recurrence of non-conformances, and those records and reports generated, are regularly reviewed at Management Reviews in order to identify any trends and to determine the effectiveness of preventive measures taken.

Revised procedures are developed and implemented as considered appropriate and are reviewed accordingly.

New significant risks or opportunities may be identified as a result of the non-conformance process.

### Continual Improvement

The effectiveness of the Management System is continually reviewed and improved through the Management Review process and the associated Management Review Agenda.

**ISO 45001:2018 MANAGEMENT PROCESSES****MP3. INTERNAL AUDITS**

## Clause 9.2

**Internal Audit Programme**

An Audit Programme is maintained ensuring that the Management System(s) is verified in accordance to the defined Audit Programme. The Audit Programme takes into consideration the importance of the process, with those areas considered critical being audited more frequently.

Additional Audits may be conducted outside the planned intervals depending on the following:

- Results of previous Audits
- Organisational changes.

**Internal Audit Process**

Internal Audits are carried out according to the following procedures:

- Internal Audits are scheduled and undertaken at planned intervals as per the Audit Programme which determines which parts of the Management System(s) are to be audited.
- A member of staff, independent of the activity to be audited wherever possible, is appointed to conduct the Audit.
- The Auditor refers to the Processes documented in the Management System to determine the activities to be audited.
- The Auditor advises any personnel concerned that an Internal Audit is to be undertaken and answers any questions they may have regarding the Audit.
- The Auditor audits the process, which may include all or some of the following methods:
  - Interviewing members of staff.
  - Observing the process being carried out.
  - Reviewing any records/documents.
- The Auditor maintains a record of the process audited, the evidence viewed and the findings of the Audit.
- Any non-conformities that are raised and agreed during the Audit should follow the Organisation's Non-conformance Process.
- The results of the Internal Audits are reported to relevant Management and also discussed during the next Management Review.
- All documentation relating to Internal Audits is retained for inspection by QMS International at the annual Surveillance Audit.

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**• ISO 45001:2018 MANAGEMENT PROCESSES****MP4. MANAGEMENT REVIEW**

## Clause 9.3

**Management Review**

Following certification, an initial Management Review is carried out within two months and then Management Reviews are held at an agreed frequency of no greater than six months following the Management Review Agenda.

The findings of Management Reviews are documented and retained and distributed in accordance with the Organisation's document control and communication procedures set out in this Management System.

Management Review is identified as a critical component to ensure the continual improvement of the Management System. The purpose of the reviews is to undertake an evaluation of performance to ensure that the Management System continues to be:

- Suitable – Does it still fit the Organisation, its operations and culture?
- Adequate – Is it still appropriate and sufficient?
- Effective – Does it still achieve the intended outcomes?

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**• ISO 45001:2018 MANAGEMENT PROCESSES****MP5.****OH&S MANAGEMENT SYSTEM**

## Clause 4.4

**Management System And Its Processes**

The Organisation has established and operates a Management System in accordance with the requirements of the International Standard through the defined processes and documented information that can be found in:

- This QMS Connect Management System
- The Document Library

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- The Template Suite
- The Organisation's Policies, Processes and Procedures stored on the MOD.

The Organisation maintains and retains documented information where required by the International Standard.

The Management System is based on the Plan-Do-Check-Act cycle as follows:

- Plan** Establish objectives, processes and resources to deliver results and to address risk and opportunity.
- Do** Implement the plan; operate and support the process to realise the product and service.
- Check** Monitor, study, chart and evaluate the performance and outcomes against the targeted objectives.
- Act** Analyse to determine causes of deficiencies. Take actions to improve performance.

The Plan-Do-Check-Act diagram can be found in the Connect system.



# ISO 14001:2015

## MP1.1 ISO 14001:2015 Policy

Marisco recognises the importance of environmental protection and is committed to operating its business responsibly and in fulfilment of its compliance obligations. It is the Organisation's declared policy to operate with and to maintain good relations with relevant regulatory bodies.

It is the Organisation's objective to carry out all necessary activities, to protect the environment and to continually improve the Environmental Management System through the implementation of the following:

- Assess and regularly re-assess the environmental effects of the Organisation's activities.
- Training of employees in environmental issues.
- Minimise the production of waste.
- Minimise material wastage.
- Minimise energy wastage.
- Promote the use of recyclable and renewable materials.
- Prevent pollution in all its forms.
- Control noise emissions from operations.

Minimise the risk to the general public and employees from operations and activities undertaken by the Organisation.

Top management demonstrates leadership and commitment with respect to the Environmental Management System by:

- Taking accountability for the effectiveness of the Environmental Management System.
  - Ensuring that the Environmental Policy and Environmental Objectives are established and are compatible with the strategic direction and the context of the Organisation.
  - Ensuring the integration of the Environmental Management System requirements into the Organisation's business processes.
  - Ensuring that the resources needed for the Environmental Management System are available.
  - Communicating the importance of effective environmental management and of conforming to the Environmental Management System requirements.
  - Ensuring that the Environmental Management System achieves its intended outcomes.
  - Directing and supporting persons to contribute to the effectiveness of the Environmental Management System.
  - Promoting continual improvement.
-

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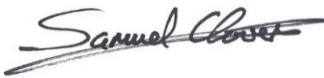
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- Supporting other relevant management roles to demonstrate their leadership as it applies to their areas of responsibility.

The Environmental Policy is communicated to all employees, external providers and other interested parties.

The Policy is regularly reviewed in order to ensure its continuing suitability.

This policy was reviewed and approved by:



Samuel R Clover



Ralph Elliott-King



Samuel Woodhams

Date of Issue: 16-09-21

Date of next Review: 01-09-2022

## MP1.2 ISO 14001:2015 Scope

### Scope Statement

Marisco has determined the scope of the management system and this is recorded on the ISO 14001:2015 Certificate as follows:

1. The Provision of Property Refurbishment and Construction Services

### Location

The scope of the management system applies to the following geographical locations:

1. Unit J5, The Fulcrum, 6 Vantage Way, Poole, BH124NU.

### No Permissible Exclusions

### Scope of the Management System

The Management System helps the Organisation to achieve the intended outcomes of its Environmental Management System, which provide value for the environment, the Organisation itself and interested parties. Consistent with the Organisation's Environmental Policy, the intended outcomes of the Environmental Management System include:

- Enhancement of environmental performance
- Fulfilment of compliance obligations
- Achievement of Environmental Objectives.

It is applicable to any organisation, regardless of size, type and nature and applies to the Environmental Aspects of its activities, products and services that the organisation determines it can either control or influence considering a life cycle perspective.



## Overview

Our management system processes are split between Core, Support and Management.

Core processes are those that are central to what the Company does to deliver its goods and services.

Support processes are those that support the core processes and enable the Company to deliver its goods and services.

Management processes include the setting of objectives and reviewing the performance of the management system against them before planning future changes to achieve continual improvement by review (Plan, Do, Check, Act cycle).

## ISO 14001:2015 CORE PROCESSES

### CP1. OPERATIONAL PROCESSES

Clause 6.1.3, 9.1.2, 8.1, 8.2

#### Planning Process

Operational control is documented and maintained by the use of procedures set out in:

- The Organisation's ISO 14001 Environmental Management System
- The Organisation's ISO 9001 Quality Management System
- The Organisation's ISO 45001 OH&S Management System
- Environmental Actions contained within Environmental Assessments
- The Environmental Legal Register
- Training Programmes
- CoSHH Assessments and Method Statements
- The Organisation's operational procedures documents
- The Organisation's Health & Safety Management System.

The Organisation ensures that environmental requirements including changes that might have an adverse environmental impact are considered for all related organisational processes, including those specifically related to its products or services, considering each stage of its life cycle.

#### Emergency Preparedness and Response

The potential for and response to accidents and emergency situations across all processes are identified during the preparation of the Environmental Aspects/Impacts Register undertaken as a component of the Environmental Management System.

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Prior to or at the start of every project, any additional project-specific potential accident and/or emergency situations are also identified.

As far as is practicable, accident and emergency response procedures are periodically tested in order to ensure that the required prevention or mitigation of any adverse environmental impact is achieved. A record of the testing is maintained.

The Organisation provides relevant information and training related to emergency preparedness and response, as appropriate, to relevant interested parties, including persons working under its control.

Existing procedures are reviewed and revised following any unexpected incident having a significant Environmental Impact.

### **Evaluation of Compliance**

The Organisation ensures that a review of its obligations is carried out and appropriate records are maintained.

Management Review activities include a review of all significant findings identified during such compliance reviews and determination of any appropriate actions which need to be taken.

## ISO 14001:2015 CORE PROCESSES

### **CP2. PLANNING & RISK MANAGEMENT**

Clause 4.1, 4.2, 4.3, 6.1, 6.1.2, 6.1.4, 6.2

#### **Context of the Organisation**

The Organisation's external and internal context is determined, identified, evaluated and reviewed through processes such as:

- Informal Discussion
  - Operational, Financial and Commercial Reviews
  - Board Meetings
  - The Business Plan
  - Project Reviews both internal and with customers
  - Pre-commencement Meetings.
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Where required, the Organisation may request or retain the services of external consultants with the appropriate competence with regard to the external or internal context.

## **Understanding the Needs and Expectations of Interested Parties**

The Organisation's external and internal interested parties together with their needs and expectations have been determined and detailed in the Interested Parties Log in the Template Library.

As new interested parties are determined, their needs and expectations are added to the Interested Parties Log as necessary.

The Interested Parties Log is reviewed at least annually as part of the Management Review.

## **Scope Of The Management System**

The Scope of the Organisation's Management System has been defined and documented and is subject to periodic review to ensure its continuing relevance.

## **Planning, Risks and Opportunities and Environmental Aspects**

Environmental Management System planning forms part of the Management Review process.

The Organisation holds regular management and operational review meetings to set and monitor the environmental related Objectives, ensuring that risks and opportunities are included as part of this process to the extent considered necessary.

Wherever risks and opportunities are identified in the template suite and where considered appropriate by management, suitable treatment is documented and implemented.

The Organisation's Environmental Aspects have been identified and the significance of their Environmental Impacts has been assessed and documented in the Aspects Register held as part of the Template Suite.

For all identified environmental aspects Environmental Assessments are prepared for all activities included within the Management System.

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Applicable legislation and regulations are identified and maintained as part of day-to-day management activities and more formally during Management Reviews and are documented within the Compliance Register held as part of the Template Suite.

The Organisation is a member of various trade associations that issue regular newsletters or similar publications that contain specific environmental information and highlights revised or anticipated legal changes that have, or may have, an impact on the Organisation's identified Environmental Aspects.

The Organisation has access to various websites including the Environmental Agency [website](#) that contains specific environmental information and highlights revised or anticipated legal changes that have, or may have, an impact on the Organisation's identified Environmental Aspects.

- Carbon Trust [website](#)
- Environment Agency [website](#)
- WRAP [website](#)
- UKELA [website](#)

The Organisation regularly reviews relevant environmental regulations, as listed the on the Government's Environmental Management [website](#).

Management is responsible for ensuring that the Organisation takes appropriate actions to address its:

- Significant Environmental Aspects and Impacts
- Compliance obligations
- Risks and opportunities
- Objectives and Targets.

## Environmental Objectives

Organisation's Objectives and Targets can take into account:

- The Organisation's compliance obligations
  - The Organisation's significant Environmental Aspects
  - The Organisation's technological options
  - The Organisation's financial options
  - The Organisation's operational options
-

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- The Organisation's business requirements
  - The views of external interested parties
  - Internal feedback.

The Environmental Assessments are reviewed, maintained and updated by the Organisation.

As part of Management Review, the Organisation's Environmental Aspects are reviewed in order to ensure that the information is kept up to date.

## ISO 14001:2015 SUPPORT PROCESSES

### SP1. DOCUMENT MANAGEMENT

Clause 7.5

#### DOCUMENTED INFORMATION

##### General

The following items are particularly significant in contributing to the Management System(s) and ensuring the effective operation and control of its procedures:

- Management System Policies
- Processes and Procedures
- Required Records
- Policies
- The Organisation's Health & Safety System
- Relevant standards, legislation, regulations, codes of practice, advisory information and publications
- Relevant external documents.

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## Creating and Updating

When updating or creating documented information, the Organisation ensures that it is:

- Suitably identified and described
- In a suitable format
- Approved and reviewed for ongoing suitability and adequacy.

New document templates are approved and controlled.

When creating documented information, consideration is given to such matters as:

- Software version control
- Compatibility with technology, i.e. Tablet, Smartphone
- Accessibility for those with special needs, i.e. audio version.

## Control of Documented Information

Documents of external origin, determined by the Organisation to be necessary for the planning and operation of the Management System, are appropriately controlled.

Templates are periodically reviewed for style and technical content prior to their issue and overall as part of the Management Review process for their continued suitability.

The Organisation may receive drawings, documents and/or data at the start of a job. Information provided by customers is verified by the application of the relevant procedures relating to production and service provision.

Electronic documented information is maintained and adequately protected to ensure resilience.

Records and similar documents are retained as required by legal, regulatory and/or contractual requirements.

Documents and records are reviewed and updated as required. Superseded documents are clearly identified as such if they are required for future reference, or they are withdrawn and disposed of in order to prevent the unintended use of obsolete information.

**ISO 14001:2015 SUPPORT PROCESSES****SP2. LEADERSHIP, TRAINING & COMPETENCE**

Clause 5.1, 5.3, 7.1.2, 7.1.6, 7.2, 7.3, 7.4

**Leadership and Commitment**

Top management demonstrates its leadership and commitment to the Management System by:

- Defining Management System related responsibilities
- Ensuring the implementation of the Management System and its integration into the Organisation's business processes
- Promoting the process approach and risk based thinking
- Ensuring that all required resources are available
- Understanding and meeting its customer and compliance requirements
- Focusing on continual improvement.

Please see reference material retained in the Document Library and Template Library that includes but is not limited to:

- Objectives
- Processes, Policies and Procedures
- Risk Register
- SWOT Analysis
- Internal Audits
- Management Reviews.

**Roles, Responsibilities And Authorities**

Top Management ensures that responsibilities and authorities for roles within the Management System are defined and understood throughout the Organisation.

The Responsibilities Table and Structure Chart can be found listed on the MOD.

**Resources**

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The Organisation ensures sufficient internal and external resources including competent people and other resources to respond to customer demands within a timescale that would be reasonably expected by the customer and the needs of the business. Any issues with adherence to deadlines are communicated to relevant parties and alternative arrangements agreed.

The Organisation considers:

- The level of existing internal resources in terms of their capabilities and constraints
- Resources which need to be obtained from external providers.

The identification of revised or additional resources required to implement and improve the processes of the Management System takes place as part of day-to-day management as well as part of the Management Review.

### **Competence And Awareness**

Members of staff and other interested parties receive appropriate training during their employment for or on behalf of the Organisation. This includes the Management System(s) Policy and individual roles and responsibilities within the operation of the Management System(s) and the achievement of relevant Objectives.

Appropriate training methods and aides are used that may include:

- Internal training
- External training
- Electronic media
- Technical Manuals
- Demonstrations
- Induction training
- Plant and equipment training
- Audio/visual presentations
- Customer training
- Supplier training
- Toolbox Talks
- One-to-one mentoring
- E-learning
- Health & Safety awareness and training
- Environmental awareness and training.



Evidence of qualifications, training certificates, licences, skills and competencies of prospective employees where specialist skills are required is obtained and recent previous employment references are requested.

Training and competency requirements may be identified as a result of:

- Performance reviews
- New personnel
- New equipment and/or technology
- Revised legal and/or regulatory requirements (e.g. Health & Safety)
- Revised industry standards
- Management Reviews
- Employee request.

Records of staff training and competence are retained and are periodically reviewed.

The effectiveness of training carried out is recorded and evaluated through the competence that has been achieved. Control of the training process is in accordance with role responsibilities and job descriptions.

For quick reference, a training/skills matrix is maintained by the Organisation identifying the key skills attained by each member of staff.

## Communication

The Organisation has identified internal and external communications relating to the Management System including:

- What the Organisation communicates
- When the Organisation communicates
- Who the Organisation communicates with
- How the Organisation communicates
- Who takes part in communications.

Information is communicated in accordance with the needs and expectations of all internal and external interested parties and when deemed necessary, a record of communication is kept.

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- ISO 14001:2015 SUPPORT PROCESSES

## **SP3. MONITORING, MEASUREMENT, ANALYSIS & EVALUATION**

### Clause 9.1

#### **General**

The Organisation monitors, measures, analyses and improves its processes in order to:

- Demonstrate conformity of its activities
- Ensure conformity to the Management System
- Continually improve the effectiveness of the Management System.

Information obtained by analysis may relate to:

- Trends
- Operational performance
- Overall effectiveness and efficiency
- Feedback from interested parties

Monitoring and measurement of processes are achieved by the implementation of Internal Audit and Management Review procedures.

Documents used to facilitate the monitoring and measurement of processes include but are not limited to:

- Internal Audit Records
- Non-conformance Records
- Key Performance Indicators

Whenever significant deficiencies are identified, appropriate action is agreed, implemented and recorded in accordance with the relevant Non-conformity and corrective action procedures set out in this Management System.

**ISO 14001:2015 MANAGEMENT PROCESSES****MP2. CORRECTIVE ACTION & IMPROVEMENT**

Clause 10

**CORRECTIVE ACTION AND IMPROVEMENT****Corrective Action**

Any activities not meeting the requirements of the Management System are recorded on the Non-conformance Log, along with any corrective actions.

An investigation is undertaken to determine the cause of each incident or non-conformance.

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**Continual Improvement**

The effectiveness of the Management System is continually reviewed and improved through the Management Review process and the associated Management Review Agenda.

**ISO 45001:2018 MANAGEMENT PROCESSES****MP3. INTERNAL AUDITS**

Clause 9.2

**Internal Audit Programme**

An Audit Programme is maintained ensuring that the Management System(s) is verified in accordance to the defined Audit Programme. The Audit Programme takes into consideration the importance of the process, with those areas considered critical being audited more frequently.

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**ISO 14001:2015 MANAGEMENT PROCESSES****MP4. MANAGEMENT REVIEW**

## Clause 9.3

**Management Review**

Following certification, an initial Management Review is carried out within two months and then Management Reviews are held at an agreed frequency of no greater than six months following the Management Review Agenda.

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**ISO 14001:2015 MANAGEMENT PROCESSES****MP5. ENVIRONMENTAL MANAGEMENT SYSTEM**

## Clause 4.4

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- Act** Analyse to determine causes of deficiencies. Take actions to improve performance.

## The Training Cycle

