

# **Environmental Management System - Internal Audit Report**

Arts University Bournemouth 20/08/2020

Scope of Audit: Audit Date: **Auditors: Alex Hobbins** 

Clause Audited			
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### **Internal Audit Report Form - Executive Summary**

**Audit Outcome:** 

Major N/Cs: Minor N/Cs: 0 Opportunities for 8 improvement:

#### Comments of the assessment team:

A remote internal audit of the Arts University Bournemouth's (AUB) environmental management system (EMS) was conducted to determine the extent to which it conforms with the requirements of ISO14001:2015. The system continues to provide an effective level of control of environmental risk and meets the clause requirements.

Signature:

Title: EcoCampus Project Manager Date: 24.08.20

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# Internal Audit Report Form – Audit Findings Summary

Ref No	Clause No	Details of non-conformances or OFIs raised	Туре
OFI I	1.2	It is recommended that the PESTLE analysis is updated to include the risks associated with a global pandemic such as Covid-19.	OFI
OFI 2	1.2	It is recommended that the 'Log of interested parties' is updated to include Derwent FM as the FM contractor for the university and halls of residence.	OFI
OFI 3	2.1	To confirm that the hazardous waste collection was received by a licensed treatment facility, the university should request either a copy of the completed part E consignment note, dated 27/02/20 (code ARTSUN/00139) or a quarterly hazardous waste return from BKP.	OFI
OFI 4	2.3	The SCSO should confirm estimated completion dates for the actions identified within the 'Risks and opportunities register (Aspects)'.	OFI
OFI 5	3.1	The 'Roles and responsibilities spreadsheet' should be updated to include the facilities management roles of Derwent FM.	OFI
OFI 6	3.3	It was noted that on the AUB web pages 'The Environment and AUB', the tab for Environmental Management System under the heading 'Environmental Sustainability' refers to the university achieving EcoCampus Gold in April 2019, however does not state the achievement of EcoCampus Platinum / ISO14001 in 2020. This is however stated under 'Our results'.	OFI
OFI 7	3.5	The waste inventory within procedures '3.5.2 Waste management' and 3.5.3 Hazardous waste management should be updated with the current waste carriers' licence for Suez (exp 20.12.19), Olleco (exp. 20.12.19) and Fedex (exp. 11.04.20).	OFI
OFI 8	4.3	The non-conformance log should be updated to include: - non-conformances raised during external audits to ISO14001:2015 details to confirm that the corrective actions have been checked for effectiveness to address the non-conformance and prevent recurrence.	OFI

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# Review of findings from previous EcoCampus audits:

Clause No	Details of Non-Conformances (NCs) or Opportunities for Improvement (OFIs) raised.	Status
Closure of	f Findings from EcoCampus Gold Audit AUB – 03 on the 10/0	4/2019:
OFI IO	A spill kit is located within the hazardous waste compound. In the event of a spillage the campus services team will be notified, however staff including cleaners and technicians have no had formal spill response training.	Closed
Evidence	Spill training was completed on the 12.11.2019	
OFI I I	To satisfy the requirements of ISO I 400 I, emergency response procedures should be tested periodically. The university should consider conducting a mock spill as part of spill response training.	Closed
Evidence	The spill training conducted on 12.11.2019 included a mock spill.	

Closure of Findings from EcoCampus Gold Audit AUB – 03 on the 05/09/2019:			
OFI I	The EMS index should be updated to state that the Compliance Obligations Register is updated at least annually.	Closed	
Evidence	EMS index has been updated.		
OFI 2	The compliance obligations register should be updated to include:  - The 2016 Environmental Permitting Regulations rather than the 2012 regulations;  - Mandatory sector requirements such as the HESA EMR returns, as listed within the Log of Interested Parties.	Closed	
	The register has been updated to include these requirements.		
OFI 3	The process for assessing significance should be documented within the EMS Index.	Closed	
	The EMS index has been updated to include the process for assessing aspects for significance.		
Min NC I	After reviewing the aspects register it was noted that some of the aspects have not been highlighted as having a compliance risk where they should.	Closed	
	The aspects register has been reviewed and updated.		
OFI 4	The SCSO should ensure that the actions identified within the aspects register to address risks and opportunities are up to date.	Closed	
	The actions listed within the risks and opportunities register has been updated.		
OFI 5	The SCSO should ensure that a date for spill training with technicians is set prior to the ISO14001 certification audit.	Closed	
	Spill training was completed on the 12.11.2019.		
OFI 6	The non-conformities and OFI's raised during internal and external audits should be added to the register of non-conformities	Open	
	NC and OFI's from internal audit have been added to the register, however, those raised during external audits have not. See section 4.3 of this report.		

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Min NC 3	The university has not developed an audit program as required by the clause 4.4 or ISO14001:2015 clause 9.2.2.	Complete
	An audit programme has been developed.	

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# **Audit Trace Record Form**

Clause No	Audit Findings and Comments	Туре
1.1	Leadership and commitment	
	Document(s) audited:	
	Governance for Environmental Sustainability	
	Minutes from Environmental Committee meeting 31/05/2019	
	Comments:	
	An opening meeting was conducted with the SCSO to discuss any	
	changes, relevant to the EMS, since the last internal audit in Sept 2019.	
	Due to the Covid-19 situation the university closed in March 2020 and	
	is due to reopen to students, in a phased opening, in Sept 2020. The	
	SCSO stated that he has temporarily moved away from environmental	
	responsibilities to assist with preparations to re-open the university.	
	Other changes highlighted include:	
	- the development of a new halls of residence adjacent to the	
	existing campus has been delayed due to Covid-19 however	
	should be ready by Oct 2020.	
	- the Sustainability Plan has been extended for a year due to	
	the university closure for several months	
	- the travel plan has also been delayed as a consultation	
	expected in June 2020 was cancelled. The plan is to be	
	revisited next year in preparation for Sept 2021.	
	- the university has now achieved Fair Trade Status.	
	- the Beryl bike scheme has been introduced at the campus	
	- the cycle to work scheme cap limit has been increased o	
	encourage more people to commute by bicycle.	
	- a TV screen at the top of the Arts Bar will be used for	
	sustainability communications when the term starts.	
	- Chili bottles are subsidised in the university shops.	
	- Previously separate water contracts have been consolidated	
	into one contract through Aquacare. They are going to be	
	monitoring the university's effluent quality once the campus re-	
	opens to determine whether there is a need for a trade	
	effluent discharge consent.	
	- Plans to install a waste segregation area within the refectory	
	to enable users to segregate waste including food waste.	
	- Additional car charging points to be installed.	

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The document 'Governance for Environmental Sustainability' describes the university's management structure and a separate reporting structure for the EMS. No changes have been made to the governance or reporting structure since the last audit. The University Secretary chairs the Environment Committee and sits on the University Leadership Team along with the Head of Campus Services. The Committee consists of members from across different functions and departments. Minutes from the last Environment Committee, held on the 14th Feb 2020, confirm that updates were provided on:

- Fairtrade
- AUB Sustainability Awards
- AUB Human
- AUBSU Initiatives
- We are Albert
- Travel plan steering group
- Water assessment water contract for new service provider Aguacare.

The next meeting is scheduled for Oct 2020 and will cover the requirements of clause 4.5 Management Review.

Finally, the Strategic Framework includes 'Sustainability' and 'Environmental' as 'Enablers' to achieve its strategic aims. The evidence viewed confirms continuing senior management commitment for the EMS.

#### 1.2 Context of the institution

Document(s) audited:

Governance for Environmental Sustainability

**PESTLE** analysis

Log of interested parties

EMS Index

#### Comments:

Environmental risks and opportunities have been determined through the university's Environmental Context Review (PESTLE analysis).

It is recommended that the **PESTLE** analysis is updated to include the risks associated with a global pandemic such as Covid-19.

The EMS is likely to have been affected by Covid-19. For example:

- the campus has closed therefore energy and water consumption and waste generation have most likely decreased, leading to an absolute reduction in carbon emissions.
- Staff and student commuting and travel patterns may change as
- the Sustainability Plan development has been put back for a year and the travel plan has been postponed until 2021.

The logo of interested parties lists all interested parties relevant to of interest' and 'influence from the university' and stipulates how they

the EMS. The register includes a risk matrix which considers the 'level

OFI I

Internal Audit Form Page 7 of 21 should be managed under 4x categories: 'Keep Satisfied', 'Manage Closely' 'Monitor', 'Keep Informed'.

It is recommended that the 'Log of interested parties' is updated to include Derwent FM as the FM contractor for the university and halls of residence.

OFI 2

The scope of EMS is documented with the EMS Index and the document 'Governance for Environmental Sustainability'. The scope covers:

"All AUB buildings used for educational purposes. This will be inclusive of buildings owned or leased and directly managed by AUB."

The SCSO discussed the university's FM contract which has been appointed to Derwent FM who currently manage the university's halls of residence at Madeira Road. After the external audit in Oct 2020, the SCSO intends to include the halls within the EMS scope.

Evidence viewed confirms that the university has determined the risk and opportunities associated with its context, identified interested parties and set the EMS scope.

### 2.1 Compliance Obligations

#### Document(s) audited:

Compliance Obligations Register

#### Comments:

The Compliance Obligations register was last updated in August 2020. The EMS Index details the process for updating the register which is done annually. The register uses the EcoCampus template to list legal requirements by category which include:

- Air and climate change
- Construction and buildings
- Water
- Nuisance
- Hazardous substances
- Conservation and biodiversity
- Waste
- Future legislation and other requirements.

The register describes the legislative requirements and other requirements such as the HESA estates management returns. It also includes further information relating to aspects, regulators, actions and controls in place, responsibilities, permits/licences and risks of non-compliance.

Evidence of compliance was provided for the waste and F-gas regulations.

#### Waste

Waste transfer notes were provided for various waste streams:

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General mixed recyclables, food waste and general waste collected by Suez:

- annual WTN for period 21,12,2019 to 20,12,2020.
- EWC code 150116 (recyclables), 200108 (food waste) and 200301 (general waste)
- SIC code 85.42/I

WCL number CBDU93554

- Signed by both parties.

A copy of Suez waste carriers licence CBDU93554 was also provided.

Consignment note for Aerosols collected by PHS:

- Code ARTSUN/19A7F
- Date 13/08/20
- EWC code 160504 aerosols
- SIC code 85.42/I
- Parts A to E completed and C and D signed.

Waste transfer note for confidential waste collected by Secure destruction and recycling:

- Date 17/03/20
- EWC codes, 200101, 200139, 200111
- WCL number CBDU136195
- Signed by both parties.

Consignment note for various chemicals, paints and WEE waste collected by BKP:

- Code ARTSUN/00139
- Date 27/02/20
- EWC codes various listed on schedule
- WCL number CBDU201880
- Parts A to D completed and signed by both parties.

To confirm that the hazardous waste collection was received by a licensed treatment facility, the university should request either a copy of the completed part E consignment note, dated 27/02/20 (code ARTSUN/00139) or a quarterly hazardous waste return from BKP.

F-Gas

An F-Gas Asset register was provided which lists all equipment containing refrigerant gas, the type of gas and quantity.

Air-conditioning maintenance was conducted by CoolTec, however the contract has been taken over by Derwent FM. F-Gas records from Cooltec confirm leak testing conducted on various pieces of equipment:

North Building:

- Asset 58124 containing 6.3kg of R410a
  - Leak tested on 18.02.20 & 15.07.20
- Asset 4467 containing 8.2kg of R410a

OFI 3

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- leak tested on 25.02.20 and 15.07.20
- Asset 4466 containing 9.1kg of R410a
  - leak tested on 25.02.20 and 15.07.20.
- Asset 4465 containing 11.7kg R410a
  - leak tested on 27.02.20 and 15.07.20.

Further records of leak testing were provided and confirmed compliance with the F-gas Regulations.

The evidence provide confirmed compliance with waste and F-gas regulations.

### 2.2 Environmental Aspects

#### Document(s) audited:

Environmental Aspects Register EMS Index

#### Comments:

The environmental aspects register was last updated by the SCSO in August 2020. The register uses the EcoCampus template to identify aspect areas, aspects and their associated impacts. Aspects are assessed for significance using a 5-point scoring methodology which is described within the EMS Index. The method allocating scores against 'severity of impact' and 'frequency/likelihood of occurrence' to give a 'significance' score. In addition, aspects that have an associated compliance risk are automatically deemed as significant.

Aspects have been scored according to the methodology and reflect

Aspects have been scored according to the methodology and reflect the activities conducted by the university. The register includes a 'life cycle analysis' which describes the actions to address the life cycle stages, where applicable, to each aspect. Risks and opportunities associated with aspects have been determined and do not appear to have changed since the last audit.

### 2.3 Planning Action

### Document(s) audited:

EMS Index

#### Comments:

A list of actions has been updated to show how the university intends to address risks and opportunities associated with its environmental aspects. Actions include:

- setting of objectives,
- using the Effective software to manage equipment maintenance, safety data sheets and COSHH records,
- contyinued monitoring of energy,
- ensuring energy efficiency is taken into account in construction,
- improving the waste compound.

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		estimated completion dates for n the 'Risks and opportunities	OFI -
.4	Environmental Objectives		
	Document(s) audited: Environmental Objectives, KPI' Sustainability Plan 2015-20 Sustainability Plan 2015-20 (Pro	·	
	which due to the Covid-19 situmonths. This is to ensure it is grelevant parties at the university keen to align the university's sudevelopment goals.  Current environmental objectives	opment of a new Sustainability Plan lation, has been postponed for 12 given adequate attention from all ty. It was noted that the VC is very ustainability plan with the 17 sustainable wes and KPI's are listed within the I's and Action Planner as follows:	
	Objective	KPIs	
	Reduce carbon emissions by 40% per head against 2005/6	Reduce site electricity consumption by 2020 in line with objective	
	baseline by 2020	Reduce site gas consumption by 2020 in line with objective	
	Reduce carbon emissions by 40% per head against 2005/6 baseline by 2020	Reduce water consumption and emissions associated with water consumption by 2020.	
	Send 0% to landfill by 2020 Increase recycling by 40% by 2020	Increase volume of waste recycled from all buildings in total by 40% by 2020	
		Identify and set target for hazardous waste generation	
	Reduce carbon emissions by 40% per head against 2005/6 baseline by 2020	Reduce carbon associated with university transport per person against 2015/16 baseline by 2020	
	Enhance biodiversity on the estate	Develop a Biodiversity Action Plan	
	Reduce the environmental impact of the institutions capital projects	Achieve BREEAM very good on all new builds	

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Progress towards objectives is documented within the Sustainability Plan Report 2018-19:

Objective	2018/19 performance	Status
Carbon – to achieve 0.336 TCO2e per head by 2020.	Achieved 0.212 TCO2e per head.	On track
Water – achieve a reduction in water consumption and associated emissions by 2020	Baseline year 0.063 TCO2e per m2 – 2018/19 achieved 0.036 TCO2e per m2. Consumption of 7,156 m3 in 2018/19 down 25% compared to 2017/18.	On track
Increase volume of waste recycled from all buildings in total by 40% by 2020	Achieved a 59% recycling rate in 2018/19.	On track
Reduce carbon associated with university transport per person against 2015/16 baseline by 2020	Achieved 1.33 TCO2e per person (staff commuting) in 2018/19 compared to 1.633 baseline. Achieved a total CO2e per head from travel of 0.211 in 2018/19 – baseline not known	On track

The SCSO provided an update against actions listed within the action planner:

- LED lighting programme is on track and is nearly completed almost complete.
- The project to install PV panels above car portal has been delayed as the Innovation Studio construction firm have portacabins in stored in front in progress.
- Programme to install light timer sensors forms part of LED lighting upgrade almost complete.
- Upgrade boilers in North building is to be reviewed with Derwent FM as solutions proposed by consultants were not innovative under review.
- Installation of CHP in North Building is no longer regarded as practical and projected benefits will lessen year on year due to alternative technologies no longer feasible.
- The BMSI software has been updated and it currently used by AUB and Derwent FM complete.

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- Investigate grey water opportunities Discussions underway with 'non-water based toilet' company. Other ideas to be considered alongside ongoing.
- Evaluation of water contract Aquacare awarded the contract with Derwent FM complete.
- Investigate waterless toilets see above.
- Conduct waste audit Complete.
- Bins labelled Complete and ongoing.
- Replace waste facility completed in October '19.
- Investigate recycling fabric there is a limited market so not currently feasible Unfeasible.
- Staff induction highlights waste management complete.
- Hazardous waste audit delayed as H&S person focussing on Covid risk assessments - ongoing.
- Hazardous waste inventory delayed due o Covid-19 ongoing.
- Implement measures in the Travel Plan Travel survey postponed until 2021 ongoing.
- New AUB fleet electric car purchased with a second being looked at prior to lockdown. Other more efficient vehicles purchased too Complete and ongoing.
- Implement measures from Biodiversity Action Plan ongoing and plans to encourage wildlife with insect hotels etc. It also forms part of the planning consent for the new halls ongoing.
- Set design specifications which include minimum environmental requirements, for all new builds All new builds will be BREEAM very good minimum Complete.

Although some of the actions have been delayed due to Covid-19, or are no longer considered feasible, most actions are in progress or have been completed by the deadlines set.

Progress towards objectives was demonstrated.

### 2.5 Environmental Policy

Document(s) audited:
AUB Environment Policy

#### Comments:

The university's Environmental Policy was reviewed and updated in February 2020 and signed by the Principal and Vice-Chancellor.

The Policy meets the requirements of the ISO14001 standard in that it includes commitments to:

- the protection of the environment, including prevention of pollution
- fulfil its compliance obligations
- continual improvement of the environmental management system to enhance environmental performance.

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	The policy is communicated through the university's website.	
3.1	Institutional Roles, Responsibilities and Authorities	
	Document(s) audited: 3.1.1 Institutional Roles, Responsibilities and Authorities Roles, Responsibilities & Training Register	
	Comments: Procedure '3.1.1 Roles, Responsibilities & Authorities' was last reviewed on the 06/08/20 by the SCSO and approved by the Head of Campus Services. The procedure details the SCSO's responsibilities for maintaining the EMS, identifying roles and responsibilities of staff relevant to the EMS and annually reporting performance of the EMS to the Environment Committee.	
	The 'Roles and responsibilities register' was last reviewed in Aug 2020. Roles and responsibilities for relevant staff and contractors have been documented.	
	The 'Roles and responsibilities spreadsheet' should be updated to include the facilities management roles of Derwent FM.  Overall, the roles and responsibilities identified reflect the activities relevant to the EMS conducted by university staff and contractors.	OFI 5
3.2	Competence and Awareness	
	Document(s) audited: 3.2 Competence and awareness Roles, Responsibilities & Training Register Email confirmation of spill training	
	Comments: Procedure '3.2.1 Competence and Awareness' was last updated on 15/08/20. Training requirements are identified and documented within the Roles, Responsibilities and Training Register. Spill training for Facilities Technicians, Technician Demonstrators, Neil Pawley, Cleaners, Security was conducted on the 12/11/19 by the SCSO. An email confirming the training was sent by the SCSO on the 03/09/19.	
	The SCSO confirmed that the internal training process has not changed since the last audit which includes: - the environmental induction and COSHH training for technicians online environmental awareness training module which forms part of staff H&S induction hosted on Praxis.	
	Derwent FM have taken over the cleaning contract from Churchills and staff are currently on furlough, however, are required to complete	

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	an online induction which includes environmental training, in the next month. This training was not viewed during this audit.	
3.3	Communication	
	Document(s) audited: 3.3.1 Internal and External Communications AUB website Comments: Procedure '3.3.1 Internal and External Communications' was last updated on the 15/08/20. The procedure describes the communications channels, website and process for dealing with enquiries and complaints.	
	The university's sustainability web pages have recently been updated and include a comprehensive range of information about environmental sustainability and a range of topics including sustainable resource management, energy, carbon & water, travel and others. It was noted that section on Environmental Sustainability provides information about the university's aims and further information on the following:  - the Sustainability Plan 2015 -20  - AUB Human  - Sustainability Awards  - Sustainable Campus  - Environmental Management System  - Biodiversity  - Sustainable Development Goals.	
	It was noted that on the AUB web pages 'The Environment and AUB', the tab for Environmental Management System under the heading 'Environmental Sustainability' refers to the university achieving EcoCampus Gold in April 2019, however does not state the achievement of EcoCampus Platinum / ISO14001 in 2020. This is however stated under 'Our results'.	OFI 6
	The External Environmental Sustainability Communications log contains one enquiry from May 2019 regarding waste furniture. The SCSO discussed other communication including:  - email to all staff from the Executive Officer and Assistant to the Chief Operating Officer regarding the university's achievement to the EcoCampus Platinum award – 07/02/20.  - email to all staff from the Vice Chancellor regarding the university's achievement of Fair-Trade status – 23/07/20.  - Minutes from the Environment Committee meeting 14/02/20  - Email from Aquacare regarding an assessment to determine whether a trade effluent discharge consent is required.  - TV screen to promote sustainability information in the entrance to the Arts Bar.	

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## 3.4 **Documented Information** Document(s) audited: 3.4.1 Documented information EMS folder structure Comments: Procedure '3.4.1 Documented Information' states that the SCSO is responsible for maintaining the EMS document system. The EMS documents are stored on a OneDrive system, to which access was provided during the audit. Procedures include details of the author, approver, review date and a separate table for version control. All procedures viewed included version control, the author and approver. 3.5 **Operational Planning and Control** Document(s) audited: - 3.5.1 Operational Control - 3.5.2 Waste management - 3.5.3 Hazardous waste management - 3.5.4 Discharges to water - 3.5.5 Emissions to air - 3.5.6 Energy management - 3.5.7 Construction - 3.5.9 Contractor control Photographs of the waste areas and hazardous waste stores. Comments: All operational control procedures were reviewed on the 15.08.20 by the SCSO. The procedures include: - 3.5.1 Operational Control - 3.5.2 Waste management - 3.5.3 Hazardous waste management - 3.5.4 Discharges to water - 3.5.5 Emissions to air - 3.5.6 Energy management - 3.5.7 Construction - 3.5.9 Contractor control. Waste management The procedures for waste and hazardous waste management describe the processes for managing both waste streams and detail staff responsibilities. The waste inventory within procedures '3.5.2 Waste OFI 7 management' and 3.5.3 Hazardous waste management should be updated with the current waste carriers' licence for Suez (exp 20.12.19), Olleco (exp. 20.12.19) and Fedex (exp. 11.04.20).

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The SCSO provided photographs of the waste areas and hazardous waste stores to confirm current storage arrangements. It was noted that the university is currently closed to students therefore waste collections have been significantly reduced.

The hazardous waste compound includes an IBC for WEEE waste, a bunded cabinet for workshop waste and bunds for drums/containers of waste as shown below.





It was noted that the WEEE waste container requires emptying. The main waste compound contains wheelie bins for recycling and general waste:



Procedure '3.5.4 Discharges to water' indicates that the site does not have an environmental permit or consent to discharge therefore no evidence was viewed. However, the SCSO provided an email from Aquacare, the new water contractor, confirming that they would assess whether a trade effluent discharge consent was required for the campus.

Procedure '3.5.5 Emissions to air' describes the processes for air-conditioning/refrigeration equipment, boilers and fume cup board maintenance and testing. F-gas records were viewed to assess compliance – see section 2.3 of this report.

Procedure '3.5.6 Energy management process' explains the BMS controls for heating & cooling, energy monitoring processes, completion of DEC's and carbon management and energy efficiency opportunities. Section 2.3 of this report discusses progress towards

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carbon management actions. BMS controls were not assesses during this audit.

Procedure '3.5.7 Construction' lists responsibilities for construction projects. The procedure provides information on how the university considers sustainability in the design, demolition and construction phases for new buildings and refurbishments. The following are to be considered for each project:

- the most appropriate sustainability assessment methodologies BREEAM and RICS SKA.
- Key priority areas for sustainability.
- Energy and water standards e.g. insulation, ventilation efficiency, lighting and heating.
- Waste minimisation strategy.
- Pollution prevention measures to be implemented during demolition and construction phases.
- Targets for biodiversity preservation and enhancement.
- Contractor control processes process 3.5.9 Contractor control.
- Monitoring targets and KPI's.

The process appears robust however, was not assessed in detail during this audit.

Procedure '3.5.9 Contractor control' describes the processes for ensuring contractors are aware of the environmental risks and how to control them. The site induction includes a section on the environment which covers environmental hazards, use and storage of chemicals, waste disposal and emergency response processes. A permit to work system is in place. Specific permits may be required for contractors working with chemicals or equipment containing refrigerant gases. The 'Contractor Health & Safety Site Induction' was viewed during the last internal audit.

The operational control procedures appear to be robust and although not all of them were assessed in detail, due to the audit being conducted remotely, they demonstrate an effective level of control of environmental risks.

### 3.6 Emergency Preparedness and Response

#### Document(s) audited:

3.6.1 Emergency preparedness and response Guide for chemical spill response planning

#### Comments:

Procedure 3.6.1 Emergency preparedness and response describes the process for identifying preventing and responding to emergency situations. At the last audit the SCSO discussed the environmental risk

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	assessments conducted transportation of chemicals around campus. Since then, spill training including a mock spill test was conducted on the 12/11/19, with key staff who were identified as responsible for hazardous substances.  The 'Guide for chemical spill response planning' describes the actions to be taken to address spillages including bagging up, labelling and disposing of contaminated materials as hazardous waste.  The site has a limited number of environmental risks however risk assessments for relevant activities and training has been conducted for relevant staff.	
4.1	Monitoring, Measuring, Analysis and Evaluation	
•••	Tomesting, Francisco, Francisco and Evaluation	
	Document(s) audited: 4.1.1 Monitoring, measuring, analysis and evaluation Annual report 2017/18	
	Comments: Procedure 4.1.1 Monitoring, measuring, analysis and evaluation explains how the university monitors and reports environmental performance. The procedure states that the SCSO conducts an annual evaluation and reporting of trends through the Environment Committee. The annual report for 2018/19 was viewed and provides a breakdown of performance against objectives and other data for:  • Minimizing emissions and utility usage • Sustainable Resource Management • Reducing emissions associated with travel • Managing the estate efficiently • Developing staff and student awareness and engagement • Promoting biodiversity and Fairtrade. Performance against objectives is discussed in section 2.4 of this report.	
4.2	Evaluation of Compliance	
	Document(s) audited: Various waste and F-gas records.	
	Comments:	
	See section 2.1 of this report.	
4.3	Nonconformity and Corrective Action	
	Document(s) audited:	
	4.3 Nonconformity and Corrective Action	
	Incident report form	

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# Comments: Procedure 4.3.1 Nonconformity & corrective action describes the process for identifying, assessing and taking action to address nonconformances. Incidents are to be reported to the SCSO using the Environmental Incident report form which has three sections: - Part A - incident details, date, time, description - Part B - Corrective action, person responsible, date - Part C - Incident closed out, signature. No incidents have been reported through the EMS to date. The 'Non-conformance log' lists all the non-conformances and corrective actions raised during internals audits. The log does not however, list the NC's or OFI's raised during the external audits. In addition, there is no detail of whether the corrective actions taken have been assessed for effectiveness as required by the clause. OFI8 The non-conformance log should be updated to include: - non-conformances raised during external audits to ISO14001:2015. - details to confirm that the corrective actions have been checked for effectiveness to address the non-conformance and prevent recurrence. **Internal Audit** Document(s) audited: 4.4.1 Internal audit Internal audit report - 05.09.2019 ISO14001:2015 Audit Schedule Comments: This audit is the second internal audit of the EMS. The first was conducted in September 2019 and the report identified nonconformance and OFI's which are listed in the non-conformance log. An audit schedule has been developed which provides audit dates from 2017 to 2022. **Management Review** Document(s) audited: Unconfirmed minutes from Environmental Committee meeting Environmental Management Systems report 2019

4.4

4.5

Comments:

Environment Committee meeting.

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The Management Review was conducted as part of the October 2019

Minutes from the last Environment Committee meeting in May 2020 were viewed. See section 1.1 of this report for further details.

The Environmental Management Systems report 2019 was discussed at the Environment Committee and covers the requirements of the clause following the agenda below:

- I. Actions from previous management reviews
- 2. Progress towards Environmental Objectives
- 3. Environmental performance
  - a. Findings from internal audits
  - b. Findings from evaluation of compliance including compliance status
  - c. Findings from external audits
  - d. Status of corrective actions
- 4. Changes in external and internal issues relevant to the EMS, the needs and expectations of interested parties, compliance obligations, significant environmental aspects and risks and opportunities.
- 5. Communications including complaints
- 6. Resources for the EMS
- 7. Opportunities for improvement
- 8. AOB

The report provides details against all the agenda items demonstrating conformance with the clause requirements.

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