



NQA MANAGEMENT SYSTEMS

SURVEILLANCE PROCESS AUDIT

REPORT

UNIVERSITY OF SOUTHAMPTON

VISIT NUMBER:

704634

**DATE OF OPENING
MEETING:**

16/07/2024

**THIS REPORT HAS
BEEN PREPARED BY:****REGIONAL ASSESSOR:**

Joseph Nehikhare

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Joseph.nehikhare@nqa.com

APPLICABLE STANDARD(S):

ISO 14001:2015





AUDIT REPORT PART A - EXECUTIVE SUMMARY

Client Information

Primary Contact:	Sarah Puckett & Adam Tewkesbury		
Address:	University of Southampton, Highfield, Southampton, SO17 1BJ		
Contact Tel:	023 8059 6679 / 07771 389 195		
Contact Email:	A.J.Tewkesbury@soton.ac.uk		
Billing Contact:	As above		
Billing Tel:	As above		
Billing Email:	As above		
Audit Conducted at:	Head Office (multi-site certification) <input type="checkbox"/>	Participating / Temporary Site (multi-site certification) <input type="checkbox"/>	Single Site Certification <input checked="" type="checkbox"/>
Audit Conducted as:	Fully On-Site <input type="checkbox"/>	Blended (On-Site / Remote) <input checked="" type="checkbox"/>	Fully Remote <input type="checkbox"/>
System integration (integrated audits only):	None		
Additional information on integration (if required):			
Certificate expiry date(s):	UKAS(E 8740) Expiry: 07/08/26		
Required changes to EAC or NQA Codes applied:	No changes required		
	At this location	Across all locations (Multisite)	
Total employees	5500		
Repetitive or parallel workers			
Energy engaged employees			
Energy consumption			
Energy uses			
Energy sources			

Energy data only applicable for ISO 50001 audits. Further guidance available in ASR 47:2.1

The date of the next audit is:

[Click here to enter a start date.](#) to [Click here to enter a finish date.](#)

Audit Information

Total audit duration (in days):	3	Duration conducted remotely (in days):	1
Scope of certification:	Provision of Higher Education and related support services at the University of Southampton Scope is appropriate. Scope is appropriate.		

Confirmation that audit objectives have been fulfilled: All objectives met.

If no, which objectives have not been met including if remote auditing issues prevented the full completion of audit. Note that customers with installation/service activities within their scope must receive a minimum of one on-site visit once per cycle. Failure to achieve this may result in this activity being removed from the client's scope of certification.

NQA Audit Team		Client	Position	Attendance
Lead Assessor	Joseph Nehikhare	Adam Tewkesbury	Associate Director for Environment and Sustainability	Opening and Closing
Member 2		Sarah Puckett	Environment & Sustainability Manager	Opening and Closing

** Mandatory attendance at OHSAS18001 / ISO45001 Audits. If these mandatory positions are not present at closing meeting, record and justify reasons in the Executive Summary.*

Details of Changes

Type of action or change required	Action Required	Notes
Client Name Change:	<input type="checkbox"/>	
Change of Address:	<input type="checkbox"/>	
Scope Change:	<input type="checkbox"/>	
Contact Change:	<input type="checkbox"/>	
Number of Employees Change:	<input type="checkbox"/>	
Major NCs Raised:	<input type="checkbox"/>	
Special Visit Recommended:	<input type="checkbox"/>	
Remote Audit Issue:	<input type="checkbox"/>	
Other:	<input type="checkbox"/>	

Executive Summary

This surveillance visit was undertaken on-site at various locations in scope at the University of Southampton. This was to evidence conformance with the International Standard ISO 14001:2015 and Eco-Campus Platinum award.

The Universities context is well defined, leadership has been effectively demonstrated and commitment levels are evident.

This is reflected in the levels of compliance with requirements and operational control evident at the University during the audit process. The availability of documented information to demonstrate that the system is well implemented and well understood throughout the University is acceptable.

This audit has involved a review of system administration activities, a review and sample of site activities at University of Southampton, Highfield, Southampton, SO17 1BJ, as well as review of job-related records.

It was fully evident that the key policy commitments are being adhered to.

The areas visited are listed below.

- **Achers Roads – - halls of residence (Romero & Gately)**
- **SJM Foyer – Catering, Common learning spaces, Lecture theatre**
- **Jubilee Sports Centre, (swimming pool, gym etc)**
- **Osheen - Campus Waste Manager**
- **Micheal – Campus Services Manager**
- **Landscaping**
- **Towing Tank Lab**
- **Maintenance**
- **Energy Management Process**

During the surveillance visit, the following findings have been closed out from previous findings

- 0 x Major Non-conformance
- 3 x Minor Non-conformance
- 3 x Opportunities for Improvement

The following findings have been raised during this surveillance visit.

- 0 x Majors NC
- 1 x Minor NC
- 4 x OFI

Full details of raised findings can be found within the audit findings table section of report.



AUDIT REPORT PART A - EXECUTIVE SUMMARY

Major NCs	0	Minor NCs	1	OFls	4	BP	0
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Is there any conflict of interest which exists between the Auditor(s) and the client, and are there any situations known to them that present themselves, or NQA, with a potential conflict of interest in respect to the audit undertaken.	No.
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Audit Conclusion

- This visit was Satisfactory: Continuation or granting of certification is recommended, however Non-Conformances have been identified. You must take action as detailed below
- Minor Non-Conformances have been identified
- Any findings are as detailed on the following page(s).

Audit Follow-up Actions

The following post-audit action(s) shall be taken by the client: CAPs to be completed and sent by the client to caps@nqa.com within 3 months.

Please note that certification will not be granted, reissued or revised until all outstanding Non-Conformance responses have been submitted, and in the case of Major Non-Conformances, the evidence of corrective action has been provided to, and accepted by, NQA.


For further information, useful guidance and further support for responding to audit findings, please visit <https://www.nqa.com/en-gb/clients/non-conformities>

Management system performance, such as trends in audit findings that require further investigation at the next recertification audit.

Mandatory completion at the Head Office Audit of Surveillance Year 2

Detail that the previous Recertification (or Stage 2), Surveillance 1 and Surveillance 2 results have been reviewed and whether there are any trends in non-conformities or other issues which require further investigation at the next Recertification audit.

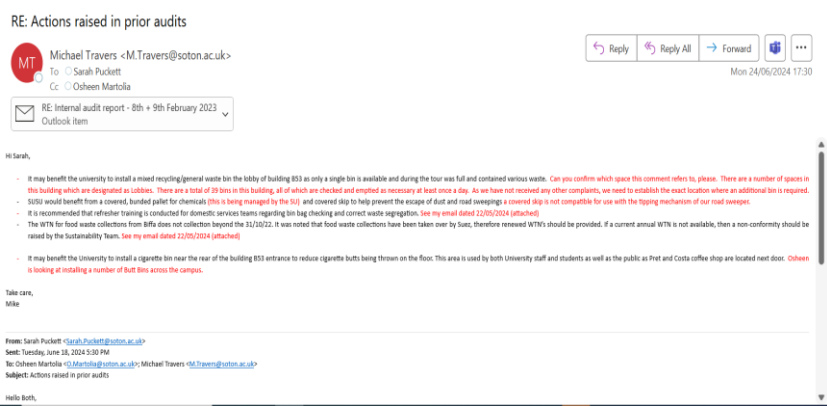
Audit Findings


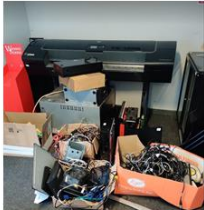

Ref No.	Clause No.	Details of any finding(s) raised.	Type (Major NC, Minor NC, OFI or AoC)
NC 01	6.1.4 a (2)	<p><i>The company is not fully compliant with the clause detailed, in that:</i></p> <ul style="list-style-type: none"> - No documentation for the disused white goods electrical equipment WEEE found in the House of residence (Romero) <p><i>Below is the snapshot of some of WEEE waste awaiting evacuation based on the new returns program.</i></p> 	Minor NC
OFI 02	NA	It may be beneficial for the organisation to ensure the COSHH information be located at the point of use, for emergency purpose (Romero Laundry & Tow lab – Chemical dosing at the back of the building)	OFI
OFI 03	NA	It may be beneficial for the organisation to ensure all water quality test are carried as planned, this will ensure water quality is always maintained.	OFI
OFI 04	NA	It may be beneficial for the organisation to implement strategy for the monitoring of paper use.	OFI
OFI 05	NA	It may be beneficial to review waste strategy and information/labelling of waste bins to ensure waste segregation is effectively managed.	OFI
End of Findings			





Note: Responses to findings must be sent using the Corrective Action Plan form, as applicable, to caps@nqa.com within the timeframes stated on Page 5.


Closure of Findings from Previous Audit:

Report No. 555535, Dated 17/07/2023

Ref No.	Detail of finding and client action:			Outcome (Closed or Escalated)	
	Clause	Summarise Action(s) Taken to Prevent Recurrence	Category		
OFI01		<p>The SUSU and University may wish to investigate installing PIR (passive infrared sensor) within the SUSU buildings/areas to reduce their environmental impact and energy usage. Sampled areas, The cube, corridors, and squash court area light's on during tour but not in use/occupied.</p> <p>It may benefit the University to investigate if PIR's would be suitable in other locations with little use throughout all buildings.</p> <p>Action Taken to Prevent recurrence</p> <p>PIR us gradually being installed in areas of significantly hire energy use. The PIR system is being rolled out on a case by case basis.</p>	OFI	Closed	
OFI02		<p>It may benefit the University to install a cigarette bin near the rear of the building B53 entrance to reduce cigarette butts being thrown on the floor. This area is used by both University staff and students as well as the public as Pret and Costa coffee shop are located next door.</p> <p>Action Taken to Prevent recurrence</p> <p>RE: Actions raised in prior audits</p> 	OFI	WIP	
OFI03		<p>It may benefit the university to install a mixed recycling/general waste bin the lobby of building B53 as only a single bin is available and during the tour was full and contained various waste</p> <p>Action Taken to Prevent recurrence</p> <p>Email to indicate work in progress</p>	OFI	WIP	

		<p>Re: Mixed recycling bins in B.44</p> <p>Osheen Martolia <O.Martolia@soton.ac.uk> To: Sarah Puckett Cc: Michael Traviss</p> <p>Hi Sarah, Thanks for reaching out.</p> <p>As per our last discussion, I do support increasing our recycling and reducing cross contamination. Please note that we do share the same goal, and the 3-bin system is one of the considerations to reach this.</p> <p>Unfortunately, to build a university wide system we would need to break down our infrastructure planning in stages. If we are looking to build a cohesive structure across the university, we would require a concentrated front for both internal and external bins, that means we are roughly looking to replace around 20k bins (internal and external), if not more. This will go hand in hand with putting out information across the university, so the larger community understands the incoming change and our timelines.</p> <p>I greatly appreciate your and Adams' patience with me and understand the reasons to highlight a non-conformity. However, I am actively surveying the market for all the possible bin systems and styles. My desire for the future recycling system is to make it convenient and resilient. Unfortunately, I would again emphasise the need to account for the financial and operational concerns that adapting the 3-bin system at this stage might incur especially without a proper plan.</p> <p>Kind Regards, Osheen Martolia Alumni & Environmental Services Manager Lifestyle and Facilities University of Southampton</p> <p>From: Sarah Puckett <sarah.puckett@soton.ac.uk> Sent: 11 July 2024 10:05</p>		
NC01		<p>The SUSU/university's waste collection point next to B42 had various items 'dumped' including a fridge (White goods), WEEE waste, wood and metal in front of the buildings air-conditioning units and was not segregated, stacked safely and/or correctly. See Images</p>  <p>This area would benefit from having a locking mechanism to prevent this collection area from being used as a 'Dumping ground' by all.</p> <p>Action Taken to Prevent recurrence The area has been cleared and neatly arranged.</p> 	Minor NC	Closed
NC02		<p>Within the rear storage area of B53, access to the emergency eye wash station and emergency spills kits was obstructed and inaccessible in an adverse situation during the tour by large items (Step ladders, trolleys, vacuum etc.)</p>  <p>Action Taken to Prevent recurrence The area has been cleared and neatly arranged, eye wash and emergency spill kit has been relocated</p>	Minor NC	Closed

		 		
NC03		<p>Located to the rear of B53 within the 1140 Waste chemical stores, the generated hazardous chemical waste is at maximum capacity for the bunding in place. Due to this, no more chemical waste can be stored safely and may cause an environmental incident (spillage) if not collected by the approved waste carrier. The university will need to ensure this chemical waste storage area never reaches maximum capacity and reduces future risk of Adverse Environmental situations.</p>  <p>Action Taken to Prevent recurrence New chemical waste area has been established.</p> 	Choose an item	Choose an item
BP01	NA	<p>The review of the Stag (student union bar) evidenced best practice with the review of required equipment to reduce their environmental impact and energy use whilst still being able to deliver the same</p>		

		service to customers. Sampled, a reduction of 50% of all fridges conducted within the Stag		
BP02	NA	<p>The introduction of the Only rain badges near all SUSU buildings evidenced best practice and should be adopted across the whole of the Universities sites to support the consistent approach and collaborative works with the SUSU and University.</p> 		
BP03	NA	Sampled during the tour of Mayflower Buildings, the management of donation areas and support for recycling unwanted items from Students leaving the accommodation to support local and national charities evidenced best practice. This has supported the reduction in waste and student knowledge and understanding of depositing of personal unwanted furniture, clothing, bedding etc.		

Opening and Closing Meetings

Opening and closing meetings were performed in accordance with Form 335. The objective of the audit was to confirm that the management system had been established and implemented in accordance with the requirements of the audit standards.

Confirmed no changes to system scope.

No significant environmental or health and safety incidents, enforcements or prosecutions have occurred since the previous audit.

No unusual operations scheduled during this audit.

No changes to company operations since previous audit.

No major customer complaints or environmental / health and safety complaints or issues with delivering contractual requirements have occurred since previous audit.

Discussed site visit requirements, required a minimum of once per audit cycle, to address any remote activities within scope.

Discussed approach to audit and availability of personnel. Confirmed system scope, discussed and clarified business operations occurring on and off site and within the system scope.

Discussed and justified any inapplicable clauses.

Reviewed certificates.

No changes of significance to management structure since previous audit.

Reviewed previous report. No unusual activities scheduled. No issues arising with adhering to Audit Plan as prepared.

Process/audit area:	Organisational Context (External / Internal issues /interested parties / boundaries and scope / process identification)
Auditees:	SR/AT
Auditor (if applicable):	
Method of Audit	On-site
Evidence to support audit conclusion:	
<p>The organisation has been focusing on sustainability and the proposed integration of the management system. There has also been a restructuring of the team, with new employee introduced. The Institution has also being looking exploring the opportunities .</p> <p>As discussed, SUSU (Southampton University Student Union) has agreed to be part of the scope of the EMS, discussion are currently being held to determine areas of collaboration and integration between them.</p> <p>External and internal issues identification have been achieved via the organisations UOSEMR013 Organisational Context Register, Version 4, dated 21/06/2023. All Issues have been documented as a context factor using one of the following identified issues:</p> <ul style="list-style-type: none"> - Political (External) - Economic (External) - Social (External) - Technological (External) - Legal (External) - Environment (External) - Climate Change (Environment) - Profitability (Financial) - Systems (Operational) - Processes (Operational) - Resources (Operational) - Staff (Operational) - Estate (Operational) - Communication (Operational) <p>The issues identified are relevant to the organisation's purpose and strategic direction. A total of 26 factors have been identified and documented using the following subheadings.</p> <p>Boundaries of applicability has been established and reviewed –</p> <p>V 8 27.03.2024 - Addition of 'One Guildhall Square' and 'Sir James Matthews' on 'Campuses' tab. Inclusion of 'Student's Union' in 'Other' tab.</p> <p>Below is a screenshot of the boundaries of applicable log</p>	

AutoSave Off UOSEMSR015 Boundaries applicability of EMS v.8 27.03.2024 - Protected

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#	Determining scope of EMS	Information	EMS Controls
1	External issues	<p>Campuses open for the General Public access, walk through and use - security risk</p> <p>Reputation of the University as a leading Institute in particular research requires constant change of facilities, purpose of site and thus compliance with varying legislation</p> <p>Pressure to attract new customers to the University</p> <p>Competition against similar institutes of size, calibre and course offerings</p> <p>League Table performance scoring</p> <p>Obtaining awards through recognised schemes such as the Green Gown awards</p> <p>Offering facilities that are world class for studying and research</p> <p>Cost of utilities and the utility supplier contract</p> <p>Capabilities of external waste contractors to recycling and collect as many varying waste streams as are generated by the University activities</p>	UOSEMSR014 Reg. of Interested Parties
2	Internal issues	<p>Purpose of building use changing on campus - requiring a change of infrastructure to lighting/ heating/ cooling/ windows/ doors/ walls/ water use/ electricity use</p> <p>Not enough resource to implement Environmental & Sustainable change - financial/ human/time/ strategic</p> <p>Embed Environmental & Sustainability as a key component to all process changes</p> <p>Lack of commitment from Senior Management</p> <p>Lack of management plan for long term maintenance of any new technology installations and changes</p> <p>Requires the need for roles and responsibilities to be identified to lead and manage the implementation of a new project - i.e. increased recycling rates/ reducing electricity use across faculties/ reducing gas use across buildings/ reducing water across buildings</p>	UOSEMSR013 Reg. of Org Context
3	compliance obligations	<p>Please refer to the LUS portal for full details:</p> <ol style="list-style-type: none"> 1. Climate Change Levy (General) regulations 2009 2. Waste Regulations 2011 3. Noise & Statutory Nuisance Act 1993 4. Control of Pollution Act 1994 5. Noise Act 1996 6. Clean Neighbourhoods & Environment Act 2005 7. Controlled Waste (England & Wales) Regulations 2012 8. Environmental Protection Act 1990 Part 2 9. Environmental Permitting (England & Wales) (Amendment) Regulations 2018 10. Hazardous Waste Regulations 2005 11. Landfill Tax Regulations 1996 12. Waste Electrical & Electronic Equipment (WEEE) Regulations 2010 13. Animal By Products (Enforcement) regulations 2013 14. Waste Batteries & Accumulators Regulations 2009 	

Version Control Halls of Residence. **Campuses** Sports Centre Other +

The system boundaries and applicability have been determined and documented via the scope of the EMS is defined as

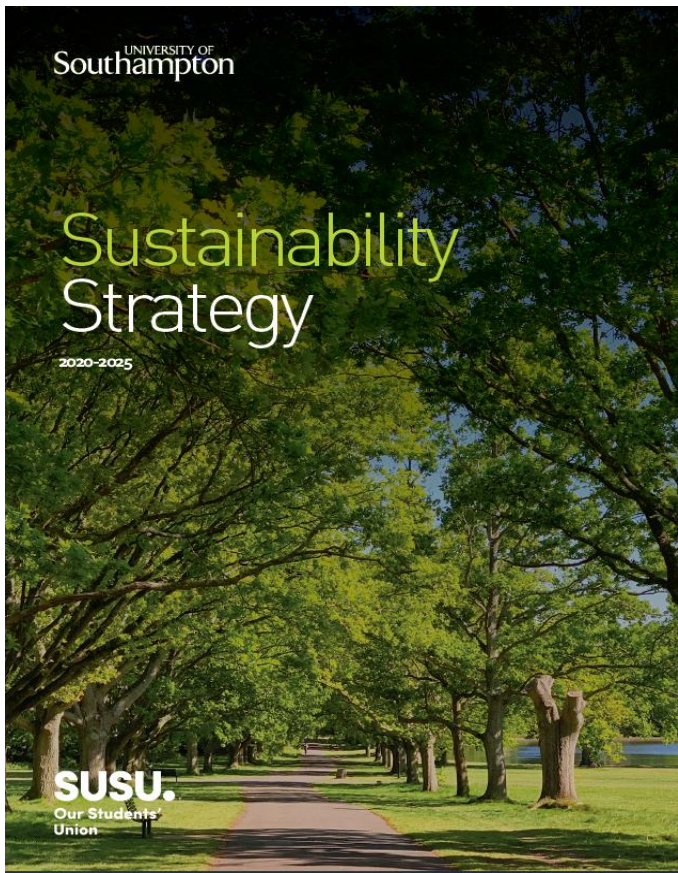
'Provision of Higher Education and related support services at the University of Southampton'.

The following sites were listed in the scope for the ISO14001:2015:

1. Highfield Campus SO17 1BJ
2. Avenue Campus SO17 1BF
3. Boldrewood SO16 7PX
4. Winchester Campus SO23 8DL Wide Lane Sports Centre SO50 5PE Water Sports Centre SO18 2JL • Bassett House SO16 3TU • Halls of Residence:
5. Glen Eyre Complex, Glen Eyre, SO16 3ZE
6. Glen Eyre Complex, South Hill SO16 3RD

7. Glen Eyre Complex, Chamberlain SO16 3FU
8. Glen Eyre Complex, Beechmount House SO16 3JD
9. Wessex Lane Halls, Connaught SO18 2NU
10. Wessex Lane Halls, Montefiore SO18 2NS
11. Archers Road Halls, Gately Hall SO15 2WF
12. Archers Road Halls, Romero SO15 2XW
13. Erasmus Park, Winchester SO23 7XA
14. Highfield Hall, Omdurman Road SO17 1AW
15. Belgrave Industrial Site SO17 3EA
16. City Gateway Halls, SO16 2HA
17. Mayflower Halls, West Park Road SO15 1DP

Conclusion of the overall effectiveness of the process: Process / Audit Area is satisfactory

Process/audit area:	Leadership (Process based approach, risk based thinking, policy, identification of roles and responsibilities)
Auditees:	Adam T
Auditor (if applicable):	
Method of Audit	On-site
Evidence to support audit conclusion:	
<p>As discussed with Adam Tewkesbury (Associate Director for Environment and Sustainability), Adam has been with the university since obtaining EcoCampus. This was a sector specific route to the university to follow and obtain certification. This allowed the university to get better recognition and support the planning of the sustainability strategy and drive continuous improvement.</p> <p>Below is the University Sustainability plan.</p> 	
<p>Currently focusing obtaining energy management certification (ISO 50001). The university is currently in the process of integrating the student's union operation into its general EMS activities as they have signified their interest to participate in the wider scheme.</p> <p>The university is continuously seeking to improve its environmental operation ie waste management, COSHH management and general environmental communication and information. Waste initiatives have been carried out by the university in collaboration with some funding agency. Some of the initiative includes.</p> <p>The Waste Bin project (seeks to design waste bins to look like their content. (Cans & Bottles) see picture below.</p>	



The university has also been engaged in other environmental and sustainability projects, with some being nominated for recognition in various forums and groups.

Conclusion of the overall effectiveness of the process: Process / Audit Area is satisfactory

Process/audit area:	Performance Evaluation and Improvement Processes
Auditees:	Sarah/Adam
Auditor (if applicable):	
Method of Audit	On-site
Evidence to support audit conclusion:	
<p><u>Management Review</u></p> <p>The university has established an annual management review. The review involves the critical analysis of all environmental and sustainability aspects and targets.</p> <p>2023 Annual Report Title: - Annual Management Review of University's Environmental Management System From: - Environment & Sustainability Officer Date: - October.2023</p> <p>Some area discussed includes Audits Objective Carbon reduction Education for Sustainability Water Reduction Pollution prevention Gas Usage</p> <p>Some of the outputs from the meetings includes</p> <ul style="list-style-type: none"> Engaging with the EAUC (Environmental Association for Universities and Colleges) to explore innovative solutions. One such initiative involves generating Carbon Credits from University Land through plantation projects To promote a circular economy and reduce waste, we are reviewing implementation of the Uni Green Scheme Integrate the EnMS into an Environmental and Energy Management System (EEMS) <p>Effective plans has been established to manage all out puts.</p> <p><u>Internal Audits</u></p> <p>Annual environmental audit is carried out. 2024 audit has been carried out and action from the audit are being actioned. Internal audits are planned using the internal audit register.</p> <p>Below is a snapshot of the register.</p>	

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	A	B	C	D	E	F	G	H	I	J	K	L	M	N	O	P	Q	R	S	T	U	V	W
124																							
3	Estates & Facilities	Building contractors (Faculty projects)	Process - Op procedure	Steve Parker	12 Months															3	Jul-23	To be re-arranged	
4	Estates & Facilities	Building contractors (PHU)	Process - Op procedure	Karen Baroni	12 months															4	Feb-23		
5	Estates & Facilities	Waste management & Cleaning	Process - Op procedure	Mike Travers	6 Months															5	Jul-23		
6	Estates & Facilities	Utilities - energy & water management	Utilities - legislation (CCL, CMC) & Process - ops	Sandra Porponne	12 Months															7	Jul-24		
7	Estates & Facilities	Leasing / Tenants in Dover	General Process - Op procedure	Seabrook - Banks, Post Office,	24 Months															8	Feb-23		
8	Estates & Facilities	Adopters - Waste management	Process - Op procedure	Phil Freeston	24 months															9	Jul-24		
9	Estates & Facilities	Drainage & Emissions to Water	Process - Op procedure	Dan Hoggood	6 months															10	Jul-24		
10	Estates & Facilities	Pest control	Process - ops procedure, compliance ops	Mike Travers	12 months															11	Aug-22		
11	Estates & Facilities	Catering	Process - ops procedure	Felice Forcheri	12 months															12	Jul-24		
12	Estates & Facilities	Maintenance Team	Process - ops procedure	Jason Wyatt	24 Months															13	Jul-24		
13	Estates & Facilities	Grounds Maintenance Team	Process - ops procedure	Amanda Boorer	24 months															14	Jul-24		
14	Estates & Facilities	Port & Potting	Waste management/Procurement	Dave Cava	24 months															15	Feb-23		
15		SUSU	Process - procedures & ops procedures	Paul Davis and Liz Harris	12 months																		
16		SHM	Process - procedures & ops procedures	Samy Porter																			

08.2020 - 08.2021 08.2021 - 08.2022 08.2022 - 08.2023 08.2023 - 08.2024

Audit Report Reviewed –

Audit reference:

Audit date: - 20.06.2024

Lead auditor: - Sarah Puckett

Other auditor(s): - Siobhan Balfour

Method of audit: - In person audit

Area/procedure audited (scope): - SUSU Buildings 40, 42 and 57 (SUSU Shop).

Responsible manager: - Paul Davie and Liz Harris

Findings- 6 OFI (Mainly on waste segregation, Signage and Student engagement)

Below is a snapshot of the internal audit report



AUDIT REPORT PART B – AUDIT REPORT

Internal environmental audit report version2

This internal environmental audit report includes checklist questions to evaluate and record objective evidence for each requirement of the ISO 14001:2015 Standard. The auditor should still refer to ISO 14001:2015 to understand all specific requirements. It is not expected that the report is completed in full for every internal audit.

Audit reference:	Audit date: 20.06.2024
Lead auditor: Sarah Puckett	Other auditor(s): Siobhan Balfour
Method of audit: In person audit	
Area/procedure audited (scope): SUSU Buildings 40, 42 and 57 (SUSU Shop).	Responsible manager: Paul Davie and Liz Harris
What activities take place in this area: Student catering, student rest areas, bars, cinema/club, student sports facilities and associated facilities, office space and a shop.	
How will audit results be reported to relevant management: Audit report sent to Paul and Liz.	
Previous audit reference:	Audit date: 17.07.2024 – External recertification audit
Results of previous audits – have previous corrective/preventative actions been followed through and closed out? Recertification audit raised NCF regarding items left in the external bin store. 'Keep gate closed' sign put on the door to help prevent others from dumping items. Further NCF raised in May following a site walkaround from Liz Harris, advising that WEEE waste was left outside. WEEE waste storage was moved inside to prevent release of chemicals.	

All findings are being actioned and tracked for eventual closure.

Non Conformity and Corrective Action

Nonconformities are managed using the Institutions NC log. The log has open and closed NC's and OFI's

Updated UOEMSR012 Register of Nonconformities v.05.07.2023 - Protected View - Saved to this PC									
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H4 01.10.2024									
Location	Responsibility	Recommendation Type & Description	Progress	Action taken	Target completion date	Date complete	Supporting Evidence		
SUSU	S.Puckett	SUSU would benefit from a covered, bunded pallet for chemicals and covered skip to help prevent the escape of dust and road sweepings.		18.06.2024 - Update requested by Mike Travers and Oisheen Marolia 24.06.2024 - Email from MT - Covered skip is not compatible with tipping mechanism of road sweeper. SP to investigate other solutions. 24/02/2023 - SP emailed John Ure with audit report detailing highlighted issues and requesting follow up actions be followed 09/03/2023 - SP forwarded concern to Dan Hopgood also to ask whether he could assist in repairing the drains 09/03/2023 - DH confirmed that he had raised the job on Planon 21/05/2024 - SP emailed DH for an update. 23/05/2024 - Response from DH that a new job needed to be raised. 21/05/2024 - SP chased DH for an update. 21/05/2024 - Funding confirmed to repair the drains. Following a visit to B.53 on 27th June, the drains were marked as yellow. 01/07/2024 - Request sent to DH to ensure they are painted blue and red.	01.08.2024				
B.53	S.Puckett	The area surrounding the drains, in the Zepher Institute yard, are line-marked to highlight that no vehicles / containers should park/be stored over the manhole covers. The marked-out areas require repainting and the metal plates, designating the drains as either surface water or foul/effluent need refixing to the manhole covers.		18/07/2024 - Email to Oisheen, highlighting the issues with two-bin system and asking for update on whether these will be extended to a three-bin system. 30/07/2024 - Email from Oisheen to SP explaining that the desire for a three bin system is shared, but the quantity of bins means that a huge change in infrastructure is required, which will take time and money, but is still being investigated over the next year or so.	30.07.2024				
B.44	S. Puckett	Contamination of mixed recycling bin is high due to a lack of general waste bin.		Part of a wider piece to estates about the gradual upgrade of their lighting stock.	01.10.2024				
B.44	S. Puckett	Upgrade existing fluorescent lighting for more energy efficient LED lighting and to future proof against dwindling fluorescent bulb stocks.		11.07.2024 - Email sent to Liz Harris and Paul Davie for an update 15.07.2024 - Email from Liz Harris - Waste signage has been rechecked to ensure its correct. SP has gone back to ask for pictures. 11.07.2024 - Email between Mike Bartlett and SP. Spill response booked in for 22nd July at 3.30pm in B.53 yard	30/07/2024				
SUSU	S. Puckett	Improve waste signage at The Bridge for kitchen bins to ensure users are segregating waste correctly.			23/07/2024				
B.53	S. Puckett	Organise spill simulation in B.53 yard to test spill response.							

Objectives

The Institution has established objectives that are relevant to their environmental aspect. Some of the objectives captured by the institution includes-

- Achieve net zero emissions for Scope 1 & 2 by 2030
- Measure our total emissions footprint and set targets for Scope 3 emissions reductions
- Adopt a value-based approach to reduce emissions from business travel
- Ensure that sustainability is part of every University education programme by 2025
- Make sustainability a cornerstone of UoS' research and societal impact
- Implement a sustainable and ethical investment policy
- Implement measures in the Biodiversity Action Plan
- 20% reduction in tonnes CO2 scope 1 & 2 by 2020
- 2005/2006 baseline = 31,983 tonnes CO2
- Maintain the Winchester School of Art Flood Management Plan
- UoS Corporate Business Continuity Plan references severe weather risks & climate change adaptation measures
- Identify and share good practice of using University resources for teaching and learning.
- Develop and implement staff student partnerships through delivering a programme of campaigns and events - at least 3 per year

Plans has been established for the above-mentioned objectives and more to ensure effective managements.

Below is a snapshot of the objective register –

AutoSave Off UOESMR003 Environmental Objectives Register plan for achievement v.35 25.11.2020 - Read-Only

File Home Insert Page Layout Formulas Data Review View Automate Help

Default Keep Exit New Options Normal Page Break Preview Custom Views Navigation Ruler Gridlines Formula Bar Show Zoom 100% Zoom to Selection

#	Sustainability area objectives are grouped into different themes in line with environmental aspects and compliance obligations	KPI an indicator that provides information about the performance of the organisation	Target detailed quantifiable performance target to be met in order to (help) achieve objective	Progress/results evaluation comments	Actions Activity required to meet target & resources required	Responsibility
3	Climate change	VSA Flood Management Plan UoS Corporate Business Continuity Plan references severe weather risks & climate change adaptation measures Climate Adaptation is referenced within Business Continuity Planning	Maintain the Winchester School of Art Flood Management Plan UoS Corporate Business Continuity Plan references severe weather risks & climate change adaptation measures	2019/20: Updated Flood Management Plan for VSA drafted June 2020 - awaiting approval April 2021 - VSA Flood Management Plan has been signed off by H&S and sent to VSA 2022/23: January 2023 - Winchester Flood Management Plan updated January 2023 by Dan Hoggood 2017/18: Established Business Continuity Committee 2018/19: Business Continuity Committee is chaired by Ian Dunn, meeting 2 x strategically, and 4 x operationally. There are a series of plans: - Business Continuity Strategic Plan - due for renewal on Jan 2020 - Pandemic Plan - Crisis Mgmt Plan - Adverse weather Polgy - managed by H & S covering flood, snow, heat - Contingency Plans - developed by each Faculty & Directorate, based on B - Corporate Plan - Business Impact Assessments (BIA) - cover a wider range of impacts & recovery rates (Directorate Dean ensures accuracy) 2020/21: VSA flood management plan updated April 2021 2022/23: January 2023 - Winchester Flood Management Plan updated January 2023 by Dan Hoggood April 2024: ISO 14001:2015 standard updated to include Climate action changes to clauses 4.1 'The organization shall determine whether climate change is a relevant issue', and 4.2 'Relevant interested parties can have requirements related to climate change' Register of Organisational Context already lists climate change as a context factor.	Carry out a test of the planned emergency response. Health & Safety Director chairs bi-monthly Business Continuity Meeting Minister on standard Business Continuity - sharepoint site	VSA Mgmt Plan is part of Faculty wider Contingency Plan Director of Health & Safety
4	Education for sustainable development	Course content covers sustainability (economic, social, environmental) MS & BSc Env Auditing Modules for ISO14001 teaching and learning use UoS process	Review the extent of sustainability content in the curriculum & through Masters. Application of Goal 4 - Ensure that Sustainability is a part of every University education programme by 2025 Identify and share good practice of using University resources for teaching and learning.	2019/20: Group of students due to be working with Simon Kemp from Sep 2020 2020/21: Sustainability Strategy launched with Goal 4: Ensure that sustainability is a part of every University education programme by 2025 - responsibility for implementation is Alex Nield, Vice President Education. Simon Kemp and group of four interns are reviewing how sustainability is incorporated into current teaching. Then we will be able to understand how to ingrain Sustainability into all teaching. 2021/22: SIG interns to assist with goal 2. Intern Chloe is tasked with reworking the Southampton Sustainability Solutions e-module to assist in making the course more streamlined and achievable. Four student interns working alongside the SIG on various projects in summer 2022. 2022/23: Progress as part of Goal 4 2017/18: 26.10.2018 - BSc Env Law and Mgmt presentations RE: Env Aspects, Impacts and legislation compliance; 08.02 - 08.03.2019: MSc students Env Law module auditing VSA; Feb - Apr 2019 hosted 2 a month Sustainability Placement Student; 2018/19: Student placement in Sustainability Team in March 2020 2019/20: Student placement in Sustainability Team in March 2020 2020/21: Student Placement in Sustainability Team from Oct 2020 to February 2021, Emily Broadaway, and second student from February-April 2021, Nikki Craven, ChemEng project intern, Steven Hart. 2021/22: Engineer Melaine Hodkin to study scope 3 emissions from the university's waste-related operations for her individual project. Conservation Group volunteers carry out ditch maintenance on 14th October 2021 at Chilworth Conservation Area. Masters student Zijan Wang taking on project of ISO50001 in B.30 to identify to Significant Energy Users, accompanied by two additional student volunteers.	Sustainability Action Team to conduct analysis and report back to EISSG University Lead - Education for Sustainable Development University Lead - Education for Sustainable Development	University Lead - Education for Sustainable Development University Lead - Education for Sustainable Development

Version Control Objectives Plan for Achievement Sheet1



AUDIT REPORT PART B – AUDIT REPORT

Conclusion of the overall effectiveness of the process: Process / Audit Area is satisfactory

Process/audit area:	Planning and Support Processes
Auditees:	Sarah/Adam
Auditor (if applicable):	
Method of Audit	On-site
Evidence to support audit conclusion:	

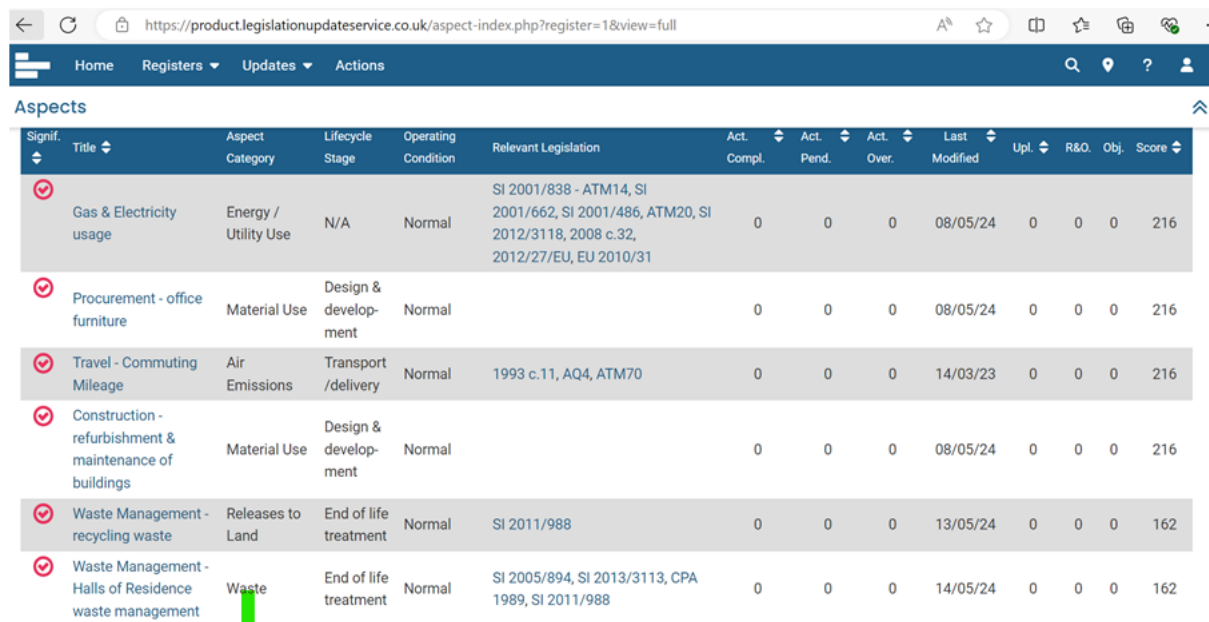
Risks and Opportunities

See Aspects and Impacts

Environmental Aspects and Impacts

The organisation has subscribed to a legislation update service (LUS) for the identification of all aspect and impacts.

Below is a snapshot of some of the aspect and impact of the organisation identified




Signif.	Title	Aspect Category	Lifecycle Stage	Operating Condition	Relevant Legislation	Act. Compl.	Act. Pend.	Act. Over.	Last Modified	Upl.	R&O.	Obj.	Score
✓	Gas & Electricity usage	Energy / Utility Use	N/A	Normal	SI 2001/838 - ATM14, SI 2001/662, SI 2001/486, ATM20, SI 2012/3118, 2008 c.32, 2012/27/EU, EU 2010/31	0	0	0	08/05/24	0	0	0	216
✓	Procurement - office furniture	Material Use	Design & development	Normal		0	0	0	08/05/24	0	0	0	216
✓	Travel - Commuting Mileage	Air Emissions	Transport /delivery	Normal	1993 c.11, AQ4, ATM70	0	0	0	14/03/23	0	0	0	216
✓	Construction - refurbishment & maintenance of buildings	Material Use	Design & development	Normal		0	0	0	08/05/24	0	0	0	216
✓	Waste Management - recycling waste	Releases to Land	End of life treatment	Normal	SI 2011/988	0	0	0	13/05/24	0	0	0	162
✓	Waste Management - Halls of Residence waste management	Waste	End of life treatment	Normal	SI 2005/894, SI 2013/3113, CPA 1989, SI 2011/988	0	0	0	14/05/24	0	0	0	162

Compliance Obligations and Compliance Evaluation

The organisation has subscribed to a legislation update service (LUS) for all aspect/impacts and legal obligation issues. The portal has identified all critical legislation within its operations.

Below is some of the legal areas that has been identified for the environmental aspects captured.

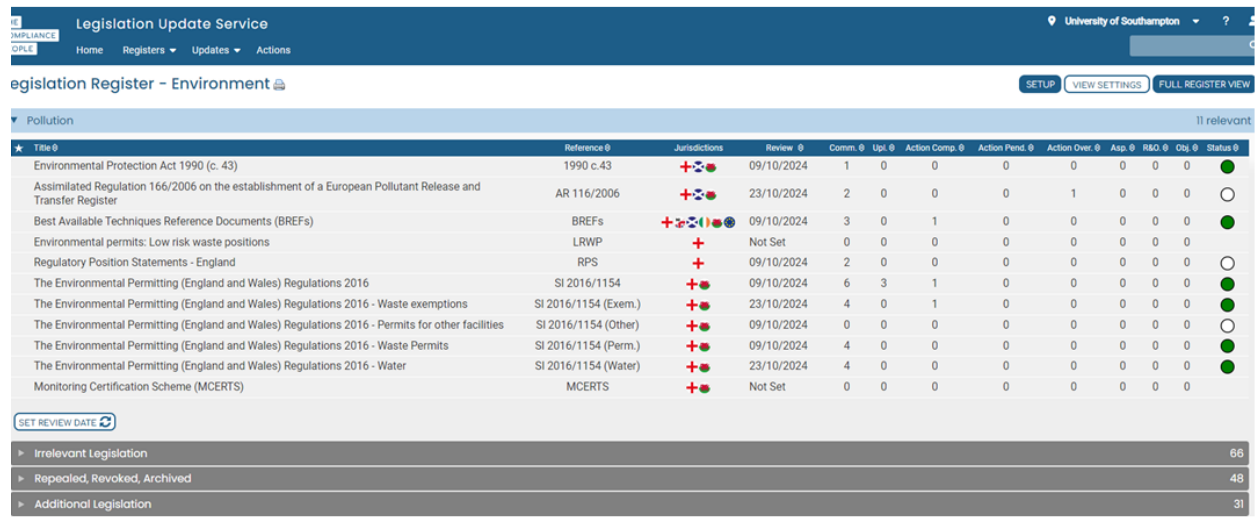


Legislation Register – Environment

Category	Relevance Count
Pollution	11 relevant
Air	10 relevant
Water	7 relevant
Waste	23 relevant
Energy & Climate Change	23 relevant
Hazards	6 relevant
Planning	8 relevant
Wildlife	27 relevant
Land	1 relevant
Nuisance	5 relevant
Standards	57 relevant
Other Requirements	0

Below is a snapshot of some of the legal obligations captured.

Standards	57 relevant
Other Requirements	0



Legislation Update Service

Legislation Register – Environment

▼ Pollution

Title	Reference	Jurisdictions	Review	Comm.	Upl.	Action Comp.	Action Pend.	Action Ovet.	Asp.	RAQ	Qs	Status
Environmental Protection Act 1990 (c. 43)	1990 c. 43	+	09/10/2024	1	0	0	0	0	0	0	0	●
Assimilated Regulation 166/2006 on the establishment of a European Pollutant Release and Transfer Register	AR 116/2006	+	23/10/2024	2	0	0	0	1	0	0	0	○
Best Available Techniques Reference Documents (BREFs)	BREFs	+	09/10/2024	3	0	1	0	0	0	0	0	●
Environmental permits: Low risk waste positions	LRWP	+	Not Set	0	0	0	0	0	0	0	0	○
Regulatory Position Statements - England	RPS	+	09/10/2024	2	0	0	0	0	0	0	0	○
The Environmental Permitting (England and Wales) Regulations 2016	SI 2016/1154	+	09/10/2024	6	3	1	0	0	0	0	0	●
The Environmental Permitting (England and Wales) Regulations 2016 - Waste exemptions	SI 2016/1154 (Exem.)	+	23/10/2024	4	0	1	0	0	0	0	0	●
The Environmental Permitting (England and Wales) Regulations 2016 - Permits for other facilities	SI 2016/1154 (Other)	+	09/10/2024	0	0	0	0	0	0	0	0	○
The Environmental Permitting (England and Wales) Regulations 2016 - Waste Permits	SI 2016/1154 (Perm.)	+	09/10/2024	4	0	0	0	0	0	0	0	●
The Environmental Permitting (England and Wales) Regulations 2016 - Water	SI 2016/1154 (Water)	+	23/10/2024	4	0	0	0	0	0	0	0	●
Monitoring Certification Scheme (MCERTS)	MCERTS	+	Not Set	0	0	0	0	0	0	0	0	○

SET REVIEW DATE

Irrelevant Legislation	66
Repealed, Revoked, Archived	48
Additional Legislation	31

Emergency Preparedness and Response

The organisation has an established emergency preparedness and control process. Procedures and processes have been deployed to manage all emergencies from various hazards such as spill, fire, chemicals Biohazards within the university.

Some of the procedures established includes Documentation sampled.

- UOEMSOP001 Hazardous Material Spill Response Procedure, version 15 dated 27/06/2023
- UOEMSOP006 Emergency preparedness & response, version 13 dated 21/06/2023
- UOEMSOP008 Environmental Operational Procedure - Hazardous materials and oil storage, version 8 dated 21/06/2023

- UOSEMSOP00a Environmental Operational Procedure - Legionella and Colling towers, version 3 dated 29/03/2021

Spills Procedure:

As documented within the Hazardous Material Spill Response Procedure, the University uses the following process. Assess – Stop – Contain – Notify – Dispose

Specific information on how to contain a spill in the yards of Building 53 and 85. Do not hose down spills with water! Do not use detergents to disperse any oil; detergent is also a pollutant,

Emergency response.

Spill kits are located at the hazardous material compounds.

Only staff trained to follow the Hazardous Spill Response Procedure (UOSEMSOP001) should attempt to tackle a hazardous material spill. Staff should attend training (organised by the Environment & Sustainability Manager) once every two years on this procedure to ensure that they remain competent. Staff are responsible for checking the contents of spill kits to ensure they are fit for purpose.

The Emergency Preparedness and Response Procedure (UOSEMSP006) provides further details regarding how the University responds to incidents.

Some areas kits where located includes

- Jubilee Sports Centre, (swimming pool, gym etc)
- Towing Tank Lab

Spillage Granules and Kit in the Swimming pool chemical dosing area.



First Aid Kit and Fire Extinguisher at the Towing Tank facility



COSHH Management

The organisation COSHH management was seen to be managed effectively. There where COSHH data sheet and chemical risk assessments at the location sampled. This includes

- Achers Roads – halls of residence (Romero Laundry Room)
- Jubilee Sports Centre, (swimming pool)
- Towing Tank Lab

However, some areas did not have the COSHH data sheet at the point of usage this include the Romero laundry room and the Chlorine dosing area of the Towing tank facility. OFI

Below are some the COSHH data and RA reviewed

ACT ORIGINAL
Safety Data Sheet
according to Regulation (EC) No. 453/2010
Date of issue: 05/05/2017 Revision: 05/05/2017 Version: 10.0

SECTION 1: Identification of the substance/mixture and of the company/undertaking

1.1 Product identifier
Product form: Mixture
Product name: ACT ORIGINAL
Product code: H005
Type of product: Technical product

1.2 Relevant identified uses of the substance or mixture and uses advised against

1.2.1 Relevant identified uses
Main use category: Professional use
Industrial/Professional use spec: For professional use only
Use of the substance/mixture: Acidic descaling toilet cleaner


1.2.2 Uses advised against
No additional information available

1.3 Details of the supplier of the safety data sheet
SOLDEN RESEARCH LIMITED
STADEN LANE, BUXTON, DERBYSHIRE, SK17 9LZ, UNITED KINGDOM
Tel: 01298 26226 Fax: 01298 26040 Email: safety@solden.co.uk

1.4 Emergency telephone number
Emergency number: Mon to Fri 8.30am to 5.00pm - 01298 26226

SECTION 2: Hazards identification

2.1 Classification of the substance or mixture
Classification according to Regulation (EC) No. 1272/2008 [CLP]
Skin Irr. 2 H315
Eye Irr. 2 H319
Full text of H-phrases: see section 16

2.2 Label elements
Labelling according to Regulation (EC) No. 1272/2008 [CLP]
Hazard pictograms (CLP): 

Signal word (CLP): **Warning**
Hazard statements (CLP):
H315 - Causes skin irritation
H319 - Causes serious eye irritation
Precautionary statements (CLP):
P201 - Wash hands thoroughly after handling
P280 - Wear eye protection, protective gloves
P302+P352 - IF ON SKIN: Wash off contaminated clothing
P303+P361+P353 - IF ON SKIN: Wash off contaminated clothing
P304+P340 - IF IN EYES: Rinse cautiously with water for several minutes. Remove contact lenses, if present and easy to do. Continue rinsing
P312 - Get immediate medical advice/attention
P332+P313 - IF eye irritation persists: Get medical advice/attention
P403 - Store locked up
P501+P532+P533 - IF SWALLOWED: rinse mouth. Do NOT induce vomiting

2.3 Other hazards
No additional information available

CoSHH Risk Assessment
Version: 1.0/2020

Work task / activity	Unit / Facility / Directorate	Assessor	Date	Location	Task / activity duration
Cleaning microfibre mops and cloths <td>Estates & Facilities <td>Billi-Anne Harris <td>July 2019 <td>Academic Sites <td>20 minutes</td> </td></td></td></td>	Estates & Facilities <td>Billi-Anne Harris <td>July 2019 <td>Academic Sites <td>20 minutes</td> </td></td></td>	Billi-Anne Harris <td>July 2019 <td>Academic Sites <td>20 minutes</td> </td></td>	July 2019 <td>Academic Sites <td>20 minutes</td> </td>	Academic Sites <td>20 minutes</td>	20 minutes
Line Manager / Supervisor	Billi-Anne Harris				
Task / activity frequency	Daily				
Brief details / comments	Ariel Biological Laundry Liquid is used for cleaning microfibre mops and cloths on a daily basis				

PART A

(1) Risk identification Name of substance	Quantity	Who might be harmed (user, those in vicinity, members of the public)	Explosive / energetic material? (Y/N)	(2) Risk assessment		(3) Risk management	
				Inherent	Residual	Control measures (use the risk hierarchy)	Further controls (use the risk hierarchy)
				Score	Impact	Score	Impact
Ariel washing liquid	5L	Domestic staff using this product	N	3	3	9	2
		Causes serious eye irritation					1
							2

Control measures (use the risk hierarchy):
Avoid contact with eyes. Wear goggles as required. Ensure lid is screwed on when not in use to avoid contact with eyes. Store in a lockable cupboard.

UNIVERSITY OF Southampton Health & Safety COSHH Risk Assessment

Version 1.0 (2019)

COSHH Risk Assessment

Work task / activity	Cleaning microfibre mops and cloths	Date	July 2019
Unit/Faculty/Directorate	Estates & Facilities	Assessor	Billy-Anne Harris
Manager/Supervisor	Billy-Anne Harris	Location	Academic Sites
Task/activity frequency	Daily	Task/activity duration	20 minutes
Brief details/comments	Ariel Biological Laundry Liquid is used for cleaning microfibre mops and cloths on a daily basis.		

PART A Line substance	(1) Risk identification Name of substance	Quantity	(2) Risk assessment Inherent	Residual	(3) Risk management Further controls	
			Who might be harmed (use: those nearby; those in the vicinity; members of the public)	Likelihood Impact Score	Likelihood Impact Score	
Ariel washing liquid	Hazardous properties (details of how the substance could cause harm eg. harmful by inhalation, skin contact, flammable, carcinogen, sensitizer etc) WELS	SL	N	Domestic staff using this product	Avoid contact with eyes. Wear goggles as required. Ensure lid is screwed on when not in use to avoid contact with eyes. Store in a locked cupboard.	2 1 2

P&G Professional™

ARIEL Liquid P&G Professional Clean & Compact

Safety Data Sheet

According to Regulation (EC) No. 453/2010

Date of issue: 22/09/2014

Revision date:

Version: 1.01

SECTION 1: Identification of the substance/mixture and of the company/undertaking

1.1 Product identifier

Product form : Mixture
Trade name : ARIEL P&G Professional Clean & Compact
Product code : PA00188937
Product group : Trade product

1.2 Relevant identified uses of the substance or mixture and uses advised against

1.2.1 Relevant identified uses
Main use category : Professional use
Function or use category : Washing and cleaning products (including solvent based products)

1.2.2 Uses advised against

No additional information available

1.3 Details of the supplier of the safety data sheet

Procter & Gamble UK Brooklands, Weybridge, Surrey, KT13 0XP, UK
Tel: 01832 896000 Fax: 01932 896200

Professional customerservice@pgpro.com

Emergency telephone number

Emergency number : (UK) Emergency Tel: 0650 328 8304(RL) Emergency Tel: 1800 509 497

SECTION 2: Hazards identification

2.1 Classification of the substance or mixture

Classification according to Regulation (EC) No. 1272/2008 [CLP]

Eye Irrit. 2 H319

Full text of H-phrases: see section 16

Classification according to Directive 67/548/EEC [SDS] or 1999/45/EC [DPD]
Xn; R36

Full text of R-phrases: see section 16

Adverse physicochemical, human health and environmental effects

No additional information available

2.2 Label elements

Labelling according to Regulation (EC) No. 1272/2008 [CLP]

Hazard pictograms (CLP)

Signal word (CLP)

: Warning

Hazard statements (CLP)

H319 - Causes serious eye irritation
P101 - If medical advice is needed, have product container or label at hand
P102 - Keep out of reach of children
P201+P202 - Attention

Precautionary statements (CLP)

P273 - Avoid release into the environment
P301+P312 - IF SWALLOWED: Rinse mouth thoroughly with water for several minutes. Remove contact lenses, if present and easy to do. Continue rinsing.
P301+P332 + P313 - IF EYES ARE CONTACTED: Get medical attention immediately.
P301+P332 + P331 - IF SWALLOWED: Call a POISON CENTER or doctor if you feel unwell

2.3 Other hazards

Other hazards not contributing to the classification

No presence of PBB and vPvB ingredients.

SECTION 3: Composition/information on ingredients

3.1 Substances

Not applicable

26/11/2015

EN (English)

Communications

Documentation sampled.

- UOSEMSR005 Register of external communication, version 16 dated 16/02/2022
- UOSEMSR006 Register of Internal Communication, version 39 dated 12/05/2023
- UOSEMSP004 Communication, version 11 dated 04/02/2021

Internal communication

- The Environment & Sustainability Manager is responsible for dissemination of information relevant to the EMS such as its significant environmental aspects, among the various levels and functions of the organisation as per the Sustainability Communications Plan.
- As per the Control of Documented Information Procedure (UOSEMSP005), the Environment & Sustainability Manager is responsible for informing relevant staff of a significant change to a procedure.
- The Environment & Sustainability Manager records the articles published via internal communication channels in the Register of Internal Communications (UOSEMSR006). The Register is located on the University's J Drive. Other forms of internal communication, such as e-mails, posters, presentation etc. are either stored on Microsoft Outlook or on the J: drive.

External communication

- The University has taken the decision to not make environmental aspects available externally. However, if a request is received from an external organisation or individual, the Environment & Sustainability Manager will consult with the E&F Board before deciding whether to communicate the significant environmental aspects.
- The Environment & Sustainability Manager or appropriate member of staff deal with all external enquiries regarding environmental issues. They will consider the application for information and establish whether the applicant is entitled to receive the information under the Environmental Information Regulations or whether any exemption applies.

The university also have in their job specifications a Communications Consultant & Officers who is responsible for coordinating awareness raising activities, communicating performance against objectives and targets to staff and students. Advises on keeping sustainability pages of the website up to date and ensuring the latest policy and other strategy documents are communicated on the web pages. Responsible for keeping communications details up to date for internal and external contacts

Documented Information




J drives used to manage all critical documentation. However, migration to SharePoint is being carried out. All critical systems documents will be migrated by 2025.

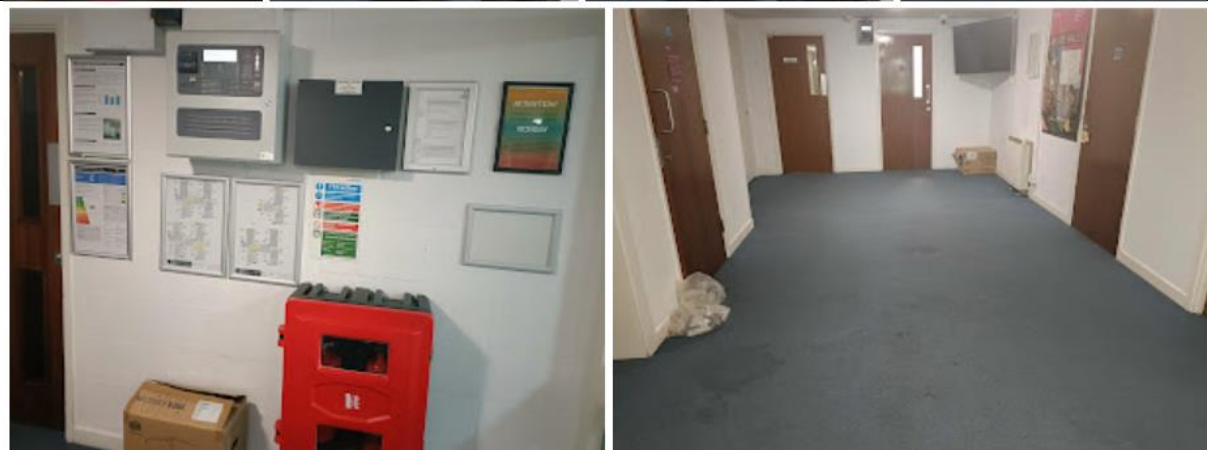
The University uses UOSEMSR010 Register of Documents, 31 dated 06/03/2023 to identify how all documentation used by the EMS is created, controlled, and managed.

All documentation will have a title, version and date of change recorded which includes comments and signature of approver.

Policy	
Environment & Sustainability Policy	
Manual	
UOSEMSM001 Manual	
Procedures	
UOSEMSP001 Environmental aspects	
UOSEMSP002 Environmental Objectives	
UOSEMSP003 Competence and awareness	
UOSEMSP004 Communication	
UOSEMSP005 Control of Documents & Records	
UOSEMSP006 Emergency preparedness and response	
UOSEMSP007 Monitoring, Measurement, Analysis & Evaluation	
UOSEMSP008 Evaluation of compliance	
UOSEMSP009 Non-conformity and corrective action	
UOSEMSP010 Internal audit	
UOSEMSP011 Management Review	

Conclusion of the overall effectiveness of the process: Process / Audit Area is satisfactory

Process/audit area:	Site Tour and Process Audits: Operational Controls, Resources, Aspects / Impacts, Hazards / Risks, Energy Users, Emergency Preparedness, Compliance Obligations, Documented Information
Auditees:	Ross Carpenter/Sarah
Auditor (if applicable):	
Method of Audit	On-site
Evidence to support audit conclusion:	
<p>Achers Roads – - halls of residence 11am – Ross Carpenter (Operations Manager)</p> <p>The operations Manager manages the team that runs the activities of the site. This includes,</p> <p>Waste Cleaning Catering Procurements –</p> <p>Projects management (Laundry Projects) - Sustainable consideration in the new tender for the laundry services – New company plants tree for specific amount of washes/machine. The institution has also been able to set all the laundry machines remotely to cold wash mode. Thos has reduced the energy use and a positive sustainability focus. The machines are also now remote monitoring. Machones are now being repaired remotely where possible. This has reduced the number of call outs for engineers and consequently reduce the number of journeys, thus reducing the institution carbon footprint.</p> <p>The hall of residence are currently being moved to PIR light sensors. Newer buildings have PIR sensor installed while the older ones will be retrofitted in phases. Current in the Acher Hall there are light switches in some areas and some sensors in some common areas (corridors).</p> <p>Electric heating is applicable to the hall. In cold weather there is an automatic heating on. There both electrical wall heaters (rooms) and mechanical electrical heaters are for common areas.</p> <p style="text-align: center;">Entrance to then Gately and Romero halls of Residence</p> <div style="display: flex; justify-content: space-around;">    </div> <p>General Common Corridor and information board at the Romero Halls of Residence.</p>	



Emergency equipment and Waste/Safety information at the Romero Halls of Residence - Fire Extinguishers



Waste Storage Area at the Romero halls of Residence



Romero hall laundry room with safety and environmental information.



Waste White goods storage Area (No Consignment Notes seen for previous transfers made – Minor NC)



Gately Halls of Residence – Waste bins (not labelled – OFI 05), safety and environmental information and general reporting tool (scan codes) for various services.



Management of Outsourced activities – Contractor Management (Durobilis) – See Waste Carrier Licence Checks

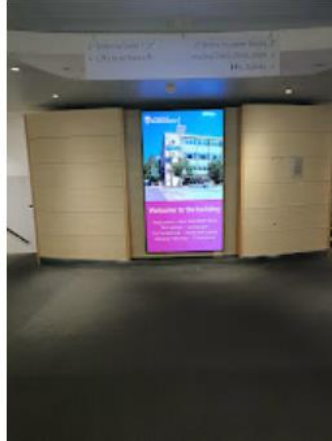
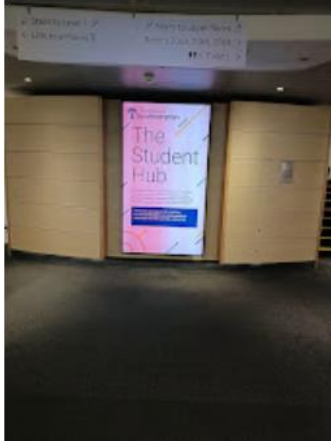


Gately Waste Storage Area – Poor Waste Segregation (See OF15)



SJM Foyer – Catering, Common learning spaces, Lecture theatre (The Student Hub)

Front lobby/foyer with digital information board and Emergency equipment (fire doors, extinguishers, alarms and notices)



Engineering Towing Lab

The university towing laboratory was visited. The laboratory experimental pool is said to have a capacity of 3 million litre of water. The height of the tank is about 3.44m.

The water is constantly maintained and purified with help of chemicals and UV lighting. There is continuous flow and release of water. The is approximately 1mm loose of height due to the release of wate weekly. It is allowed to go down to by 5mm before being topped up (approximately monthly).

The is periodic backwash and desilting, with about 5m³ of water lost during the process. Regular quality test is carried out (weekly chlorine test), However, some of the test had been missed due to resource availability (see OFI).

The following COSHH records where sampled

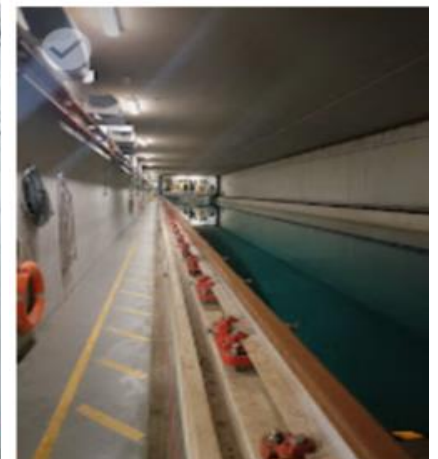
Ethanol
Filter Primmer
Matt Black Spray Pack

The chlorine dosing room was visited, However no COSHH information or RA was seen at the dossing room (See OFI)

Towing lab entry and information board



Inside the Towing pool



Chemical Management Area

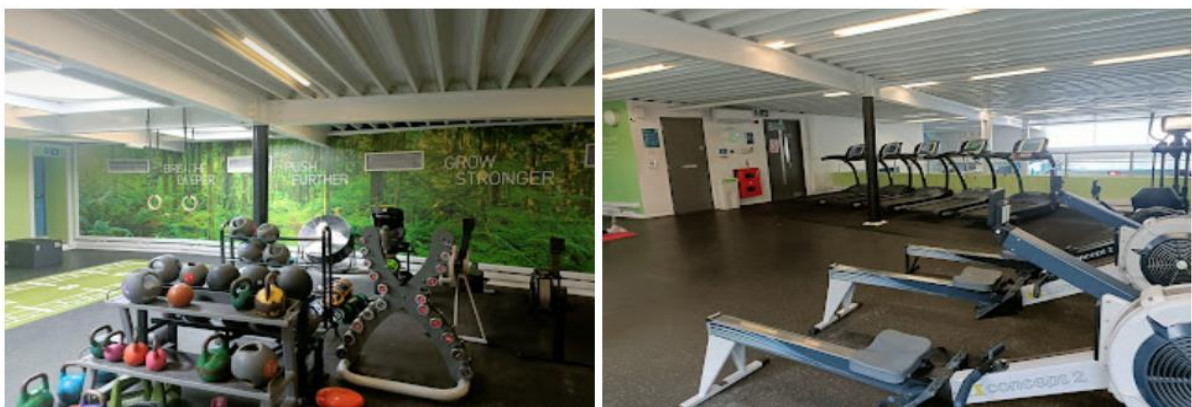
Desilting Room and Chlorine Dosing Room (No COSHH information found in the chlorine dosing room – see OFI)



Sports Complex (Gym & Swimming Pool)

The sport complex has a swimming pool and a gym facility. The swimming pool has a treatment plant to ensure safety of the users. The chemical room is a restricted area. Only authorised personnel are allowed.

Below are some of the snapshots of the area visited



Below is the pool chemical Room (spill kit and COSHH information board)- Sall chemical seen where properly stored and managed effectively.



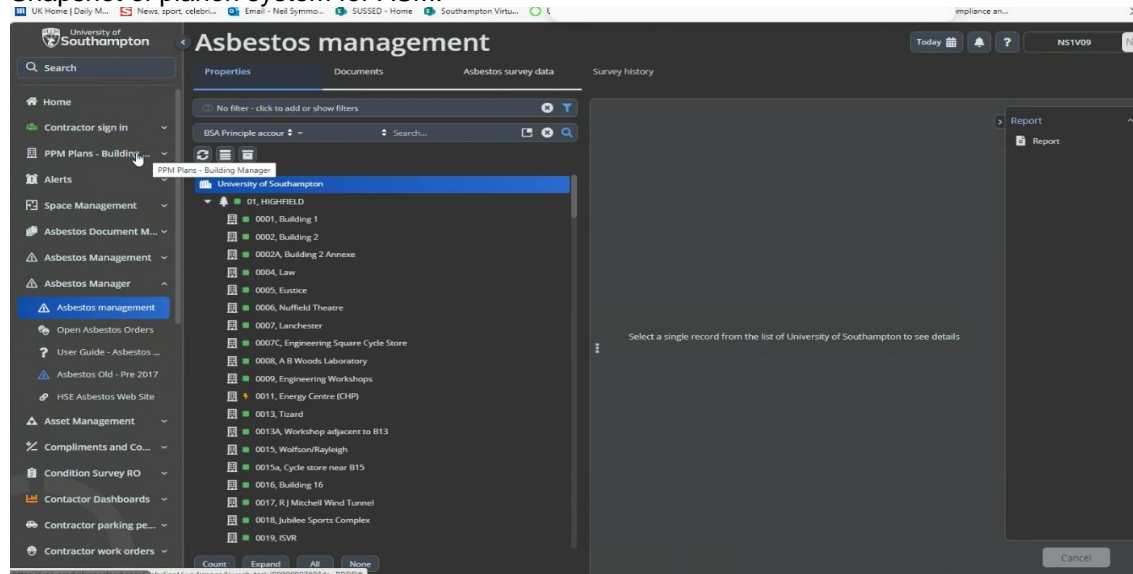
Conclusion of the overall effectiveness of the process: Findings have been identified - Process / Audit Area remains satisfactory

Process/audit area:	ASBESTOS Management
Auditees:	Neil
Auditor (if applicable):	
Method of Audit	<i>Choose an item.</i>
Evidence to support audit conclusion:	

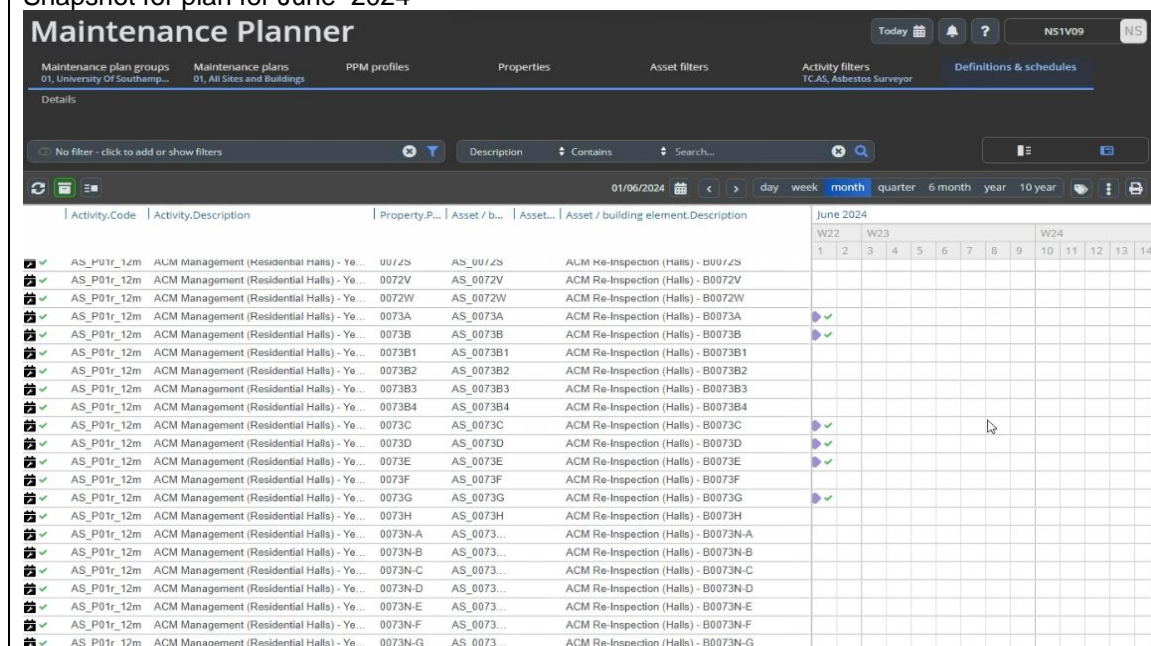
The organisation has a large amount of building with asbestos issue. A new contractor was appointed to manage the asbestos survey. In 2020 a comprehensive survey was carried out by the company. Survey reports stored in PlanOn System.

Annual inspections are carried by the Galy Howard Technical. Reports are uploaded in the PlanON system. The last annual inspection was carried of Planned monthly survey) for all building with ASM issues

Snapshot of planon system for ASM.



Snapshot for plan for June 2024

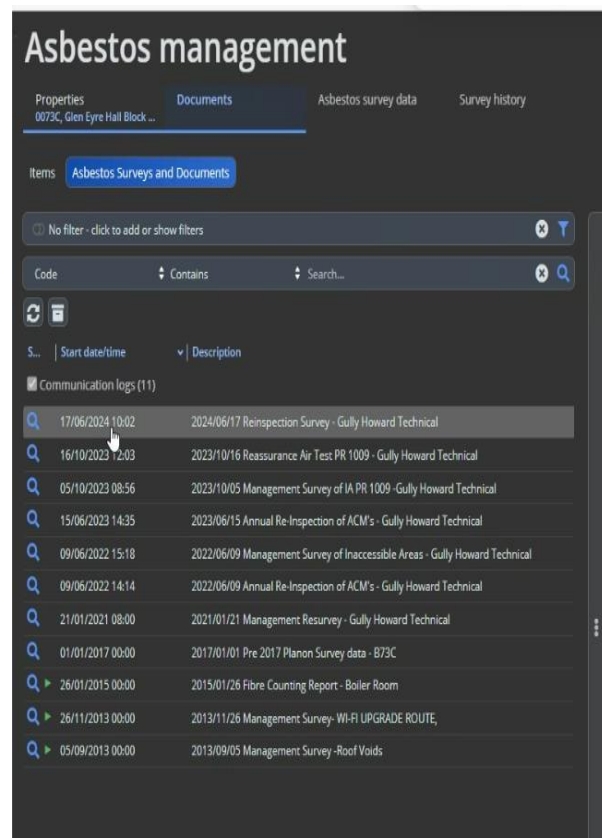


AS_P01r_12m	ACM Management (Residential Halls) - Ye...	0072V	AS_0072V	ACM Re-Inspection (Halls) - B0072V	
AS_P01r_12m	ACM Management (Residential Halls) - Ye...	0072W	AS_0072W	ACM Re-Inspection (Halls) - B0072W	
AS_P01r_12m	ACM Management (Residential Halls) - Ye...	0073A	AS_0073A	ACM Re-Inspection (Halls) - B0073A	
AS_P01r_12m	ACM Management (Residential Halls) - Ye...	0073B	AS_0073B	ACM Re-Inspection (Halls) - B0073B	
AS_P01r_12m	ACM Management (Residential Halls) - Ye...	0073B1	AS_0073B1	ACM Re-Inspection (Halls) - B0073B1	
AS_P01r_12m	ACM Management (Residential Halls) - Ye...	0073B2	AS_0073B2	ACM Re-Inspection (Halls) - B0073B2	
AS_P01r_12m	ACM Management (Residential Halls) - Ye...	0073B3	AS_0073B3	ACM Re-Inspection (Halls) - B0073B3	
AS_P01r_12m	ACM Management (Residential Halls) - Ye...	0073B4	AS_0073B4	ACM Re-Inspection (Halls) - B0073B4	
AS_P01r_12m	ACM Management (Residential Halls) - Ye...	0073C	AS_0073C	ACM Re-Inspection (Halls) - B0073C	

Jobs are usually raised in the beginning of the month, However work orders are raised and jobs assigned by the contractors on the date convenient for the term contractor.

Review Inspection report

0073C –



Asbestos management

Properties: 0073C, Glen Eyre Hall Block ... Documents Asbestos survey data Survey history

Items: Asbestos Surveys and Documents

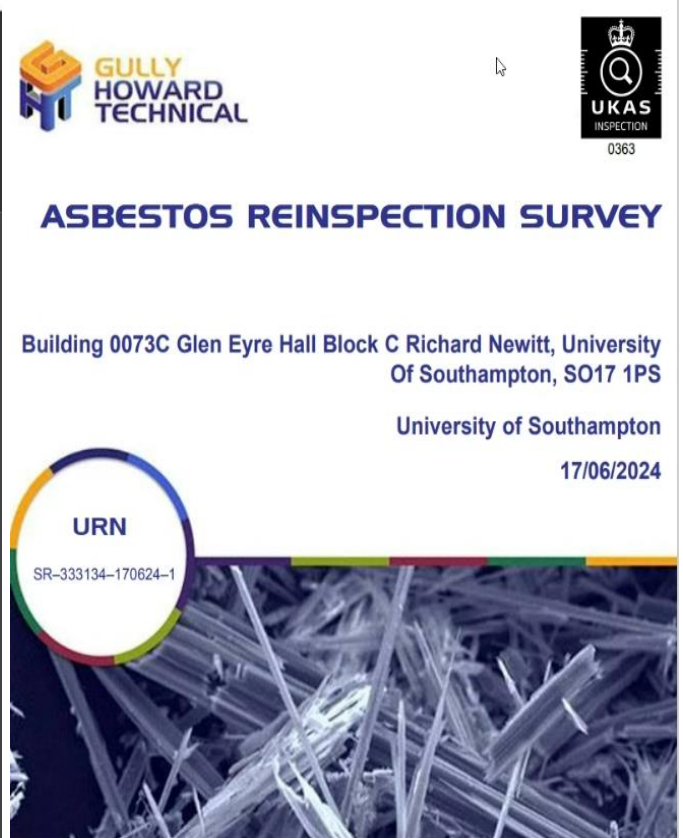
No filter - click to add or show filters

Code Contains Search...

Start date/time Description

Communication logs (11)

Start date/time	Description
17/06/2024 10:02	2024/06/17 Reinspection Survey - Gully Howard Technical
16/10/2023 12:03	2023/10/16 Reassurance Air Test PR 1009 - Gully Howard Technical
05/10/2023 08:56	2023/10/05 Management Survey of IA PR 1009 - Gully Howard Technical
15/06/2023 14:35	2023/06/15 Annual Re-Inspection of ACM's - Gully Howard Technical
09/06/2022 15:18	2022/06/09 Management Survey of Inaccessible Areas - Gully Howard Technical
09/06/2022 14:14	2022/06/09 Annual Re-Inspection of ACM's - Gully Howard Technical
21/01/2021 08:00	2021/01/21 Management Resurvey - Gully Howard Technical
01/01/2017 00:00	2017/01/01 Pre 2017 Planon Survey data - B73C
26/01/2015 00:00	2015/01/26 Fibre Counting Report - Boiler Room
26/11/2013 00:00	2013/11/26 Management Survey - WI-FI UPGRADE ROUTE
05/09/2013 00:00	2013/09/05 Management Survey - Roof Voids



GULLY HOWARD TECHNICAL

UKAS INSPECTION 0363

ASBESTOS REINSPECTION SURVEY

Building 0073C Glen Eyre Hall Block C Richard Newitt, University Of Southampton, SO17 1PS

University of Southampton

17/06/2024

URN

SR-333134-170624-1

Latest asbestos inspection 07.06.2024 - / Report Front Page

ACMs IDENTIFIED

BUILDING	FLOOR	ROOM	ITEM	RISK SCORE	RECOMMENDATION
Main Building	1st Floor	101	Wall - Skirting. AS19935 -	LOW (9)	Encapsulate
Main Building	1st Floor	102	Floor - Floor tile and adhesive. AS19938 -	LOW (9)	Monitor Condition
Main Building	1st Floor	102	Wall - Skirting. AS19937 -	LOW (9)	Encapsulate
Main Building	1st Floor	103	Wall - Skirting. AS19936 -	LOW (9)	Encapsulate
Main Building	1st Floor	104	Floor - Floor tile and adhesive. AS19923 -	LOW (9)	Monitor Condition
Main Building	1st Floor	104	Wall - Skirting. AS19922 -	LOW (9)	Encapsulate
Main Building	1st Floor	105	Floor - Floor tile and adhesive. AS19925 -	LOW (9)	Monitor Condition
Main Building	1st Floor	105	Wall - Skirting. AS19924 -	LOW (9)	Encapsulate
Main Building	1st Floor	106	Floor - Floor tile and adhesive. AS19927 -	LOW (9)	Monitor Condition
Main Building	1st Floor	106	Wall - Skirting. AS19926 -	LOW (9)	Encapsulate
Main Building	1st Floor	107	Floor - Floor tile and adhesive. AS19930 -	LOW (9)	Monitor Condition
Main Building	1st Floor	107	Wall - Skirting. AS19929 -	LOW (9)	Encapsulate
Main Building	2nd Floor	201	Floor - Floor tile and adhesive. AS19964 -	LOW (9)	Monitor Condition

Page 3 of 38

ASBESTOS Reinspection Survey

Issue Date 12 Jul 2024

Building 0073C Glen Eyre Hall Block C Richard Newitt, University Of Southampton, SO17 1PS
JOBNUM 0078805
UPRN 0073C

BUILDING			
Main Building			
FLOOR	ROOM	ITEM	
1st Floor	102	Wall - Skirting. AS19937 -	
RESULT	MATERIAL ASSESSMENT	3	PHOTO
Strongly Presumed	PRODUCT TYPE	1	
ASBESTOS FIBRE TYPE	CONDITION TYPE	1	
Chrysotile	SURFACE TREATMENT	0	
SAMPLE NO	ASBESTOS TYPE	1	
As BP001028 (MP003274)*	PRIORITY ASSESSMENT	6	
EXTENT AMOUNT	OCCUPANCY	1	
11m²	LIKELIHOOD OF DISTURBANCE	2	
MATERIAL	HUMAN EXPOSURE POTENTIAL	3	
Thermoplastic	MAINTENANCE ACTIVITY	0	
ORIGINAL COMMENTS	OVERALL RISK SCORE	9	RECOMMENDATION
			Encapsulate
REINSPECTION COMMENTS			REINSPECTION STATE
			No Change

Low risk ACM's Identified.

Recommendation identified are captured below-

4.0 CONCLUSIONS AND ACTIONS

The full list of ACMs with recommendations can be found in section 1.2. The recommendations provided are surveyor guidance based on the condition of the materials at the time of survey. It is the responsibility of the duty holder to monitor the condition of known and presumed ACMs. Any ACMs should be removed if due to be effected by any refurbishment works.

BUILDING	FLOOR	ROOM	ITEM	RISK SCORE	RECOMMENDATION
Main Building	1st Floor	101	Wall - Skirting. AS19935 -	LOW (9)	Encapsulate
Main Building	1st Floor	102	Wall - Skirting. AS19937 -	LOW (9)	Encapsulate
Main Building	1st Floor	103	Wall - Skirting. AS19936 -	LOW (9)	Encapsulate
Main Building	1st Floor	104	Wall - Skirting. AS19922 -	LOW (9)	Encapsulate
Main Building	1st Floor	105	Wall - Skirting. AS19924 -	LOW (9)	Encapsulate
Main Building	1st Floor	106	Wall - Skirting. AS19926 -	LOW (9)	Encapsulate
Main Building	1st Floor	107	Wall - Skirting. AS19929 -	LOW (9)	Encapsulate
Main Building	2nd Floor	201	Wall - Skirting. AS19963 -	LOW (9)	Encapsulate
Main Building	2nd Floor	202	Wall - Skirting. AS19965 -	LOW (9)	Encapsulate
Main Building	2nd Floor	203	Wall - Skirting. AS19940 -	LOW (9)	Encapsulate
Main Building	2nd Floor	204	Wall - Skirting. AS19961 -	LOW (9)	Encapsulate
Main Building	2nd Floor	205	Wall - Skirting. AS19949 -	LOW (9)	Encapsulate
Main Building	2nd Floor	206	Wall - Skirting. AS19951 -	LOW (9)	Encapsulate
Main Building	2nd Floor	207	Wall - Skirting. AS19954 -	LOW (9)	Encapsulate
Main Building	2nd Floor	208	Wall - Skirting. AS19956 -	LOW (9)	Encapsulate

This inspection body is accredited in accordance with the recognised International Standard ISO/IEC 17020:2012. This accreditation demonstrates technical competence for a defined scope and the operation of an inspection body quality management system (refer joint ISO/ILAC-IAF communiqué dated September 2013).

The joint ISO-ILAC-IAF communiqués are available here: <https://ilac.org/about-ilac/partnerships/international-partners/iso/>

Report verified by Oliver Lea, generated 12 Jul 2024, and authorised by Hayley Ormes



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Recommendation – will be implemented before the resumption of the students (September). This will give opportunity for checks to be carried before the facilities are put back to use.

Conclusion of the overall effectiveness of the process: Process / Audit Area is satisfactory

--

Process/audit area:	Lanscaping Manament
Auditees:	Amanda Boorer
Auditor (if applicable):	
Method of Audit	On-site
Evidence to support audit conclusion:	
<p>The organisation uses a company called complete weed control (Southampton area). The company is in charge of ensuring all hard surface, walkway etc. However, all other areas in the university is carried out by the university operatives.</p> <p>All operatives have all the certificates below</p> <p>PA1 – Cert to buy commercial strength chemicals PA6 – Allows application Naftac and Atimsier</p> <p>All waste from landscaping operations are managed by the university's campus services. Empty ADI containers are disposed by the hazardous waste disposal routes by the campus services.</p> <p>PESTICIDES Use evidence</p> <p>Equipment for the operations is carried out by external parties (Hunts Forest. co.uk). However, minor repairs and services will be carried by the inhouse team very soon (by September 2024).</p>	
Conclusion of the overall effectiveness of the process: Process / Audit Area is satisfactory	

Process/audit area:	Maintenance – Contractor operations.
Auditees:	Peter Cornick
Auditor (if applicable):	
Method of Audit	On-site
Evidence to support audit conclusion:	
<p>The maintenance team managing all building maintenance within the university. General repairs are carried out. Small installation is also carried out such as small office fittings.</p> <p>The team uses contractors for scaffolding, Flooring, slurry, Roofworks etc. These contractors are managed by university approved contractor list and on their PlanOn portals.</p> <p>The maintenance team will usually raise a works order, review RAMS and raise permits for jobs when necessary. However, supervision of jobs is done Assistant repairs manager, who signs off all finished jobs.</p> <p>Reviewed some RAMs from MC flooring and Fire Marck</p> <p>All waste from jobs are taken away by the contractors for processing-</p> <p>Review</p> <p>MC Flooring – CBDU 455334 Reg date 07/10/2022 Fire Mark Ltd – CBDU 63583 Exp 10 Oct 2024 Ridon Glass - CBDU 202055 Exp 30 Oct 2026</p> <p>Minor NC – No Waste licence found for two site contractors reviewed.</p> <p>Maintenance Contractors found at the hall's residence – Romero & Gately</p> <p>MountJoy – CBDU 117027 Exp 20 June 2025 Durubilis limited – CBDU 163476 Exp 20 March 2026</p>	
Conclusion of the overall effectiveness of the process: Process / Audit Area is satisfactory	

Process/audit area:	Energy Management Process
Auditees:	Sara Weston & Sandra Ponponne
Auditor (if applicable):	
Method of Audit	On-site
Evidence to support audit conclusion:	

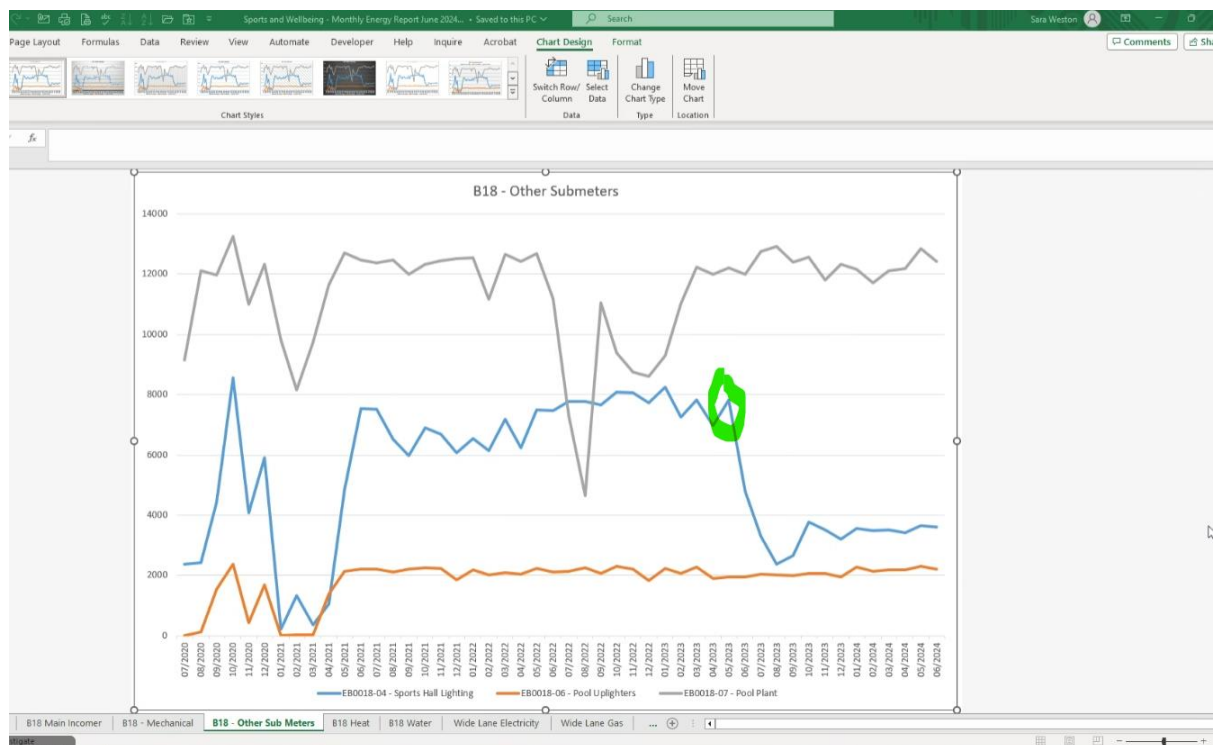
The team ensures that all university operations (residential and academic). Gas, water and electricity are managed. City centre campus has been added to the total portfolio.

The team ensures that all data are reviewed periodically and see to the reduction of use. The team manages about 800 meters for gas and electricity to ensure that effective data is received from all its facilities.

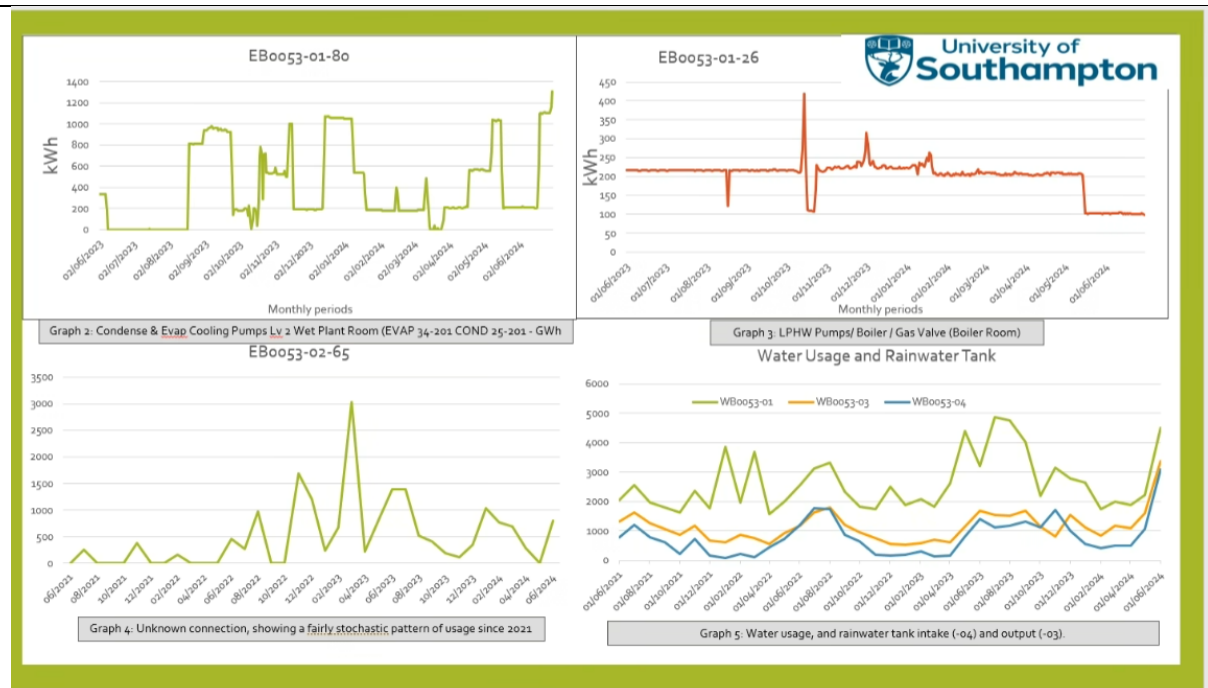
The data received are usually based on a 5% tolerance level and the meters also have a 2% tolerance level.

Water data review has indicated some leaks using the base load as reference. Electricity has also been affected positively as overnight uses have also been reduced.

Below is a monthly report reviewed 2020-2024 of sports Hall



Snapshot of Building 53 – Water Consumption reviewed and Faulty water valve was discovered and fixed, Awaiting record for July to review impact.



The Green circle indicate the period LRED was installed for the sports hall and this indicates a significant drop in anergy use.

Conclusion of the overall effectiveness of the process: Process / Audit Area is satisfactory

Process/audit area:	Waste Management Process
Auditees:	Osheen - Campus Waste Manager
Auditor (if applicable):	
Method of Audit	On-site
Evidence to support audit conclusion:	

UOSEMSOP002 Waste Management Procedure v.13 17.01.2023.docx

The institution has a waste procedure (recently updated). The institution has about 7-10 main waste categories as a general waste contractor handle-

UNIVERSITY OF
Southampton

Procedure: UOSEMSOP002 Environmental Operational Procedure- Waste Management
Department: Estates and Facilities
Site: University of Southampton

Version control

Version	Change	Date	Authority
1	Still Draft	20/06/2013	MT
2	Updated references	26/09/2013	MT
3	Updated following comments from Transport Manager	03/10/2013	MT
4	Update for radioactive substances disposal and review	14/07/2014	Environment Manager
5	Updated to include Astro House waste management	16/09/2014	Environment Manager
6	Updated to include reference to destruction of confidential WEEE at Astro House	26/09/2014	Environment Manager
7	Minor amends following review meeting (07.12.15) with Campus Services Manager and Waste & Recycling Manager	27/01/2016	Environment & Sustainability Manager
8	Inclusion of waste records location on the JDrive. SUSU name change to The Union Southampton. Reference to hazardous waste producer registration removed.	20/09/16	Environment & Sustainability Manager
9	FM service provider at Astro House updated.	06/03/17	Environment & Sustainability Manager
10	Review of procedure and update to legislation references, reference to HESA, job title of Campus Services Manager and reference to communication channels	08/02/2021	Environment & Sustainability Manager
11	Amendment to minor details following review by Campus Services Manager	21/12/2021	Environment & Sustainability Manager
12	Amendment to process of reusing furniture. Removal of reference to Warr-It	11/08/2022	Environment & Sustainability Manager
13	Amendment to ink recycling procedure	17/01/2023	Environment & Sustainability Manager

Department: All
Site: All (in scope)
Author: Campus Services Manager
Approved by: Estates & Facilities Board

Purpose:

- To explain how waste and recycling is managed at the University of Southampton
- To ensure that Waste Management Objectives and Targets are achieved.
- To ensure that waste documentation is stored and maintained.

1
When printed this document in UNCONTROLLED
UOSEMSOP002 Waste Management

UNIVERSITY OF
Southampton

- To ensure waste management data is collected and reported.
- To ensure compliance with relevant environmental legislation

Scope:

- All waste produced at all sites in scope, but does not apply to contractors working on site.

Method:

Collection of recyclables and general waste (all sites except Astro House)

- Waste and Recycling operatives, managed by the Campus Services Manager, are responsible for weekly (and in some cases bi-weekly) emptying of all internal recycling bins in offices and academic buildings. This service is augmented by Domestic Services operatives who operate an ad hoc emptying service for these bins.
- Domestic Services operatives are responsible for the daily emptying of all internal Food Caddies in offices and academic buildings.
- Waste and Recycling operatives are responsible for daily emptying of all external recycling and waste litter bins.
- Students themselves are responsible for the emptying of all internal recycling bins and Food Caddies in student halls of residence kitchens.
- Catering staff are responsible for emptying all internal recycling bins in University catered areas
- The Union Southampton staff are responsible for emptying all internal recycling bins in areas managed by The Union Southampton.
- Waste contractors are responsible for collecting recycling (Including Food Waste) and general waste from the designated waste compounds (As shown on the Open Data campus site plan web pages).
- The University is trialling a new furniture reuse system that is being supported by waste contractor, Suez. This is called The Recycled Assets Company, who take furniture and either sell, donate or recycle the furniture afterwards. Any sale will result in a 25% rebate back to the University. The system is managed by the individual department or faculty and not solely by Estates and Facilities.
- All bulk removal of furniture or other equipment (including WEEE waste, see below) is collected from source by Porters or Waste and Recycling operatives and temporarily stored in the University's storage unit in Belgrave Industrial Estate. Furniture that is not selected for re-use within a short period of time is broken down and placed in skips for recycling. These are collected by the waste contractor. Such waste is occasionally collected directly from source by the contractor. Requests for removal are made via the University of Southampton HelpDesk or Planon.
- Skip hire is arranged using the appointed waste contractor by request via the University of Southampton HelpDesk or Planon.

2
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UOSEMSOP002 Waste Management

Suez
General Waste
Recyclable waste
Laboratory waste
Lamps
Foods waste

Tradbe
Harz waste
WEEE
Stone
Stern

Initial



AUDIT REPORT PART B – AUDIT REPORT

Hygiene Waste

Rico Lights

Fluorescent and other lights bulbs.

Used oils ????

Tracking of Waste contractor's license is carried out monthly by the waste team and sent to the compliance team for documentation.

Waste tracking is carried out by the waste team and summarised annually by the sustainability team as part of the annual report. Rolling targets have been established, However the institution has not reached those targets.

Waste segregation is an issue however there are campaigns ongoing within the institution to improve the segregation within the organisation.

OFI – WEEE waste procedure may need to be updated to include the recent takeback process for WEEE waste, as the process of vendors take back white goods (WEEE) waste as they deliver new ones.

Below is a recent waste consignment/Transfer notes:

Fluorescent light tubes

Company Name **STEAN ELECTRIC** WEEE TRANSFER & HAZARDOUS WASTE CONSIGNMENT NOTE

CONSIGNMENT NOTE No. **N/2014/16175** Only enter a Consignment Note No. as described on reverse

PROFIT CENTRE NAME AND NO. **SOUTHAMPTON 014** TRADING STYLE

EXEMPTION No. **EP2155536** WASTE CARRIERS LICENSE No. **WEX 363041** WASTE TYPE (Tick Box) ☒ HAZARDOUS ☐ NON-HAZARDOUS METHOD (Tick Box) ☒ COLLECT ☐ RECEIVE LIKE FOR LIKE TAKE BACK

PART A - NOTIFICATION DETAILS

1 The waste described below is to be transferred from:
UNIVERSITY OF SOTON
15-17 ARCHERS ROAD
SOUTHAMPTON
SO15 2JF

2 The waste will be taken to:
STEAN ELECTRIC
UNITS
WATERLOO IND EST
HEDGE END
SOUTHAMPTON
SO30 2QT

3 The waste producer was (if different from 1)
N/A

PART B - DESCRIPTION OF THE WASTE (Class reversal of form for examples of SIC, Category, EWC and Hazard Codes)

Qty (kg)	Description	Chemical/Biological Components	Concentration	EWC Code	Hazard Code	WEEE Category	Physical Form
	Fluorescent Tubes	Mercury	0.1%	2 0 1 1 2 1	H5, H14	5	Liquid

NON-HAZARDOUS WASTE

Qty (kg)	Description	WEEE Category	EWC Code
1	HOBX	5	160214
3	MIXED	5	160214
2	WASHING MACHINES	8	160214

PART C - CARRIER'S CERTIFICATE (To be completed by the carrier)

1 I confirm that the waste described above on the date below:
a) The details in Parts A1, A2 and B are correct.
b) I have been advised of any specific handling requirements.

Carrier Name:
On behalf of (Name, Address, Post Code, Phone No.):
Tick here if same as A2

Consignor Name:
On behalf of (Name, Address, Post Code, Phone No.):
Tick here if same as A2

Vehicle Registration No: **0668005**

Signature: *[Signature]* DATE: **01/10/2014** TIME: **14:49**

Signature: *[Signature]* DATE: **01/10/2014** TIME: **14:49**

Notes: **COLLECTION: 14063454**

Form 3100C White Copy - Customer receipt Copy Yellow Copy - Customer File Copy Green Copy - WEEE File Copy Pink Copy - Property & Services Department Copy

Waste Oil (Non Haz)

WIMBORNE Cooking oils Tel/Fax: 01258 858088 Mob: 07973 350243 email: wimbornecookingoils@yahoo.co.uk

Anten: Bay 1, Blue Roof Farm, Thorpe Road, Bournemouth, BH9 0DQ

ACC INVOICE Date **24/6/24**

WASTE TRANSFER NOTE 1410

To **B138 5017 137**

Quantity	Description	Price
8 x	6000 5000	1224
6099 3851	credit: £ 69	

Received in good condition Sign: *[Signature]* NET **112.50**
Print Name: *[Name]* VAT **112.50**

Payment Terms 30 Days Total **112.50**

Self-declaration on used cooking oils and fats (UCO) for biofuel production according to the Directive 2009/28/EC under ISCC EU

By signing this self-declaration, the signatory declares that the following requirements are met

- The delivery consists entirely of used cooking oil (UCO) and is not mixed with fresh oil.
Please mark either a) or b):
a) The cooking oil is entirely of vegetable origin ☒
b) The cooking oil is entirely or partly of animal origin (e.g. lard, butter, tallow) ☐
- Documentation of quantities delivered is available.
- Applicable national legislation regarding waste prevention and management (e.g. transport, supervision etc) are complied with.

Note: By signing this self-declaration, the signatory acknowledges that auditors from certification bodies (may be accompanied inspectors from authorities with the purpose to evaluate the performance of the certified body) and staff of certification schemes can examine whether the requirements are met as stated in this self-declaration.

I confirm that I have fulfilled my duty to apply the waste hierarchy as required by regulation 12 of the waste (England & Wales) regulations 2011.

Cont. Size	No. Collected	Customers Name & Signature	Drivers Name & Signature
300	3	<i>[Signature]</i>	<i>[Signature]</i>

Environment Agency Reg. No. CBDU 103828 EU ISCC Certified EWC Code 20-01-25 VAT No. 580241265

WIMBORNE Cooking oils Tel/Fax: 01258 858088 Mob: 07973 350243 email: wimbornecookingoils@yahoo.co.uk

Anten: Bay 1, Blue Roof Farm, Thorpe Road, Bournemouth, BH9 0DQ

ACC INVOICE Date **24/6/24**

WASTE TRANSFER NOTE 6099 3941073

To **B138 5017 137**

Quantity	Description	Price
40	4000 5000	112.50
14000	credit: £ 18.50	

Received in good condition Sign: *[Signature]* NET **112.50**
Print Name: *[Name]* VAT **112.50**

Payment Terms 30 Days Total **112.50**

Self-declaration on used cooking oils and fats (UCO) for biofuel production according to the Directive 2009/28/EC under ISCC EU

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I confirm that I have fulfilled my duty to apply the waste hierarchy as required by regulation 12 of the waste (England & Wales) regulations 2011.

Cont. Size	No. Collected	Customers Name & Signature	Drivers Name & Signature
60	1	<i>[Signature]</i>	<i>[Signature]</i>

Environment Agency Reg. No. CBDU 103828 EU ISCC Certified EWC Code 20-01-25 VAT No. 580241265

Kitchen and canteen waste.

SUEZ
DUTY OF CARE / WASTE TRANSFER NOTE
ENVIRONMENTAL PROTECTION ACT 1990 SECTION 34
SUEZ Contract No. As per backing sheet
Account No. 34054651

Part A - The Waste Producer/Holder
CUSTOMER: University of Southampton, Building 37, University Road, Southampton, Hampshire, SO17 1BJ
SERVICE LOCATION: As per attach Spreadsheet

2. Which of the following are you? (please tick at least one box)
Waste Producer ☐ Waste Collection Authority ☐ Register ☐
* If you are a Registered Broker please complete the remaining boxes and enclose a copy of your Registration Certificate with this document.
Registration No. Issuing Authority Expiry Date

3. What is your company Standard Industrial Classification (SIC) Code? 85.42/1

Part B - Description of Waste
1. Please describe the waste being transferred: Biodegradable Kitchen and Canteen Waste DM
2. EWC Code: 20.03.01
3. Container: As per attached
4. Quantity per consignment:
5. Type of premises from which waste originates: University

Part C - The Company receiving the waste
1. SUEZ Recycling and Recovery UK Limited, Grenfell Road, Maidenhead, SL6 1EG
2. Waste Carrier Registration No. CBU93554 Issued by Environment Agency

Part D - Transfer Certificate
1. Address of place of transfer/service location as in Part A above: to 31/12/2024
2. "Season Ticket" valid from: 01/01/2024
3. Signed: on behalf of the Company named in Part A. on behalf of SUEZ Recycling and Recovery UK Limited

Part E - Pre-Treatment Confirmation
Do you currently segregate your general waste? YES ☐ NO ☐
What materials are segregated (Tick all that apply): Wood ☐ Paper ☐ Cardboard ☐ Glass ☐ Plastic ☐ Green Waste ☐ Ferrous ☐ Non-Ferrous ☐ WEEE ☐ Other (please specify)
Do you currently segregate your hazardous waste? YES ☐ NO ☐
What processes are employed (Tick all that apply): Composting ☐ Incineration ☐ Landfill ☐ Other (please specify)
Do you currently segregate your hazardous waste? YES ☐ NO ☐
What processes are employed (Tick all that apply): Composting ☐ Incineration ☐ Landfill ☐ Other (please specify)

I confirm that I have fulfilled my duty to apply the waste hierarchy as required by Regulation 12 of the Waste (England & Wales) Regulations 2011.

Signed: Print Name & Position: Michael Travers, Campus U

NOTE TO THE PRODUCER:
In order to remain in compliance with Section 34 of the Environmental Protection Act it is essential that this form is completed and returned to the C.U. to arrive BEFORE the first date in D.2. Should the description of your waste change before the second date in D.2 then you must inform your U who will make immediate arrangements to update the description.
THIS FORM MUST BE SIGNED ONLY BY AUTHORISED REPRESENTATIVES OF EACH PARTY AND MUST BE RETAINED FOR AT LEAST 10 YEARS.

SUEZ Recycling and Recovery UK Limited Registered in England and Wales, Registered No.02291198, Registered Office: SUEZ House, Grenfell Road, Maidenhead, SL6 1EG

Waste Metal Scrap

SSI SOUTHAMPTON STEEL
FORM: SOTONUNIV2024
AWTNY2024

Station House, Station Road, Nursling, Southampton, Hampshire, SO16 0YD
Main Contact: Keith Maunder
01794 - 322702

ANNUAL DUTY OF CARE CONTROLLED WASTE TRANSFER NOTE
Waste Transfer Registration No: EAWML18986
Waste Broker No: CBU90511

SECTION A DESCRIPTION OF WASTE
Scrap Materials
ANNUAL WASTE TRANSFER NOTE 01.01.2024 TO 31.12.2024

EWC Codes: 12 01 03/16.01.18/17 04 11/19.12.03/15.01.04 and 17.04.07
SIC Code: 85.42/1

SECTION B COLLECTION POINT / TRANSFER
Name and Address: University of Southampton, Estates and Facilities, Level 3, Building 35, Highfield, Southampton, SO17 1BJ
For the attention of: Nick Croyton
Email: ctraadin@soton.ac.uk
On behalf of producer: University of Southampton
DATE: 01.01.2024
Waste Producer ☒

SECTION C WASTE CARRIER STATUS
1. Registered waste carriers name: Southampton Steel
2. Waste Transfer Licence: EAWML18986

SECTION D DELIVERY POINT (Transferee)
EMR, Princes Street Southampton, SO14 5AP
Signed on behalf of Southampton Steel: Denise Long
DATE: 01.01.2024

I confirm that I have fulfilled my duty of care to apply the waste hierarchy as required by Reg. 12 of the Waste (England & Wales) Regulations 2011.

Viola Food waste

VEOLIA
WASTE TRANSFER NOTE
Account Number / 02483801

Duty of Care: Environmental Protection Act 1990
Registered Waste Carrier No CBU95537 Issued by the Environmental Agency

To: The Registered Carrier: Veolia ES (UK) Limited
From: The Waste Producer: University of Southampton, Estates & Facilities, Level 2, Building 35, Southampton, SO17 1BJ

Veolia ES (UK) Ltd warrants that:
Veolia ES (UK) Ltd, a registered carrier, undertakes to dispose of the waste described on the attached schedule or transfer it to the holder of an environmental permit appropriate to the waste described in accordance with Veolia ES (UK) Ltd's Duty of Care under the Environmental Protection Act 1990, Regulation 35 of the Waste (England and Wales) Regulations 2011, Environmental Protection (Duty of Care) (Scotland) Regulations 2011 and the terms and conditions of the existing Dry Waste Service contract between Veolia ES (UK) Ltd and the waste producer.

The Waste Producer warrants that:
- The waste does not contain any 'special' or 'hazardous' waste
- The waste does not contain any 'special' or 'hazardous' waste
- Any significant change in the waste will be declared to Veolia ES(UK) Ltd in advance of collection
- The EWC Code(s) referred to on the attached schedule is correct
- The SIC Code(s) referred to on the attached schedule is correct in accordance with the UK Standard Industrial Classification of Economic Activities 2007 (SIC 2007). Please add the code if the field is empty.
- It has fulfilled any duty to apply the waste hierarchy as required by Regulation 12 of the Waste (England and Wales) Regulations 2011 (in the case of England and Wales) or Section 34, subsection 2A of the Environmental Protection Act 1990 (as inserted by Regulation 2(4)(b) of the Waste (Scotland) Regulations 2011) (in the case of Scotland).

On behalf of Veolia ES (UK) Limited:
Signature: A Ellis
Print Name: Angela Ellis
Position: Head of Customer Experience
Valid From: 01/10/2023
Valid To: 30/09/2024

Tradebe Haz Waste

TRADEBE
The Hazardous Waste Regulations 2005: Consignment Note

Part A Consignor's details
1. Consignment Name: UNIVERSITY0022X
2. The waste described below is to be removed from: University of Southampton - Engineering, Engineering Department, University Road, Highfield Campus, Southampton SO17 1BJ, United Kingdom. Tel. Fax. Not available. Email:
3. Premises code: UNIVER
4. The waste will be taken to: Tradebe Fawley, TRADEBE FAWLEY, Charleston Road, Southampton SO453NX, United Kingdom. Tel. 01524 853053 Fax. 01524 865444. Email:
5. The waste producer was: As A2
Order Number: 4081099

Part B Description of waste
1. The process giving rise to the waste(s): CLEANROOM PROCESSING
2. Waste details: As per lot

Part C Carrier's certificate
(If more than one carrier is used, please attach schedule for subsequent carriers. If schedule of carriers is attached tick here.)
I certify that I have collected the consignment and that the details in A2, A4 and B3 are correct and I have been advised of any specific handling requirements. Where this note comprises part of a multiple collection the round number and collection number are:
1. Carrier name:
On behalf of: Address:
Tel. Fax:
Email:
2. Carrier registration no./reason for exemption:
3. Vehicle registration No:
4. Tanker/Trailer No:
5. Print Name:
Signature:

Part D Consignor's certificate
I certify that the information in A, B and C has been completed and is correct, that the carrier is registered or exempt and was advised of the appropriate precautionary measures. All of the waste is packaged and labeled correctly and the carrier has been advised of any special handling requirements.
I confirm that I have fulfilled my duty to apply the waste hierarchy as required by Regulation 12 of the Waste (England and Wales) Regulations 2011.
1. Consignor name:
On behalf: University of Southampton - Engineering, University Road, Highfield Campus, Southampton SO17 1BJ, United Kingdom. Tel. Fax. Not available. Email:
2. Print name:
Signature:

Part E Consignee's certificate
(Where more than one waste type is collected all of the information given below must be completed for each EWC)
Individual EWC code(s) received: AS LIT
Quantity of each EWC code received (kg):
EWC code(s) accepted/rejected:
Waste management operation (R or D code):
1. I received this waste at the address given in A4 on: Date: 11/06/2024 Time: 13:44
2. Vehicle registration no. (if mode of transport, if not road): DA70
3. Where waste is rejected please provide details:
Total Quantity:
Tanker/Trailer No:
Name: Tradebe Fawley, Charleston Road, Southampton SO453NX, United Kingdom. Tel. 01524 853053 Fax. 01524 865444. Email:
Signature:
Date: 11/06/2024 Time: 14:05

Conclusion of the overall effectiveness of the process: Findings have been identified - Process / Audit Area remains satisfactory

Use of Registration Marks and Logos

Use of Registration Mark (if used) is in accordance with the Rules of Registration

Yes

Detail if required

Example of the current NQA logos:

ISO 9001 (UKAS Accredited)



ISO 9001 (UKAS Accredited) with 'UKAS Tick and Crown'



More information can be found at: <https://www.nqa.com/en-gb/clients/logo-library>

If there are inaccuracies, errors or queries regarding this report or audit findings, please contact NQA Head Office on 0800 052 2424 within five working days of the closing meeting.

End of Audit



AUDIT REPORT PART C – AUDIT PLAN

Client Name: University of Southampton

Location address or post code: University of Southampton, Highfield, Southampton, SO17 1BJ

This plan relates to the forthcoming: Surveillance visit

Applicable standard(s) or supporting criteria: ISO 14001:2015 & Eco Campus Platinum

Site Scope: Provision of Higher Education and related support services at the University of Southampton

As discussed with client, audit plan will be created during first contact prior to Surveillance visit. This will allow for auditing areas (departments and buildings) to be confirmed. 2024 surveillance visit to be conducted over 3 days

The objectives of the audit will be:

- To confirm that the management system had been established implemented and maintained in accordance with the requirements of the audit standard.
- To evaluate the ability of the management system to ensure the client organisation meets applicable statutory, regulatory and contractual requirements. Note: A management system certification audit is not a legal compliance audit.
- To evaluate the effectiveness of the management system to ensure it is continually meeting its specified objectives
- To identify as applicable, areas of the management system for potential improvement.

The audit scope describes the extent and boundaries of the audit, such as physical locations, organisational units, activities and processes to be audited.

Where the initial or re-certification process consists of more than one audit (e.g. covering different locations), the scope of an individual audit may not cover the full certification scope, but the totality of audits shall be consistent with the scope in the certification document.

Rescheduling

In the event that rescheduling cannot be avoided, or unforeseen circumstances arise, please contact NQA as soon as possible. Please note that cancellation fees may apply. Rescheduling may also result in the suspension or expiry of certification if audits are not undertaken within prescribed timeframes. Information related to rescheduling is detailed on your audit confirmation and in the NQA Rules Related to Registration available on the NQA website.

Remote Audits

Where elements of the audit are to be conducted remotely this is detailed on the audit plan. NQA will plan to deliver the audit using the tools outlined below. If you anticipate issues facilitating an audit using the listed tools, please contact your auditor at your soonest convenience.



AUDIT REPORT PART C – AUDIT PLAN

- Video conferencing via Microsoft Teams (hosted by NQA)
- Document transmittal via email or screen share using Microsoft Teams
- Video calls using either Microsoft Teams or equivalent technology (such as Zoom, WhatsApp, FaceTime)
- Alternative platforms can be supported subject to prior arrangement with the NQA Lead Auditor and technology compatibility



AUDIT REPORT PART D – AUDIT MATRIX

Relevant Standard/Supporting Documentation:	ISO 14001:2015 & Eco Campus Platinum				
<ul style="list-style-type: none"> This audit programme is to be prepared by the Lead Auditor at the completion of the Stage 2 audit or the Recertification audit. It should be replicated in all subsequent surveillance visit reports. Where an element(s) of the programme cannot be completed at a given visit the programme shall be amended and up-issued accordingly to ensure coverage at the following visit. Site visits are to be included in the programme with a clear indication as to the processes intended to be sampled. 					
Type of visit	Recertification	Surveillance 1	Surveillance 2	Recertification	Surveillance 1
Visit Due Date (MM/YY)	2023	2024	2025	2026	2027
Mandatory Elements / Selected Processes	Processes / elements to be audited are to be indicated as to be conducted either Remotely or Onsite. All processes are to be audited during a three-year certification cycle excluding the re-certification visit.				
Context of the organization	Complete, on-site	Complete, on-site	Planned, on-site	Planned, on-site	Planned, on-site
Leadership	Complete, on-site	Complete, on-site	Planned, on-site	Planned, on-site	Planned, on-site
Planning	Complete, on-site	Complete, on-site	Planned, on-site	Planned, on-site	Planned, on-site
Support	Complete, on-site	Complete, on-site	Planned, on-site	Planned, on-site	Planned, on-site
Performance evaluation	Complete, on-site	Complete, on-site	Planned, on-site	Planned, on-site	Planned, on-site
Improvement	Complete, on-site	Complete, on-site	Planned, on-site	Planned, on-site	Planned, on-site
Use of marks and references to certification / Client website	Complete, on-site	Complete, on-site	Planned, on-site	Planned, on-site	Planned, on-site
Site Tour	Complete, on-site	Complete, on-site	Planned, on-site	Planned, on-site	Planned, on-site
Operations Processes (specify detail from scope)	Complete, on-site				
• Operational Controls	Complete, on-site	Complete, on-site	Planned, on-site	Planned, on-site	Planned, on-site
• Emergency Preparedness	Complete, on-site	Complete, on-site	Planned, on-site	Planned, on-site	Planned, on-site
• Sustainable Procurement	Complete, on-site		Planned, on-site	Planned, on-site	Planned, on-site
• Sustainable Transports & Travel Plan	Complete, on-site	Complete, on-site	Planned, on-site	Planned, on-site	Planned, on-site
• Waste Recycling	Complete, on-site	Complete, on-site	Planned, on-site	Planned, on-site	Planned, on-site
• Energy Monitoring	Complete, on-site	Complete, on-site	Planned, on-site	Planned, on-site	Planned, on-site
Client Locations to be visited (Specify)					
• Campus Buildings	Complete, on-site	Complete, on-site	Planned, on-site	Planned, on-site	Planned, on-site
• Halls of Residence	Complete, on-site	Complete, on-site	Planned, on-site	Planned, on-site	Planned, on-site
• External Areas and grounds	Complete, on-site	Complete, on-site	Planned, on-site	Planned, on-site	Planned, on-site
Audit trails will be developed based upon identified risk throughout the audit and as such timings and content may be subject to change. Where the client operates shifts, the activities that take place during shift working shall be considered when developing the audit programme					

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NQA certified clients are authorized and encouraged to use NQA logos to promote their certification achievements.

Access all NQA logos here:

<https://www.nqa.com/en-gb/clients/logo-library>



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