

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

Scope of Audit: Arts University Bournemouth

Audit Date: 26/08/2021 Auditors: Alex Hobbins

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EcoCampus Requirements	Clause Audited		
Bronze Phase -Planning			
I.I Leadership & Commitment			
1.2 Context of the Institution	$\boxtimes$		
Silver Phase - Implementing			
2.1 Compliance Obligations	$\boxtimes$		
2.2 Environmental Aspects	$\boxtimes$		
2.3 Planning Action	$\boxtimes$		
2.4 Environmental Objectives			
2.5 Environmental Policy	$\boxtimes$		
Gold Phase - Operating			
3.1 Institutional Roles, Responsibilities & Authorities	$\boxtimes$		
3.2 Competence & Awareness	$\boxtimes$		
3.3 Communication	$\boxtimes$		
3.4 Documented Information	$\boxtimes$		
3.5 Operational Planning & Control	$\boxtimes$		
3.6 Emergency Preparedness & Response	$\boxtimes$		
Platinum Phase — Checking & Correcting			
4.1 Monitoring, Measuring, Analysis & Evaluation			
4.2 Evaluation of Compliance   ⊠			
4.3 Non-Conformity & Corrective Action	$\boxtimes$		
4.4 Internal Audit	$\boxtimes$		
4.5 Management Review			

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

**Audit Outcome:** 

Major N/Cs: 0 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: 26.08.21

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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	2.1	The university should ensure that all WTN's include the relevant SIC code – 85.42/I Higher education. The July '21 WTN from ECS for empty toner cartridges did not include a SIC code for the university which should be 85.42/I.	OFI
OFI 2	3.1	The 'Roles and responsibilities register' should be updated to remove reference to the Chief Operating Officer.	OFI
OFI 3	3.2	An OFI has been raised to update the training register and training matrix to include:  - Carbon literacy training scheduled for students in Oct/Nov 21 and staff in 2022.  - C21 into the training register – SDGs are being incorporated into the curriculum.  - Update the training matrix:  o to replace the heading for 'toolbox talks' with 'staff induction' which includes Environmental Awareness, Emergency response and reporting, energy and waste awareness.  o To demonstrate that toolbox talks to cover 'Use, transport and disposal of hazardous substances' and 'Emergency spill response'.	OFI
OFI 4	3.2	Derwent FM have ISO14001 certification however, it would be useful for the SCSO to review the operational control and training provided to staff.	OFI
OFI 5	3.5	The waste inventory within procedure 3.5.3 Hazardous waste management should be updated to include J&G Environmental who take photographic chemical waste from the photography department.	OFI
OFI 6	3.5	It was noted that there were several containers of chemical and several drums, some of which were stored in drip trays, however, some were stored on the floor within the waste store. In addition, there was a large amount of WEEE waste. It is recommended that the waste is removed prior to the external ISO14001 audit.	OFI
OFI 7	3.6	As spill training was last conducted in 2019, refresher training should be conducted once the university is fully open and operational in Oct/Nov 2021.	OFI

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OFI 8	4.3	The Non-conformance log does not fully satisfy the	OFI
		requirements of the clause in that:	
		- The root cause of the NC should be identified and	
		document	
		<ul> <li>Corrective actions should be checked for</li> </ul>	
		effectiveness.	
		It is suggested that the NC log is amended to include a	
		section for document the 'root cause' of the NC (column	
		before the corrective action) and an additional section	
		entitled 'Check for effectiveness of corrective action' (column	
		after corrective action).	

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# **Audit Trace Record Form**

Clause	Audit Findings and Comments	Туре
No		
1.1	Leadership and commitment	
4.5	Management Review	
	Document(s) audited:	
	Governance for Environmental Sustainability	
	Minutes from Environmental Committee meeting 07/05/2021	
	ENV 07 05 21 Agenda and papers	
	Comments:	
	An opening meeting was conducted with the SCSO to discuss any	
	changes, relevant to the EMS, since the last internal audit in Sept 2020.	
	The changes discussed include:	
	- The Chief Operating Officer has left the university and is not	
	being replaced.	
	- The New Campus Halls are complete and will be utilised	
	properly in September when students start back. The halls	
	have solar PV installed.	
	- The Campus Halls and Madeira Road Halls waste contracts are	
	being taken over by the university through Suez. These will	
	come into the EMS scope in Nov 2021.	
	- The new Innovation Studio is almost complete.	
	- The VC has committed to achieving net zero emissions by	
	2030.	
	- The university has introduced the sustainable development	
	goals into the curriculum C21.	
	- The SCSO discussed the approach to developing a pathway to	
	carbon neutrality including a heat decarbonisation plan. This	
	aims to outline a timeline for moving away from gas boilers.	
	- Potential geothermal opportunity just outside the campus in	
	Bournemouth.	
	- The existing Travel Plan expires in 2021 so a new 2030 plan is	
	being written in conjunction with consultant.	
	- The Sustainability Awards for students were presented at	
	graduation.	
	- The SCSO discussed the plans to incorporate various	
	environmental plans such as the carbon net zero plan and	

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biodiversity action plan into one overarching sustainability plan which will run to 2030.

The document 'Governance for Environmental Sustainability' describes the university's management structure and a separate reporting structure for the EMS. The only change since the last audit is the removal of the COO.

Senior Management commitment for sustainability is supported by the new AUB University Strategy which includes the wording: "We will accelerate the activities and actions that have already seen us achieve platinum status as an Eco-Campus. By embracing the UN Sustainable Development Goals we will target a net-zero carbon commitment, predicated on renewable energies, decarbonisation, and green building practices."

# Management review

The Environment Committee continues to conduct management reviews. The EMS annual report 2019-20 was presented to the committee on the 16<sup>th</sup> Oct 2020 and covered all the requirements of the management review including:

- 1. 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.

Additional minutes were provided for the last Environment Committee held on the 7<sup>th</sup> May 2021. The meeting covered the following:

- Environment Policy
- Guest speakers lecturers from 'Performance, Design and Film Costume' regarding embedding sustainability into the course.
- Speaker from the Fairtrade Foundation
- AUB Fairtrade Planning 5-year SMART Plan
- AUBSU End of Year Report
- AUB Human
- Sustainable Research Groups
- Sustainable Procurement Policy
- Carbon net zero the VC has signed the global climate letter to achieve carbon net zero by 2030.

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	The evidence provided confirms continuing 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	
	<ul> <li>Comments:</li> <li>Since the last audit: <ul> <li>the PESTLE analysis has been updated to include reference to Covid-19. However, no other changes were made.</li> <li>The log of interested parties has been updated to include Derwent FM.</li> </ul> </li> <li>No other significant changes have been made since the last internal audit in August 2020.</li> </ul>	
2.1	Compliance Obligations	
	Document(s) audited: Compliance Obligations Register Waste records Display energy certificates F-Gas records	
	Comments: The Compliance Obligations register was last updated in August 2020 and is fully up to date. The register which has not changed since the last audit, uses the EcoCampus template to list legal requirements by category which include:  - Air and climate change - Construction and buildings	
	<ul> <li>- Water</li> <li>- Nuisance</li> <li>- Hazardous substances</li> <li>- Conservation and biodiversity</li> <li>- Waste</li> <li>- Future legislation and other requirements.</li> </ul>	
	Evidence of compliance was provided for the waste, energy and F-gas regulations.	
	Waste Waste transfer notes were provided for various waste streams:	
	WTN for confidential waste collected by the Shredding Alliance: - Date – 17.08.21 20 bags of paper - EWC code 200101 (paper),	

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- SIC code 85.421
- WCL number CBDU136195
- Signed by both parties.

WTN for empty toner cartridges collected by the Effective Consumable Solutions Ltd:

- Date 21.07.20.
- Empty toner cartridges EWC code 080318,
- SIC code not present
- WCL number CBDU 171046.

The university should ensure that all WTN's include the relevant SIC code – 85.42/I Higher education. The July '2I WTN from ECS for empty toner cartridges did not include a SIC code for the university which should be 85.42/I.

OFI I

Consignment note for WEEE waste collected by Suez:

- Code ARTSUN/
- Date 27/04/21
- EWC codes 200135
- WCL number CBDU93534
- Parts A to D completed and signed by both parties.

Quarterly hazardous waste return from J&G Environmental were also viewed for photographic chemicals.

### **DEC's**

Display energy certificates were recently re-issued for all university buildings. Three up to date DEC's viewed were all issued on the 16.08.21

- West Building Rating A
- Block B rating C
- Library rating C.

### F-Gas

The AUB F-Gas log details equipment containing refrigerant gas including the asset number, make and model, location, serial number, installation date, type of gas and quantity. Servicing dates are also listed for all pieces of equipment.

Air-conditioning maintenance is conducted by Accolade Building Care Ltd via the facilities management company Derwent FM. F-Gas records for April, May and July were provided. The records included:

- Details of the PPM schedule works to be conducted including leak testing, see image below.
- Spreadsheets confirming the competition of the works.

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Asset Nº: 01423 Location: Library South Manufacturer: Toshiba

Outdoor Model No: RAV-SM1104AT8-E

Serial Nº: 72100278 Refrigerant: R410a 2.8kg

Date: 2017

Notes: brushed the coil, and sprayed down with mains water, visually inspected and completed

refrigerant leak check.



The asset register was cross referenced with the F-gas logs to confirm that works had been completed as required. For example:

- Asset no. 01423, shown above is an external condenser containing 2.8kg of R410a. The works were completed on the 22/07/2021 by Benjamin Grant.
- Qualification records for City in Guilds Level 2 award in F-Gas and ODS Regulations – provided for Benjamin Grant.
- PPM checks include leak check.

The F-Gas certificate for Accolade Building Care Ltd (REF1009447) was provided and is valid until March 2023.

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

#### 2.2 **Environmental Aspects**

#### 2.3 Planning action

Document(s) audited:

**Environmental Aspects Register** 

**EMS Index** 

#### Comments:

The environmental aspects register was reviewed by the Environment Committee in October 2020 however no changes were made. Risks and opportunities associated with aspects have been determined and do not appear to have changed since the last audit. The register lists actions to address risks and opportunities associated with environmental aspects. Timelines for completion have been included within the plan as recommended during the last internal audit.

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# 2.4 **Environmental Objectives**

# 4.1 Monitoring, Measuring, Analysis and Evaluation

# Document(s) audited:

Environmental Objectives, KPI's and action planner

## Comments:

Current environmental objectives and KPI's are listed within the 'Environmental Objectives, KPI's and Action Planner as follows:

Environmental Objectives, KPI's and Action Planner as follows:			
Objective	KPIs		
Reduce carbon emissions by	Reduce site electricity consumption by 2020 in line with objective		
40% per head against 2005/6 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		

It was noted that most of these objectives have been extended until 2021 until a new sustainability plan is developed.

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 2019/20 was viewed and provides a breakdown of performance against objectives and other data for:

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- 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.

Progress towards objectives is documented within the Sustainability Plan Report 2019-20:

Objective	2018/19 performance	Status
Carbon – to achieve 0.336 TCO2e per head by 2020.	Achieved 0.164 TCO2e per head.	Achieved
Water – achieve a reduction in water consumption and associated emissions by 2020	42% reduction between 2014/15 to 2019/20. Excluding lockdown - 29% reduction between 2014/15 to 2018/19	Achieved
Increase volume of waste recycled from all buildings in total by 40% by 2020	Achieved a 57% recycling rate in 2019/20.	Achieved
Reduce carbon associated with university transport per person against 2015/16 baseline by 2020	Achieved 0.528 TCO2e per person (staff commuting) in 2018/19 (lockdown year) compared to 1.633 baseline. Achieved a total CO2e per head from travel of 0.159 in 2019/20.	Achieved

Progress towards objectives was demonstrated however it was noted that the campus lockdown will have affected the results in 2019/20 and may do so again in 2020/21.

# 2.5 Environmental Policy

## Document(s) audited:

**AUB Environment Policy** 

#### Comments:

The university's Environmental Policy was reviewed and updated in February 2021 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 3.2	Institutional Roles, Responsibilities and Authorities Competence and Awareness	
	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 15/08/21 by the SCSO and approved by the Head of Campus Services. The procedure has not changed since the last audit and 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 updated in Aug 2020.  The 'Roles and responsibilities register' should be updated to remove reference to the Chief Operating Officer.	OFI 2
	Procedure '3.2.1 Competence and Awareness' was last updated on 15/08/22. Training requirements are identified and documented within the Roles, Responsibilities and Training Register.	
	<ul> <li>An OFI has been raised to update the training register and training matrix to include: <ul> <li>Carbon literacy training scheduled for students in Oct/Nov 21 and staff in 2022.</li> <li>C21 into the training register – SDGs are being incorporated into the curriculum.</li> <li>Update the training matrix:</li> </ul> </li> </ul>	OFI 3
	<ul> <li>to replace the heading for 'toolbox talks' with 'staff induction' which includes Environmental Awareness, Emergency response and reporting, energy and waste awareness.</li> <li>To demonstrate that toolbox talks to cover 'Use, transport and disposal of hazardous substances' and 'Emergency spill response'.</li> </ul>	
	Derwent FM are the facilities management service provider and also manage the air-conditioning maintenance contract. <b>Derwent FM</b> have ISO14001 certification however, it would be useful for the SCSO to review the operational control and training provided to staff.	OFI 4
3.3	Communication	
	Document(s) audited:	

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# 3.3.1 Internal and External Communications AUB website Minutes from Environmental Committee meeting 07/05/2021 ENV 07 05 21 Agenda and papers External Environmental Sustainability Communications Log Comments: Procedure '3.3.1 Internal and External Communications' was last updated on the 15/08/21. No external communications have been recorded on the communications log since April 2019. Communications discussed include: The TV screen in the entrance to the Arts Bar which provides sustainability related information. - Environment committee meetings - Staff induction – currently run online - AUB human online sustainability event - Sustainability awards - graduation included separate call up online. - C21 - embedding sustainability in the curriculum It was noted that a number of key campaigns, led by the SU, were highlighted at the last environment committee including:

- Fairtrade fortnight
- Go green week
- Tech for trees
- Ethos for change
- AUBSU Green zine.

### 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

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- 3.5.5 Emissions to air
- 3.5.6 Energy management
- 3.5.7 Construction
- 3.5.9 Contractor control

Photographs and video 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.

The procedures have not changed significantly since the previous internal audit and due to Covid-19, campus activities have been limited.

## Waste and hazardous waste management

The procedures for waste and hazardous waste management describe the processes for managing both waste streams and detail staff responsibilities. Both procedures include waste inventories which list the waste streams, contactors and their applicable licences.

The waste inventory within procedure 3.5.3 Hazardous waste management should be updated to include J&G Environmental who take photographic chemical waste from the photography department.

The SCSO conducted a video tour of the waste store which holds WEEE waste, empty COSHH containers, bottled chemical waste, waste batteries, drum waste and a cabinet with waste paints. It was noted that there were several containers of chemical and several drums, some of which were stored in drip trays, however, some were stored on the floor within the waste store. In addition, there was a large amount of WEEE waste. It is recommended that the waste is removed prior to the external ISO14001 audit.

#### Discharges to water

The SCSO highlighted that the wastewater provider Aquacare are going to assess the need for a new trade effluent discharge consent however, this has been delayed until the campus is in full operational in Sept / Oct 2021 when they will conduct an effluent analysis.

# **Contractor control**

OFI 5

OFI 6

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	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, viewed in the previous audit, includes a section on the environment which covers environmental hazards, use and storage of chemicals, waste disposal and emergency response processes. An image of the contractor's sign-off sheet was provided.  The operational control procedures appear to be robust and	
	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 Chemical spill risk assessment - environment AUB Chemical spill response guide  Comments: Procedure 3.6.1 Emergency preparedness and response was reviewed on the 15.08.21 and no changes were made since the last audit. The procedure describes the process for identifying preventing and responding to emergency situations. The 'AUB chemical spill response guide - outside' describes the actions to be taken to address spillages including use of spill kits to prevent the spill spreading, cleaning it up, disposing and reporting. Spill training including a mock spill test was last conducted on the 12/11/19.  As spill training was last conducted in 2019, refresher training should be conducted once the university is fully open and operational in Oct/Nov 2021.	OFI 7
4.3	Nonconformity and Corrective Action Internal audit  Document(s) audited: 4.3 Nonconformity and Corrective Action Incident report form 4.1 Internal audit Internal audit report - 05.09.2019 ISO14001:2015 Audit Schedule  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.	

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No incidents have been reported through the EMS to date.

The 'Non-conformance log' lists all the non-conformances and corrective actions raised during internal and external audits. The log contains the NC's from audits since 2017 however the last external audit report has not been received so issues raised have not yet been documented.

The Non-conformance log does not require that corrective actions are checked for effectiveness. It is suggested that the NC log is amended to include a section for document the 'root cause' of the NC (column before the corrective action) and an additional section entitled 'Check for effectiveness of corrective action' (column after corrective action).

This audit is the third internal audit of the EMS. The last was conducted in August 2020 and the report identified non-conformance and OFI's which are listed in the non-conformance log. Previous audit reports are stored within the document register.

OFI 8

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