



# Assessment Report.

## PSU Technology Group Limited

## Introduction.

This report has been compiled by Paul Randle and relates to the assessment activity detailed below:

Visit ref/Type/Date/Duration	Certificate/Standard	Site address
8141632 Re-certification Audit (SR Opt 1) 08/06/2015 1 day(s) No. Employees: 43	FS 28637 ISO 9001:2008	PSU Technology Group Limited Unit 1 Manchester Park Tewkesbury Road Cheltenham GL51 9EJ United Kingdom

The objective of the assessment was to ascertain the integrity of the organisation's management system over the current assessment cycle to enable re-certification and confirm the forward strategic assessment plan.

## Management Summary.

### Overall Conclusion

We are pleased to recommend the continuation of your certification. This recommendation shall be reviewed independently by BSI's Compliance & Risk team prior to the re-issue of your accreditation certificate.

The objectives of this assessment have been achieved.

Throughout the assessment visit, processes were seen to be controlled and well managed. The client has demonstrated a clear commitment to implement best practice based on ITIL / ISO 20000 requirements, make continuous improvements, and continue developing the business as they establish a firm presence in the hosted / managed services sector.

Well done to all involved.

I would like to thank all the audit participants for their assistance and co-operation which enabled the audit to run smoothly and to schedule.

Based on the objective evidence detailed within this report, the areas assessed during the course of the visit were found to be effective.

There were no outstanding nonconformities to review from previous assessments.

No new nonconformities were identified during the assessment. Enhanced detail relating to the overall assessment findings is contained within subsequent sections of the report.

## Mandatory Requirements – Re-Certification.

Has the Recertification Review Pack been reviewed prior to the assessment by the Client Manager ? Yes

Have all requirements of the standard been implemented? Yes

Has the entirety of scope / processes been assessed during the current review period? Yes

Has the certificate structure and location activities been reviewed? Yes

Based on the recertification process, the management system continues to demonstrate the ability to support the achievement of statutory, regulatory and contractual requirements.

Where applicable, has a Technical Expert(s) been used in the Certification cycle? detail the frequency.

### **Complaints Received by BSI**

There have been no complaints received by BSI during the certification period.

### **Strategic Review Pack Summary**

This review covers the period since the clients last strategic review visit back in May 2012 and was completed with reference to the latest version of the certification pack and excellerator report for certificate FS28637 which were both examined in detail by the Client Manager prior to the assessment visit.

Within the visit duration, a total of 6 visits were planned and delivered at Cheltenham; 2 at Camberley; and 1 at Lancaster; all as per the defined schedule.

During the visit durations, the quality management system processes were seen to be generally well managed with just 4 non conformities being raised over 9 visits in the review period. All were minor non conformities and associated with 4 different clauses / sub clauses within ISO 9001:2008 hence they do not highlight any inherent weakness within the clients management system.

Each non conformity was subsequently closed out at the following assessment visit and there was no evidence of repeat non conformities hence corrective actions were considered to be effective.

The client has consistently been receptive to observations or opportunities for improvements made during assessment visits and have given due consideration to these.

### **Progress in relation to management system objectives.**

The business offers a range of IT support and hardware services hence objectives and targets have consistently centred around SLA compliance, and server and circuit availability.

Progress is reported on a monthly basis as part of the clients monthly management review process where data relating to service desk activities, tickets opened and closed; outages and major incidents are reported. Data viewed at this assessment showed the client has consistently achieved high levels of SLA compliance and circuit / server availability in excess of 99% throughout the review period.

The monthly management review process demonstrates how where actions are required, these are agreed and followed up at subsequent review meetings.

### **Leadership, Commitment and Strategy**

During a top management discussion with the Technical Director, it was revealed that the creation of a Service Catalogue is central to the clients strategy where lines of service are defined in a precise manner so that customers expectations can be managed and the obligations of both parties are established therefore the management team can be certain that strategic decisions and commercial decisions can be based on fact whilst Sales & Marketing functions sell those defined services together with the KPI's that shall be monitored to ensure the organisation achieves its SLA objectives and targets as part of their business as usual processes.

Longer term goals of the organisation involve bringing managed and host services into the scope of registration. This is well documented within the clients Stakeholder Statement from June 2015 as is how these processes shall be integrated into the documented management system and be aligned with the requirements of ISO 20000 to represent the clients commitment to implement best practice.

### **Effectiveness of the Management System**

The client has long established manufacturing processes and a mature quality system that supports the business and its processes interact in an efficient manner such that the client has made good progress towards their objectives and targets, particularly in terms of SLA compliance and a high net promoter score.

Furthermore, a review of the clients excellerator report showed that with 4 minor non conformities being raised over a total of 9 visits at 3 different sites, this is much below the average 1.5 non conformities raised per audit day at organisations within the T-05 sector.

There are no known changes of either an internal or external nature that would affect the effectiveness of the clients quality management system processes beyond the clients plans to expand the scope of registration in 2016 to include hosted and managed services.

### **Impartiality Review**

A total of 2 different client managers have been involved with the 6 visits during this current certification cycle at the Cheltenham base and 2 client managers were also involved with the visits to Camberley and the client manager completing the visit at Lancaster had not been to that site previously hence impartiality and objectivity has been demonstrated.

The client has received 2 assessment days per year which have been delivered at 1 day per 6 months. At 43 employees within scope, this duration complies with scheme requirements.

The visit durations at the clients 2 remaining sites were discussed and found to be appropriate to the focussed activities completed at these sites.

The visit duration delivered has been 2 days per year at the Cheltenham site, 1 day per 18 months at the Camberley site, and 1 day per 36 months at the Lancaster site.

Do you want the current Total assessment days / Cycle to continue ?

Yes

### **Justified Exclusions**

Justified exclusions have been confirmed for certificate : FS 28637

details:

The client has referenced an exclusion against Clause 7.3 - Design & Development however the client does have a design process, re: F11, however this is associated with configuration of telecomms or IT systems to meet customer requirements.

The exclusion against Clause 7.3 is considered to be justified as the client always delivers to meet customer specified requirements.

## Areas Assessed & Findings.

### **QMS Changes & Updates :**

There have been no major changes to processes or procedures since the last assessment visit.

The client continues to work on a project to move all quality documentation to a SharePoint site however this project has suffered some set backs and when complete, document and record control processes shall be updated accordingly.

During a discussion concerning ISO 9001:2015, it was apparent that the client is well aware of its requirements and the time scales for implementation. The Technical Director displays leadership qualities in terms of likening the requirements of the new standard to the requirements of ISO 20000 for IT best practice and applies these methodologies when developing the business and its processes. Evidence of this was seen in relation to the June 2015 Stakeholder Statement where strategic methodologies of the business were defined and these were seen to mirror the requirements for understanding the context of the organisation and requirements of interested parties which appear within draft versions of ISO 9001:2015.

Progress on ISO 9001 transition shall be reviewed at future assessment visits.

Meanwhile, the clients documented quality management system remains at Version J.

### **QMS Administration :**

Monthly management review meetings were held as per the schedule in Q1 of 2015 however there has been some slippage of this plan in Q2 however a 'catch up' review is planned for 29th June 2015. Progress of this meeting shall be reviewed at the next assessment visit.

A review of meeting minutes for the January and February 2015 reviews showed the process contained all the necessary inputs and outputs required by Clause 5.6 including detailed information concerning SLA compliance, interaction with the supply chain and details concerning major incidents and outages.

Internal audits are planned annually and checks showed how the 2014 schedule was completed as per plan whilst the 2015 schedule has commenced and is up to date. Completed audit reports were sampled and evaluated;

- Design & Non Conforming Product Control Audit - September 2014
- Camberley Depot Audit - February 2015
- Lancaster Depot Audit - April 2015

The schedule was seen to encompass all sites detailed on the clients registration certificate, whilst audit reports were sufficiently detailed and contained links to objective evidence sampled during the audit activities. No non conformities were identified in the audit reports sampled.

Where customer complaints arise these are entered into the clients Telios System and customer complaints are at a very low level. Just two complaints have been raised in 2015 YTD. One concerned the company's T&C's whilst another was associated with a complaint with an on-site trainer re: Complaint 425

Records confirmed how the client had engaged with their customer and the trainer to resolve the issues which were essentially unfounded. However the client used the issue to provide an input to preventive action processes to better define the telephony training as part of their offering to avoid any future misunderstandings. The client was seen to make reference to ITIL library documentation when addressing these issues to demonstrate their commitment to best practice and continuous improvements.

The client despatches a customer satisfaction questionnaire (CSQ) after each service desk request. These ask customers to rate the

organisation and where any scores fall below a 6, these are investigated accordingly. A review of current data showed scores of 10 i.e. very satisfied were being achieved against a response rate of 19.5% and just two instances of low scores were noted and these were investigated and found to be outside the clients control. The process demonstrated that customer satisfaction was being achieved and the net promoter score for May 2015 was 81%.

**Depot Processes :**

The client operates a on-site depot which contains a stores area and a work shop area. It was reported that as the organisation moves away from traditional break - fix work, the depot encounters little use.

A review of the working environment and infrastructure in these areas showed they were generally clean, tidy, well organised and were appropriate for the completion of electronic repairs. All test systems were appropriately labelled, the area was ESD protected and ESD monitoring equipment, fluke meters, and the PAT tester were all calibrated and valid calibration certificates were retained on file.

A closer examination of calibration processes showed the clients calibration supplier issues expiration notices and this information is transferred into the clients own calibration tracker.

A small stores area is maintained at the Cheltenham base to support hardware repair processes however activity is low and at the time of the assessment no repairs were active.

Checks around the stores showed all products were positively identified and locations labelled. Actual stock records are maintained on the Telios System and checks were made on the following items;

- Location HD5A - S/N: 3FE04LEJ - Part No: B01864552
- Location C1 - S/N: CIT-500W-ATX-PSU - Part No: CIT-500U

Checks showed physical stock records and Telios records correlated.

Overall, the processes involved were seen to be effective.

**Service Desk Processes :**

An overview of Service Desk Processes which included the use of the Telios database, the call logging process, and the allocation of jobs to work queues were given by the ICT Support Technician and it was possible to follow audit trails for two support requests within the queue;

- Call 76834 - IT Fault - Symantec software blocking email from trusted site.

The request was for the engineer to un-block the email however the technician confirmed authorisation was required to do this as the potential risks the action presented to the customers systems. An interrogation of the Symantec software identified the file that had been blocked and that a worm file had been identified. The technical had offered advice to the client and the response was within SLA targets (4hr Response / No Fix)

- Call 76833 - Software Support - Setting up email groups

The call was for support in setting up an email group / exchange distribution group and records within Telios provided evidence of the clients interaction with their customer. The response was made with 1 hour which was significantly within the 4 hour, no fix SLA target and records of the actions taken were well defined.

Overall, the processes involved were seen to be effective.

During the course of the visit logos were found to be used incorrectly.

The client is aware of the latest BSI logo and is in possession of the appropriate logo however the old roundel logo was displayed on the company intranet. The client took action during the assessment to rectify this situation.

## Assessment Participants.

On behalf of the organisation:

Name	Position
Ian Radford	Purchasing Manager / QA Representative
Nigel Davies	Technical Director
Steve Causon	Service Delivery Manager
Julie Gunn	Business Support Manager
Andrew Hall	Purchasing & Facilities Manager
Ashley Day	ICT Support Technician (1st Line)

The assessment was conducted on behalf of BSI by:

Name	Position
Paul Randle	Team Leader

## Continuing Assessment.

The programme of continuing assessment is detailed below.

Site Address	Certificate Reference/Visit Cycle	
PSU Technology Group Limited Unit 1 Manchester Park Tewkesbury Road Cheltenham GL51 9EJ United Kingdom	FS 28637	
	Visit interval:	6 months
	Visit duration:	1 Days
	Next re-certification:	01/05/2018

Re-certification by Strategic Review will be conducted on completion of the cycle, or sooner as required. The review will focus on the strengths and weaknesses of your Management System.

# Certification Assessment Plan.

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		Visit1	Visit2	Visit3	Visit4	Visit5	Visit6
Business area/Location	Date (mm/yy):	11/15	05/16	11/16	05/17	11/17	05/18
	Duration (days):	1.0	1.0	1.0	1.0	1.0	1.0
Cheltenham Head Office:		X	X	X	X	X	X
Top Management				X			X
Management Review			X		X		X
Internal Audits		X	X	X	X	X	X
Complaints, Corrective & Preventive Action		X	X	X	X	X	X
Performance against Objectives		X	X	X	X	X	X
Customer Satisfaction			X		X		
Sales Process (Communication/Product Portfolio) Sales Offering		X		X		X	
Contracts Administration						X	
Purchasing Processes		X			X		
Service Desk Processes					X		
Site visit to maintenance, installation or managed service site			X			X	
Telecom's Installation						X	
Local Depot / Repair Shop / Stores			X		X		
Reassessment by Strategic Review							X

## Next Visit Plan.

### Visit objectives:

The objective of the assessment is to conduct a surveillance assessment and look for positive evidence to ensure the elements of the scope of certification and the requirements of the management standard are effectively addressed by the organisation's management system and that the system is demonstrating the ability to support the achievement of statutory, regulatory and contractual requirements and the organisations specified objectives, as applicable with regard to the scope of the management standard, and to confirm the on-going achievement and applicability of the forward strategic plan.

The scope of the assessment is the documented management system with relation to the requirements of ISO 9001:2008 and the defined assessment plan provided in terms of locations and areas of the system and organisation to be assessed.

Date	Assessor	Time	Area/Process	Clause
TBA	Paul Randle	09:00	Opening Meeting	
		09:15	QMS Changes & Updates inc Progress towards ISO 9001:2015 Transition	
			Management Review - progress of meeting planned for 29/6/15	
			Internal Audits	
			Complaints, Corrective & Preventive Action	
			Performance against Objectives & Targets	
		11:00	Purchasing Processes including; - Supplier Selection - Supplier Monitoring - Supplier Re-evaluation	
		12:00	Goods Inwards Processes	
		12:30	Lunch	
		13:00	Sales Process (Communication/Product Portfolio) Sales Offering	
		14:15	Follow up audit trails	
		14:45	Report Preparation	
		16:15	Closing Meeting	

Please note that BSI reserves the right to apply a charge equivalent to the full daily rate for cancellation of the visit by the organisation 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.

## Notes.

The assessment was based on sampling and therefore nonconformities may exist which have not been identified.

If you wish to distribute copies of this report external to your organisation, then all pages must be included.

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Customer Services  
BSI  
Kitemark Court,  
Davy Avenue, Knowlhill  
Milton Keynes  
MK5 8PP

Tel: +44 (0)845 080 9000 Fax +44 (0)1908 228123

Email: [MK.Customerservices@bsigroup.com](mailto:MK.Customerservices@bsigroup.com)

## 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.

## Expected Outcomes for Accredited Certification.

### **What accredited certification means:**

The accredited certification process provides confidence that the organization has a management system that conforms to the applicable requirements of the certified standards covered within this assessment and scope of certification.

### **What accredited certification does not mean:**

It is important to recognize that certification defines the requirements for an organization's management system, not for its products or services. It does not imply that the organization is providing a superior product or service, or that the product, service or performance itself is certified as meeting the requirements of an ISO standard or specification or that the organisation can guarantee 100% product, service or performance conformity, though this should of course be a permanent goal.