Assessment Report

Comus Europe Limited

Assessment dates	04/04/2023 (Please refer to Appendix for details)
Assessment Location(s)	Brightlingsea (000)
Report author	Paul Gunn
Assessment Standard(s)	ISO 9001:2015

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Executive summary

The result of this assessment is the organisation is recommended for continued certification.

From the evidence seen in this assessment, Comus Europe Limited are participating in the quality management system and the system is delivering against the groups strategic direction of continued growth. One item of evidence that demonstrates the strategic direction is being supported by the quality management system was the increase in stock holding discussed in the leadership interview.

The main strength of the organisation evidenced in this assessment was the capturing of the voice of the customer. The main weakness evidenced in this assessment was the lack of documenting some corrective actions.

Overall, the evidence shows that the leadership is involved in leading a quality management system which remains both effectively and efficiently established and managed.

This remote audit has been conducted using Information and Communication Technologies including Microsoft Teams. The planned audit objectives have been achieved, there were no connectivity issues which adversely affected the audit.

Changes in the organization since last assessment

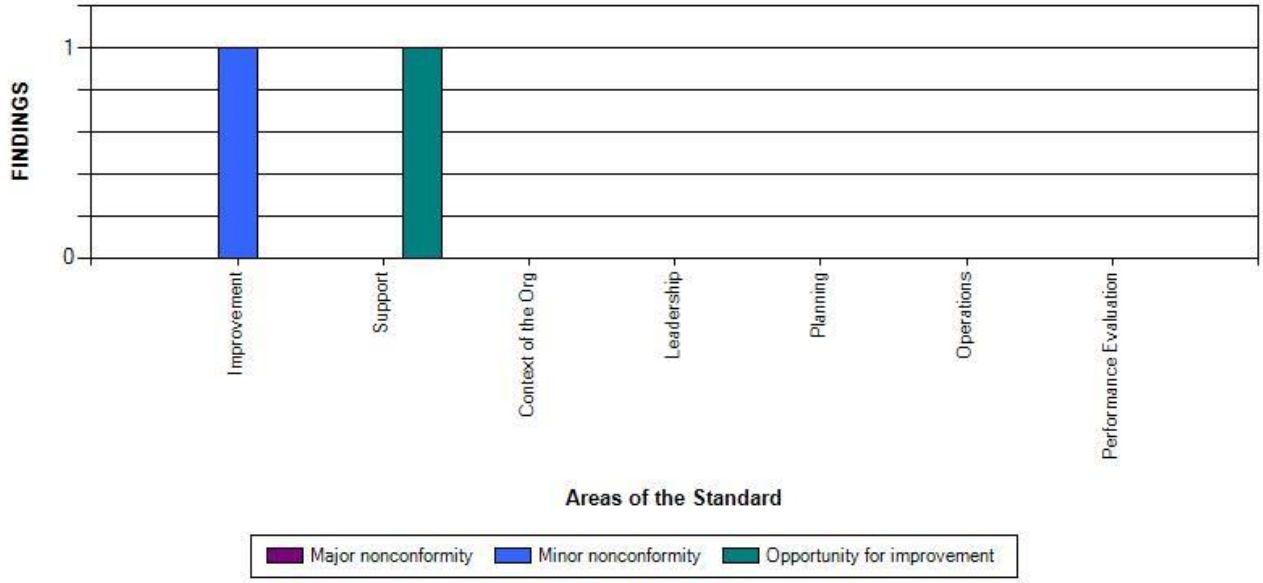
There is no significant change of the organization structure and key personnel involved in the audited management system.

No change in relation to the audited organization's activities, products or services covered by the scope of certification was identified.

There was no change to the reference or normative documents which is related to the scope of certification.

NCR summary graphs

Areas of the standard(s) where BSI recorded findings



Your next steps

NCR close out process

Corrective actions with respect to nonconformities raised at the last assessment have been reviewed and found to be effectively implemented.

A minor nonconformity requiring attention was identified. This, along with other findings, is contained within subsequent sections of the report.

A minor nonconformity relates to a single identified lapse, which would not indicate a breakdown in the management system's ability to effectively control the processes for which it was intended. It is necessary to investigate the underlying cause of any issue to determine corrective action. The proposed action will be reviewed for effective implementation at the next assessment.

Please refer to Assessment Conclusion and Recommendation section for the required submission and the defined timeline.

Assessment objective, scope, and criteria

The objective of the assessment was to conduct a surveillance assessment and look for positive evidence to verify that elements of the scope of certification and the requirements of the management standard are effectively addressed by the organization's management system; that the system is demonstrating the ability to support the achievement of statutory, regulatory and contractual requirements and the organization's specified objectives as applicable with regard to the scope of the management standard; to confirm the ongoing achievement and applicability of the forward strategic plan and where applicable to identify potential areas for improvement of the management system.

The scope of the assessment is the documented management system with relation to the requirements of ISO 9001:2015 and the defined assessment plan provided in terms of locations and areas of the system and organization to be assessed.

ISO 9001:2015
Comus Europe Limited management system documentation

Statutory and regulatory requirements

The organisation was witnessed to meet regulatory and statutory regulations in this assessment via the evidence:

The organisation has no challenges in the statutory or regulatory environment.

Assessment participants

Name	Position	Opening meeting	Closing meeting	Interviewed (processes)
Colin Beavis	Sales and QA Engineer	X	X	X

Assessment conclusion

BSI assessment team

Name	Position
Paul Gunn	Team Leader

Assessment conclusion and recommendation

The audit objectives have been achieved and the certificate scope remains appropriate. The audit team concludes based on the results of this audit that the organization does fulfil the standards and audit criteria identified within the audit report and it is deemed that the management system continues to achieve its intended outcomes.

RECOMMENDED - The audited organization may be recommended for continued certification. Effective implementation of corrective actions will be reviewed during the next surveillance audit.

You are required to identify the cause and implement corrections and corrective actions required to address all nonconformities before your next BSI assessment relating to the certificate against which the nonconformities were raised.

Use of certification documents, mark / logo, or report

The use of the BSI certification documents, and mark / logo is effectively controlled.

Findings from previous assessments

Finding Reference	2188030-202204-N1	**Certificate Reference**	FM 21080
Certificate Standard	ISO 9001:2015	**Clause**	8.5.2
Location reference	0009141171-000		
Assessment Number	3350171		
Category	Minor		
Area/process:	Identification and traceability		
Details:	The organisation has not recorded the revision/issue status of product to be made on its travellers although there is a box to record this data.		
Objective Evidence:	Traveller for order 020651 and drawing S1927AZ, revision 1 - picking list completed correctly Traveller for order 021068 and drawing S1016A, revision 14, dated 28/07/21 - picking list completed correctly and last change to drawing recorded Note: the travellers did not record the revision status of the product to be manufactured.		
Cause			
Old form with redundant requirements.			
Correction/containment			
No corrective action raised, and this has been recorded as a minor in this report; Review the use of this feature.			
Corrective action			
Feature now in use; Traveller for order 0227722 - batch 2 - confirmed as correct against the drawing.			
Closed?:			
Yes			
Justification			

Findings from this assessment

Leadership interview including compliance with statutory and regulatory requirements:

Since the last assessment, the organisation has been very busy, and it is thought this is due to stockpiling. The organisation had increased their own stock holding and has managed to keep up with demand. One big order has been for an electric vehicle manufacturer in the UK. Another major customer is in the medical sector, and this has also been on the increase.

Biggest risk is the supply chain and one special grade of glass, and this has been mitigated recently with the sourcing of a second supplier and the supplier in question has also increased their stock levels. This post pandemic response has also seen the average order size increase. Lead times for read switches are now out at 18 months, but the organisation has also second sourced these items.

All staff are working at the premises and no homeworking is being conducted. This means the communication types remain email, phone and face-to-face. Teams calls remains the primary source of external communication.

The organisation has no challenges in the statutory or regulatory environment.

Quality management system:

Risks and opportunities:
Risk and opportunities table - includes interested parties - one example is the increase in shipping documentation after the UK left the EU.

Quality policy, objectives and management review:
Quality policy, signed and dated 02/11/17;
Objectives and targets, last updated 09/12/22 - one on-going objective is a review of alternatives to mercury switches and there is no viable alternative, at this time;
Note: objectives records go back to 2009;
Management review minutes, dated 09/12/22.

Internal audit, corrective action and improvement:
Audit schedule, 2022/2023;
Internal audit on production control, dated 18/08/22 - no findings;
Internal audit on sales enquiry process, dated 12/05/22 - no findings;
Corrective action register - used for internal audit;
Note: the minor non-conformity from the previous audit has not been recording, see MINOR;
Note: there have been no corrective actions in 2022.

Customer feedback and satisfaction:
Kion supplier quality performance report, dated November 2022;
Watson Marlow supplier dashboard, dated February 2023;
Management review minutes, dated 09/12/22.

Documented information:
Document retention policy, last updated in 2019.

The above objective evidence demonstrates these planned activities are effectively implemented, but due to the minor non-conformity detailed in the above findings there has been a deviation from the planned arrangements.

Inspection, test, and despatch:

This topic was completed via photographs of the following:
Inspection and test:
General view of the QC area - good level of housekeeping;
General view of testing of S1515H - using multi-meter MO70;
2x Multi-meter MO70, serial number 88560006, and calibration label, calibrated 01/03/23, due 01/03/24;
Drawing for S1515A, revision 8, dated 01/06/06;
Traveller for order 022791 - 500x S1515H - signed off first off, dated 29/03/23.

Despatch:
2x Picking note for order number 027522, part number 35,000x S1625G;
Packing box for order number 027522;
Label on 100x parts S1625G, RoHS compliance indicated;
General view of the packing area - good standard of housekeeping.

Calibration certificates:
Certificate S29637, Multi-meter MO70, serial number 88560006, calibrated 01/03/23, due 01/03/24;
Note: no calibrated equipment in use in despatch.

Measuring and monitoring:
Management review minutes, dated 09/12/22.

The above objective evidence demonstrates these planned activities are effectively implemented.

Support processes:

Resources including competence and awareness:
Management review minutes, dated 09/12/22 - includes a review of resources;
Skills matrix 2022/2023 - CW was seen testing and confirmed to be competent;
Training record for CW, last updated 10/12/21;
Certificate of training for JJ first aid at work, level 3, dated 13/02/23, expiry 12/02/26;
Quality policy is available on the notice board;
Induction register - most recent induction BW, dated 20/02/23;
Induction checklist, BW, signed and dated 20/02/23 - under employee responsibilities the management system is discussed including why you do it and the consequences of not complying.

Infrastructure and work environment:
Data is backed up every evening and a copy is held off site;
Support contract, dated 21/12/22;
Service level agreement, dated 21/12/22;
LEV servicing report, dated 19/01/23 - scored satisfactory;
Fire extinguisher inspection certificate, dated July 2022, due July 2023;
Fire alarm inspection certificate, dated 06/09/21;
Note: this system was extended and as such a new certificate is pending;
Invoice for fire alarm inspection, number 18117, dated 03/04/23.

Measuring equipment:
Note: all items are calibrated by a subcontractor;
Calibration log, last update 01/03/23 - total of 7 items;
Certificate S29637, Multi-meter MO70, serial number 88560006, calibrated 01/03/23, due 01/03/24;
Note: some of the measuring equipment is really measuring a go or no-go situation and this risks the cost of calibration being an un-needed overhead, see OPPORTUNITY.

Organisational knowledge:
Skills matrix 2022/2023;
Continuity plan, dated 19/01/16 - includes data backing up;
Note: due to the stability of the organisation and its products there has been no need additional knowledge gathering requirements.

The above objective evidence demonstrates these planned activities are effectively implemented.

Finding Reference	2329189-202304-I1	**Certificate Reference**	FM 21080
Certificate Standard	ISO 9001:2015	**Clause**	7.1.5.2
Location reference	0009141171-000		
Assessment Number	3543085		
Category	Opportunity for Improvement		
Area/process:	Measuring equipment		
Details	Some of the measuring equipment is really measuring a go or no-go situation and this risks the cost of calibration being an un-needed overhead.		

Minor (1) nonconformities arising from this assessment.

Finding Reference	2329189-202304-N1	**Certificate Reference**	FM 21080
Certificate Standard	ISO 9001:2015	**Clause**	10.2.2
Location reference	0009141171-000		
Assessment Number	3543085		
Category	Minor		
Area/process:	Non-conformity and corrective action		
Statement of non-conformance:	Although the corrective action process is effective, the organisation had not documented the minor non-conformity from the previous assessment in their corrective action process.		
Clause requirements	The organization shall retain documented information as evidence of: a) the nature of the nonconformities and any subsequent actions taken; b) the results of any corrective action.		
Objective Evidence	The minor non-conformity from the previous audit has not been recording.		
Cause			
Correction/containment			
Corrective action			

Next visit objectives, scope, and criteria

The objective of the assessment is to ascertain the integrity of the organization's management system over the current assessment cycle to enable recertification and confirm the forward strategic assessment plan.

The scope of the assessment is the documented management system with relation to the requirements of ISO 9001:2015 and the defined assessment plan provided in terms of locations and areas of the system and organization to be assessed.

ISO 9001:2015
Comus Europe Limited management system documentation

Please note that BSI reserves the right to apply a charge equivalent to the full daily rate for cancellation of the visit by the organization within 30 days of an agreed visit date. It is a condition of registration that a deputy management representative be nominated. It is expected that the deputy would stand in should the management representative find themselves unavailable to attend an agreed visit within 30 days of its conduct.

Next visit plan

Date	Auditor	Time	Area/process	Clause
22/04/2024	Paul Gunn	09:00	Opening meeting	
		09:15	Interview with leadership	
		09:45	Strategic review	
		10:00	Organisational context, interested parties, risks and opportunities/quality policy, objective and management review/internal audit and corrective action/Risk and Opportunity/feedback and satisfaction	
		11:30	Production	
		12:30	Lunch	
		13:00	Sales	
		14:00	Purchasing & supplier evaluation, goods in & stores	
		15:00	Report preparation	
		16:00	Closing meeting	
			Remote immersive assessment	

Appendix: Your certification structure & ongoing assessment programme

Scope of certification

FM 21080 (ISO 9001:2015)
The design, manufacture, encapsulation and special processing of custom switches, sensors, small electronic and electrical assemblies.

Assessed location(s)

The audit has been performed at Permanent Locations, Temporary Sites.

Brightlingsea / FM 21080 (ISO 9001:2015)

Location reference	**0009141171-000**
Address	Comus Europe Limited 165-167 Tower Street Brightlingsea CO7 0AW United Kingdom
Visit type	Continuing assessment (surveillance)
Assessment number	3543085
Assessment dates	04/04/2023
Audit plan (revision date)	04/04/2023
Deviation from audit plan	Yes
Reason for deviation from audit plan	Due to the COVID 19 virus emergency and in line with the government advise to avoid all non-essential travel this assessment will be conducted as a remote immersive assessment.
Total number of Employees	22
Effective number of Employees	21
Scope of activities at the site	Main certificate scope applies.
Assessment duration	1 day(s)

Certification assessment programme

Certificate number - FM 21080
Location reference - 0009141171-000

		Audit1	Audit2	Audit3
Business area/location	**Date (mm/yy):**	04/22	04/23	04/24
	Duration (days):	1.0	1.0	1.0
Opening meeting		X	X	X
Interview with leadership		X	X	X
Strategic review				X
Organisational context, interested parties, risks and opportunities/quality policy, objective and management review/internal audit and corrective action/Risk and Opportunity/feedback and satisfaction		X	X	X
Documented information			X	
Lunch		X	X	X
Sales				X
Design & development		X		
Purchasing & supplier evaluation, goods in & stores				X
Production		X		X
Inspection, test & despatch		X	X	
Resources - competence, awareness, people, infrastructure, work environment, measuring equipment and organisational knowledge			X	
Report preparation		X	X	X
Closing meeting		X	X	X
Remote immersive assessment		X	X	
On-site assessment				X

Expected outcomes for accredited certification

What accredited management system certification means?

To achieve an organization's objectives related to the Expected Outcomes intended by the management systems standard, the accredited management system certification is expected to provide confidence that the organization has a management system that conforms to the applicable requirements of the specific ISO standard.

It is to be expected that the organization

• has a system which is appropriate for its organizational context and certification scope, a defined policy appropriate for the intent of the specific management system standard and to the nature, scale and impacts of its activities, products and services over their lifecycles, is addressing risks and opportunities associated with its context and objectives;
• analyses and understands customer needs and expectations, as well as the relevant statutory and regulatory requirements related to its products, processes and services;
• ensures that product, process and service characteristics have been specified in order to meet customer and applicable statutory/regulatory requirements;
• has determined and is managing the processes needed to achieve the Expected Outcomes intended by the management system standard;
• has ensured the availability of resources necessary to support the operation and monitoring of these products, processes and services;
• monitors and controls the defined product process and service characteristics;
• aims to prevent nonconformities, and has systematic improvement processes in place including the addressing of complaints from interested parties;
• has implemented an effective internal audit and management review process;
• is monitoring, measuring, analysing, evaluating and improving the effectiveness of its management system and has implemented processes for communicating internally, as well as responding to and communicating with interested external parties.

What accredited management systems certification does not mean?

It is important to recognize that management system standards define requirements for an organization's management system, and not the specific performance criteria that are to be achieved (such as product or service standards, environmental performance criteria etc).

Accredited management systems certification should provide confidence in the organization's ability to meet its objectives related to the intent of the management system standard. A management systems audit is not a full legal compliance audit and does not necessarily ensure ethical behaviour or that the organization will always achieve 100% conformity and legal compliance, though this should of course be a permanent goal.

Within its scope of certification, accredited management systems certification does not imply or ensure, for example:
• that the organization is providing a superior product and service, or
• that the organization's product and service itself is certified as meeting the requirements of an ISO (or any other) standard or specification.

Definitions of findings:

Nonconformity:

Non-fulfilment of a requirement.

Major nonconformity:

Nonconformity that affects the capability of the management system to achieve the intended results. Nonconformities could be classified as major in the following circumstances:

- If there is a significant doubt that effective process control is in place, or that products or services

will meet specified requirements;
- A number of minor nonconformities associated with the same requirement or issue could demonstrate a systemic failure and thus constitute a major nonconformity.

Minor nonconformity:
Nonconformity that does not affect the capability of the management system to achieve the intended results.

Opportunity for improvement:
It is a statement of fact made by an assessor during an assessment, and substantiated by objective evidence, referring to a weakness or potential deficiency in a management system which if not improved may lead to nonconformity in the future. We may provide generic information about industrial best practices, but no specific solution shall be provided as a part of an opportunity for improvement.

How to contact BSI

Visit the BSI Connect Portal, our web-based self-service tool to access all your BSI assessment and testing data at a time that's convenient to you. View future audit schedules, submit your corrective action plans and download your reports and Mark of Trust logos to promote your achievement. Plus, you can benchmark your performance using our dashboards to help with your continual improvement journey.

Should you wish to speak with BSI in relation to your certification, please contact your local BSI office – contact details available from the BSI website:
https://www.bsigroup.com/en-GB/UK-office-locations/

Notes

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This audit was conducted through document reviews, interviews, and observation of activities. The audit method used was based on sampling the organization's activities and it was aimed to evaluate the fulfilment of the audited requirements of the relevant management system standard or other normative document and confirm the conformity and effectiveness of the management system and its continued relevance and applicability for the scope of certification.

As this audit was based on a sample of the organization's activities, the findings reported do not imply to include all issues within the system.

Regulatory compliance

BSI conditions of contract for this visit require that BSI be informed of all relevant regulatory non-compliance or incidents that require notification to any regulatory authority. Acceptance of this report by the client signifies that all such issues have been disclosed as part of the assessment process and agreement that any such non-compliance or incidents occurring after this visit will be notified to the BSI client manager as soon as practical after the event.