

Assessment Report

Fidelity Services Group (Pty) Ltd

Assessment dates	08/03/2021 to 09/03/2021 (Please refer to Appendix for details)
Assessment Location(s)	Pretoria (010), Hermanstad (015)
Report Author	Jean-Jacques Jaume
Assessment Standard(s)	ISO 9001:2015



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Executive Summary

The Management System is based the vision to be the pre-eminent provider of integrated services protecting the assets of their clients in Southern Africa and targeting of international markets, through the consistent achievement of excellence in every sphere of security provision and client service.

The company values are focused on their customer needs and continues innovations to ensure the needs of stakeholders are met. Loyalty and integrity is core to their customers and employees and is supported in all their actions

The company mission is to ensure that the client remains the focus and centre of their activities through superior service, which adds value but remains affordable. Operational excellence by investing in employing and developing quality personnel. Staying innovative in the application of technologies and solutions, to remain the market leaders who lead by example.

The management system has shortcomings in the following area as indicated in the non-conformance raised during this assessments:

- ISO 9001:2015 Clause 5.2.2 Communicating the Quality Policy

Root cause analysis should be effective in identifying the actual causes of non-conformances for the implementation of corrective actions to mitigate the reoccurrence of identified short comings. Evidence of actions taken should be retained for clearance of NC's.

Corrective Action Plan is to be submitted no later than 27 March 2021.

This report should be read in conjunction with reports for Assessments scheduled for 25 to 29 January 2021 and 15 to 19 February 2021.

Changes in the organization since last assessment

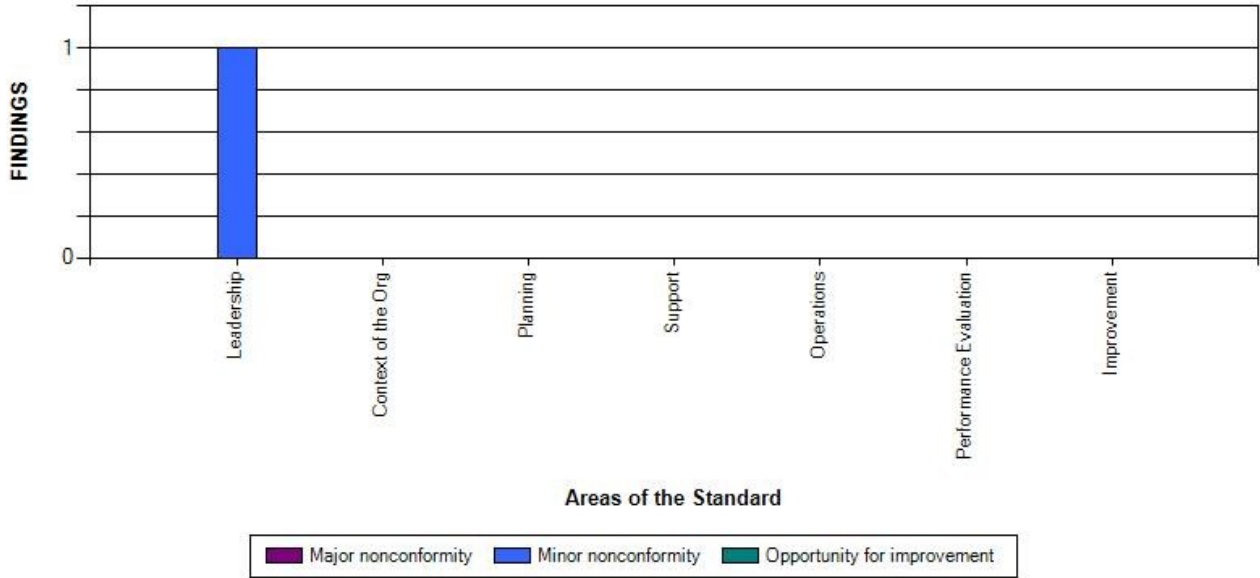
There is no significant change of the organization structure and key personnel involved in the audited management system.

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

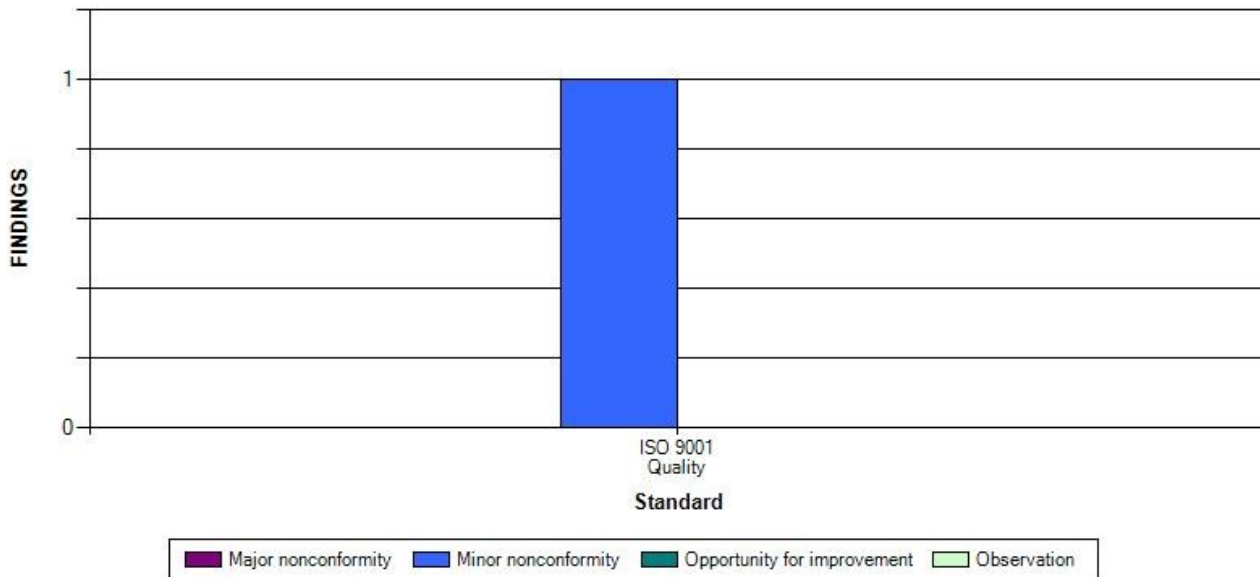
There was no change to the reference or normative documents which is related to the scope of certification.

NCR summary graphs

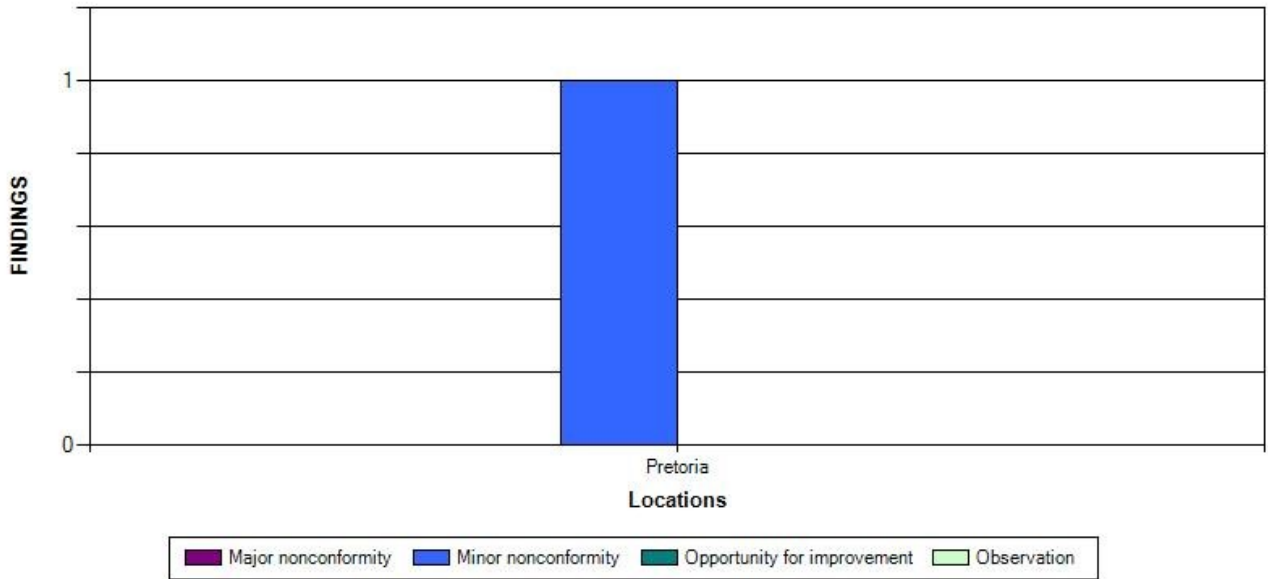
Areas of the standard(s) where BSI recorded findings



Which standard(s) BSI recorded findings against



Where BSI recorded findings



Your next steps

NCR close out process

There were no outstanding nonconformities to review from previous assessments.

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 in itself 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 re-assessment of the existing certification to ensure the elements of the proposed scope of registration and the requirements of the management standard are effectively addressed by the organisation's management system.

If this visit is part of a multi-location assessment, the final recommendation will be contingent on the findings from all assessments.

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 organisation to be assessed.

ISO 9001:2015
Fidelity Security Group management system documentation

Statutory and regulatory requirements

The purpose of this assessment is not to verify compliance to any compliance obligations but to verify whether the organization has an effective process to:

- a) determine and have access to the compliance obligations related to its activities products and services;
- b) determine how these compliance obligations apply to the organization and its activities products and services;
- c) take these compliance obligations into account when establishing, implementing, maintaining and continually improving its quality management system.

It was found that the organization has a formal management system in place to identify applicable legal requirements, interpret and implement these and to verify compliance thereto.

The following documented information was available:

- HOGEO8 Legal Rev 1 dated 01 February 2018 (General Activities, Risk Management)
- HOGEO1 Document Control/Quality Records Rev 2 dated 01 November 2020 (Compliance to Statuary and Regulatory Requirements)

Assessment Participants

Name	Position	Opening Meeting	Closing Meeting	Interviewed (processes)
Willie Lindeque	Group Quality Assurance Manager	X	X	X
Frank Moxham	Quality Assurance Manager	X	X	X
Danie Erasmus	Branch Manager Estates/Malls	X	X	X
Cecil de Swardt	Regional Manager Pretoria	X	X	X
Frik Pretorius	Site Manager			X
Johannes Rikhotso	Control Room Manager			X

Assessment conclusion

BSI assessment team

Name	Position
Jean-Jacques Jaume	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 - Corrective Action Plan Required ('Minor' findings only): The audited organization may be recommended for continued certification, based upon the acceptance of a satisfactory corrective action plan for all 'Minor' findings as shown in this report. Effective implementation of corrective actions will be reviewed during the next surveillance audit.

Please submit a plan to BSI detailing the nonconformity, the root cause, correction and your proposed corrective action, with responsibilities and timescales allocated. The plan is to be submitted no later than 27/03/2021. If the corrective action plan is not received by this date you may be putting your certification status at risk. Send the plan through the BSI Assurance Portal (if this is enabled for your account) or by email to bsi.za@bsigroup.com, referencing the report number 3333926, 3333933.

Use of certification documents, mark / logo or report

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

Findings from this assessment

Fidelity Cash Solutions North West & Mpumalanga:

Context of the Organization

The following documented information was available:

- FSGHOES Executive Summary 4 dated 01 March 2019 (Organisation and its Context, Need and Expectations, Scope, Quality Management System)
- FSGHOGP Group Profile Rev 2 dated 01 March 2019

Leadership

The following documented information was available:

- FSGHOES Executive Summary Ver 4 dated 01 March 2019 (Leadership, Customer Focus and Satisfaction)
- HOGEO4 Management Rev 2 dated 01 February 2018 (Roles and Responsibilities, Limits of Authority, Strategic Development, Analysis of Data, Management Reviews, Internal Auditing, Preventive Action)
- FSGHOFCSQP Quality Policy and Objectives Rev 7 dated 02 March 2020
- FSGHOFCSCON Annexure B3 Fidelity Cash Solutions Functional Organogram Rev 3 dated 02 March 2020
- Hermanstad Branch Organogram dated 31 January 2021

Objectives

The following documented information was available:

- Gauteng North Strategic and Quality Objectives 2019-2022

Documented Information

The following documented information was available:

- HOGEO1 Document Control/Quality Records Rev 2 dated 01 November 2020
- HOGEO1A Document Amendment Memorandum Rev 1 dated 01 February 2018
- HOGEO1B Document Issue Memorandum Rev 1 dated 01 February 2018
- HOGEO1C Distribution List Rev 1 dated 01 February 2018

Resources, Competence, Awareness and Communication

The following documented information was available:

- FSGHOES Executive Summary Ver 4 dated 01 March 2019 (Communication)
- FSSPR03 Recruitment, Selection, Skills Development, Training and Induction Ver 1 dated 01 February 2018
- FSGHOFCSCON Annexure B3 Fidelity Cash Solutions Functional Organogram Rev 3 dated 02 March 2020
- Hermanstad Branch Organogram dated 31 January 2021

Internal Audit

The following documented information was available

- HOGEO2 Internal Auditing Rev 5 dated 01 November 2020
- Hermanstad (854) Review Internal Audit Report Assets in Transit periods 22 to 24th July and 19 to 21st August 2020 dated 21 August 2020
- HOGEO2B Internal Audit Plan Checklist - AIT Hermanstad (854) periods 22 to 24th July 2020 (by Quality Assurance Manager)
- HOGEO2B Internal Audit Plan Checklist - AIT Hermanstad (854) periods 20 to 22 January 2021 (by Branch Manager)
- HOGEO3A Quality Report for NC's raised during Internal Audit
- HOGEO3B Quality Report Register

Management Review

The following documented information was available:

- HOGEO4 Management Rev 2 dated 01 February 2018 (Analysis of Data, Management Reviews, Internal Auditing, Preventive Action)
- Minutes of Weekly Risk Meetings dated 27 November 2020, 15 and 22 January 2021
- MOS Feedback Review Hermanstad dated 09 February 2021

Continual Improvement

The following documented information was available:

- FSGHOES Executive Summary Ver 4 dated 01 March 2019 (Continual Improvement)
- HOGEO4 Management Rev 2 dated 01 February 2018 (Analysis of Data, Management Reviews, Internal Auditing, Preventive Action)
- HOGEO3A Quality Report for NC's raised during Internal Audit
- HOGEO3B Quality Report Register

Performance Evaluation processes well implemented, maintained and monitored to ensure intended outcomes are achieved.

Control Room and Access Control

The following documented information was available:

- FCSPR04 Control Room Rev 2 dated 01 June 2018 (Rev 3 under review)
- FCSPR04C Daily Log Sheets Rev 2 dated 04 October 2018
- FCSPR04D Missed Client Register Rev 2 dated 04 October 2018
- FCSPR04F One-Time Code Register Rev 2 dated 04 October 2018
- FCSPR05.1.1 Dispatching to a Schedule Rev 1 dated 10 January 2020
- FCSPR07 Operations Rev 4 dated 04 October 2019 (Rev 5 under review)
- FCSPR07A Vehicle Security Checklist Rev 2 dated 01 June 2018
- FCSPR07B Vehicle Exit Permit
- FCSPR07C Duty Roster Rev 1 dated 04 October 2019
- FCSPR08 Risk Management Rev 4 dated 05 June 2020
- FCSPR08B Management Daily Checklists Rev 2 dated 01 November 2018
- FCSPR08C Management Weekly Checklists Rev 2 dated 01 November 2018
- FCSPR08.7 Branch Access Control Rev 5 dated 05 June 2020
- FCSPR08.7A Request for Access Rev 4 dated 05 June 2020

The following Request for Access documented information was scrutinised and found to be in order:

- FCSPR08.7A Request for Access dated 05 February 2021 (MANCO)
- FCSPR08.7A Request for Access dated 05 February 2021 (Aircon repairs)
- Insacom System Visit Verification (Vehicles & Pedestrians)
- FCSPR04F One-Time Code Register dated 24 August, 05, 26 November 2020

The following Duty Rosters documented information was scrutinised and found to be in order:

- Duty Roster dated 04 February 2021 (Schedule, Vehicle Registration, Driver, Crew, 3rd Man, On Duty Time)
- Vehicle Schedules and Log Sheets
- FCSPR04D Missed Client Register dated 02, 03 February 2021

The following Vehicle Control documented information was scrutinised:

- FCSPR08B Manager/Senior FCS Supervisor Daily Checklist for periods 23 November 2020 and 04 to 31 January 2021
- FCSPR07A Vehicle Security Checklist for Fleet No 41640 dated 03 February 2021 [Fire Extinguishers and two Safes not Serviceable]
- FCSPR07B Vehicle Exit Permit for Fleet No 41640 dated 03 February 2021
- FCSPR07A Vehicle Security Checklist for Fleet No 40750 dated 03 February 2021 [Fire Extinguishers not Serviceable]
- FCSPR07B Vehicle Exit Permit for Fleet No 40750 dated 03 February 2021
- FCSPR07A Vehicle Security Checklist for Fleet No 45914 dated 03 February 2021 [Fire Extinguishers not Serviceable]
- FCSPR07B Vehicle Exit Permit for Fleet No 45914 dated 03 February 2021
- FCSPR07A Vehicle Security Checklist for Fleet No 44629 dated 03 February 2021 [Fire Extinguishers not Serviceable]
- FCSPR07B Vehicle Exit Permit No 367887 for Fleet No 44629 dated 03 February 2021
- FCSPR07A Vehicle Security Checklist for Fleet No 44265 dated 03 February 2021 [Fire Extinguishers not Serviceable]

Vault and Box Room

The following documented information was available:

- FCSPR05 Vault and Box Room Rev 4 dated 10 January 2020 (Rev 5 under review)
- FCSPR05.1.1 Dispatching to a Schedule Rev 1 dated 10 January 2020
- FCSPR05.1.10 Printing Transtrack Barcoded Rev 1 dated 10 January 2020
- FCSPR05.1.2 Receiving from a Schedule Rev 1 dated 10 January 2020
- FCSPR05.3 Bulk Receipt Book Rev 2 dated 01 June 2018
- FCSPR05.4 Manual Receipt Book Working Instruction Rev 2 dated 01 June 2018
- FCSPR07.2 Identity Cards Rev 3 dated 05 June 2020
- FCSPR07.2B ID Card Register Rev 3 dated 04 October 2018
- FCSPR08.2 Vehicle Security Rev 2 dated 01 June 2018
- FCSPR08.2A Vehicle Security Key Register Rev 3 dated 04 October 2018
- FCSPR08.3 Client Key Control Rev 2 dated 01 June 2018
- FCSPR08.3B Client Duplicate Key Register Rev 2 dated 01 June 2018

The following Vault and Boxroom documented information was scrutinised and found to be in order:

- FCSPR08.3B Client Duplicate Key Register for Client Code/ATM ID 35/481 dated 02 June 2019
- FCSPR08.3B Client Duplicate Key Register for Client Code/ATM ID 35/33499 dated 02 June 2019
- FCSPR08.3B Client Duplicate Key Register for Client Code/ATM ID 8149 dated 27 January 2020
- FCSPR08.3B Client Duplicate Key Register for Client Code/ATM ID 35/642 dated 21 January 2021
- FCSPR07.2B ID Card Register dated 06 January 2021
- FCSPR08.2A Vehicle Security Key Register dated 01, 02, 03 February 2021

Vault and Boxroom processes well implemented, maintained and monitored to ensure intended outcomes are achieved.

Cash Processing Centre

The following documented information was available:

- FCSPR06 Cash Processing Centre Rev 3 dated 04 October 2019
- FCSPR06.1 Cameos Cash Processing Work Instruction Rev 2 dated 01 November 2018
- FCSPR06.5 Manual Banking Work Instruction Rev 2 dated 01 November 2018
- FCSPR06.7 ATM Management Rev 2 dated 01 November 2018
- FCSPR06A Calibration Register Rev 2 dated 01 November 2018
- FCSPR06L Daily Refuse Register Rev 1 dated 01 November 2018
- FCSPR06G Teller Sheets Rev 1 dated 01 November 2018
- FCSPR06M Refuse Removal Register Rev 1 dated 01 November 2018
- FCSPR07.4 ATM Solutions Key Marshall Work Instruction Rev 2 dated 01 November 2018
- FCSPR07.5 ATM Solutions Custodian Work Instruction Rev 1 dated 01 November 2018
- FCSPR08.1 Branch Security Rev 2 dated 01 June 2018
- FCSPR08.1E CCTV Checklist Rev 3 dated 04 October 2018
- SARB Minimum Standard Version 2 dated 21 July 2015
- Cash Processing I-Cash User Manual Rev 1 dated January 2021
- Cash Processing I-Cash Client Pre-Announcement Administrator Manual Rev 1 dated January 2021
- Cash Processing I-Cash Client Pre-Announcement User Manual Single Deposits Rev 1 dated January 2021
- Cash Processing I-Cash Client Pre-Announcement User Manual Multi Deposit Rev 1 dated January 2021
- Cash Processing I-Cash Client Pre-Announcement User Manual Multi Account Rev 1 dated January 2021

The following Cash Processing Centre documented information was scrutinised and found to be in order:

- FCSPR06L Daily Refuse Register dated 29 January 2021
- SARB Daily Test Sheet dated 27 January 2021
- SARB Daily Test Sheet dated 01 February 2021
- FCSPR08.1E CCTV Checklist dated 28 January 2021
- FCSPR06G Teller Sheets dated 17 January 2021
- Occurrence Book No 40234579 Entries of Shortages and Surpluses period 09 November 2020 to 11 January 2021

Cash Processing Centre processes well implemented, maintained and monitored to ensure intended outcomes are achieved.

Fidelity Security Services Free State/Northern Cape/Mpumalanga:

Context of the Organization

The following documented information was available:

- FSGHOCOV Fidelity Security Group Quality Policy Manual for Guarding Rev 2 dated 01 March 2019
- FSGHOGP Group Profile Rev 2 dated 01 March 2019
- FSGHOES Executive Summary Ver 4 dated 01 March 2019 (Organisation and its Context, Need and Expectations, Scope, Quality Management System)
- FSGHOCON Annexure A Quality Policy Manual Process Description Rev 2 dated 01 March 2019

Leadership

The following documented information was available:

- FSGHOES Executive Summary Ver 4 dated 01 March 2019 (Leadership, Customer Focus and Satisfaction)
- FSGHOQP Quality Policy and Objectives Rev 4 dated 01 March 2019
- HOGEO4 Management Rev 2 dated 01 February 2018 (Roles and Responsibilities, Limits of Authority, Strategic Development, Analysis of Data, Management Reviews, Internal Auditing, Preventive Action)
- HOGEO4.1 Limits of Authority and Governance Directive Security Services Rev 5 dated 01 October 2018
- FSGHOCON Annexure B12 Northern Cape Free state and Mpumalanga Region Functional Organogram Rev 3 dated 01 March 2019

Objectives

The following documented information was available:

- Northern Cape Free state and Mpumalanga Region Financial Objectives 2019-2022

Documented Information

The following documented information was available:

- HOGEO1 Document Control/Quality Records Rev 2 dated 01 November 2020
- HOGEO1A Document Amendment Memorandum Rev 1 dated 01 February 2018
- HOGEO1B Document Issue Memorandum Rev 1 dated 01 February 2018
- HOGEO1C Distribution List Rev 1 dated 01 February 2018

Customer Satisfaction and Performance Evaluation

The following documented information was available:

- FSGHOES Executive Summary Ver 4 dated 01 March 2019 (Customer Focus and Satisfaction)
- SECPR06 Client Visits, Site Inspections, Duty Manager, Reaction Officers and Business at Risk Rev 1 dated 01 February 2018

Internal Audit

The following documented information was available:

- HOGEO2 Internal Auditing Rev 5 dated 01 November 2020
- FSS Pretoria Estates (998) Quality Audit Review Report dated 19 February 2021
- HOGEO3A Quality Reports issued for incidents that occurred February 2021
- HOGEO3B Quality Report Register dated February 2021
- HOGEO2A Monthly Return of Compliance by Branch Manager Rev 2 dated 01 November 2020
- HOGEO4 Management Rev 2 dated 01 February 2018 (Analysis of Data, Management Reviews, Internal Auditing, Preventive Action)
- HOGEO2A Quarterly Return of Compliance by Branch Manager for January 2021

Management Review

The following documented information was available:

- HOGEO4 Management Rev 2 dated 01 February 2018 (Analysis of Data, Management Reviews, Internal Auditing, Preventive Action)
- Minutes of Manco Meeting dated 21 January 2021
- Minutes of Service Level Meeting dated 25 November 2020

Armoury

The following documented information was available:

- HOGEO10 Firearm and Ammunition Control Work Instruction Rev 2 dated 01 November 2020
- HOGEO10A Firearm Stock Register Rev 2 dated 01 November 2020
- HOGEO10B Firearm Register Rev 2 dated 01 November 2020
- HOGEO10C Ammunition Stock Register Ammunition Stock Register Rev 2 dated 01 November 2020
- HOGEO10D Report On All Firearm / Ammunition Related Incidents Rev 3 dated 01 November 2020
- HOGEO10E Firearm Discharge Register Rev 2 dated 01 November 2020
- HOGEO10F Firearm Repair Register Rev 2 dated 01 November 2020
- HOGEO10G Firearm Trauma Counselling Register Rev 2 dated 01 November 2020
- HOGEO10H Request for RF Tag Change Request for RF Tag Change Rev 2 dated 01 November 2020
- HOGEO10I Firearm Scanning Rev 2 dated 01 November 2020
- HOGEO10J Confirmation of Delivery/Collection of Firearms Rev 2 dated 01 November 2020
- HOGEO10K Firearm Movement Report Rev 2 dated 01 November 2020
- HOGEO10L Declaration for Trauma Counselling Rev 1 dated 01 November 2020

FSSPR10.2B Firearm Register was scrutinised on FAMS System and found to be in order.

Employee No 1296519 was scrutinised on FAMS System and found to be in order.

Woodlands Boulevard Estate Site file was scrutinised and the following documented information was available:

- Copy of Tax Invoice No 96780752 dated 01 January 2021
- FSSPR04.1 Site Instructions dated 03 March 2021
- Site Instruction Acknowledgement dated 05 March 2021
- FSSPR10A Site Equipment Register
- Security Risk Assessment [Not Controlled]
- Monthly Incident and Equipment Checklist for November 2020 to February 2021
- Letter Self Posting dated 01 March 2021
- FSSPR06F Incident Reports for Incidents logged.
- Incident reports for Incidents Logged
- FSSPR06E Day/Night Evaluation Forms January/February 2021
- FSSPR06A Security Report for period November 2020 to February 2021
- PSiRA Certificates
- Copies of ID's
- Duty Roster 19 February to 18 March 2021
- Site Specific Job Instructions

Operational processes well implemented, maintained and monitored to ensure intended outcomes are achieved.

One (1) Minor nonconformities arising from this assessment.

Finding Reference	2030397-202103-N1	Certificate Reference	FS 681530
Certificate Standard	ISO 9001:2015	Clause	5.2.2
Category	Minor		
Area/Process:	Fidelity Security Services Free State/Northern Cape/Mpumalanga		
Statement of non-conformance:	Quality Policy not communicated or available to relevant interested parties as required by the Standard.		
Clause requirements	<p>Communicating the quality policy</p> <p>The quality policy shall:</p> <ul style="list-style-type: none"> a) be available and be maintained as documented information; b) be communicated, understood and applied within the organization; c) be available to relevant interested parties, as appropriate. 		
Objective Evidence	No proof that Quality Policy was communicated within the region. Quality Policy not available/displayed in communal areas.		
Cause			
Correction/containment			
Corrective action			

Next visit objectives, scope and criteria

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 9001:2015 and the defined assessment plan provided in terms of locations and areas of the system and organisation to be assessed.

ISO 9001:2015
Fidelity Security Group 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
21/02/2022	Assessor 1	08:30	Opening Meeting	
21/02/2022		09:00	FSG Helderkrui Management System (Context of the Organization, Leadership, Policy, Organizational Roles, Responsibilities and authorities, Risks and Opportunities, Quality Objectives, Change Management, Competence, Awareness and Communication, Documented Information, Customer satisfaction, Analysis and Evaluation, Internal Audit, Management Review, Nonconformity and Corrective Action, Continual Improvement)	4, 5, 6, 7, 8, 9, 10
21/02/2022		13:00	Lunch	
21/02/2022		13:30	FSG Helderkrui Human Resources	4, 5, 6, 7, 8, 9, 10
22/02/2022		08:30	FSG Helderkrui NCC Control Room	4, 5, 6, 7, 8, 9, 10
22/02/2022		10:00	FSG Helderkrui Legal	4, 5, 6, 7, 8, 9, 10
22/02/2022		11:30	FSG Helderkrui Risk	4, 5, 6, 7, 8, 9, 10
		13:00	Lunch	
22/02/2022		13:30	FSG Helderkrui Procurement Asset & Management	4, 5, 6, 7, 8, 9, 10
23/02/2022		08:30	FCS Midrand Management System (Context of the Organization, Leadership, Policy, Organizational Roles, Responsibilities and authorities, Risks and Opportunities, Quality Objectives, Change Management, Competence, Awareness and Communication, Documented Information, Customer satisfaction, Analysis and Evaluation, Internal Audit, Management Review, Nonconformity and Corrective Action, Continual Improvement)	4, 5, 6, 7, 8, 9, 10
		13:00	Lunch	
23/02/2022		13:30	FCS Midrand HR and Recruitment	4, 5, 6, 7, 8, 9, 10
24/02/2022		08:30	FCS Midrand Investigations and Claims	4, 5, 6, 7, 8, 9, 10
24/02/2022		10:00	FCS Midrand ATM Management and Reconciliations	4, 5, 6, 7, 8, 9, 10
		13:00	Lunch	
24/02/2022		13:30	FCS Midrand Billing and Creditors	4, 5, 6, 7, 8, 9, 10
25/02/2022		08:30	Site 11: FSS Mpumalanga/Northern Province Region, Robertville (Management System & Operations)	4, 5, 6, 7, 8, 9, 10

Date	Auditor	Time	Area/Process	Clause
28/02/2022		08:30	Site 6: FCS KZN Coastal and Inland Region, New Germany (Management System and Operations)	4, 5, 6, 7, 8, 9, 10
01/03/2022		08:30	Site 8: FSS KwaZulu Natal Region, Durban (Management System and Operations)	4, 5, 6, 7, 8, 9, 10
03/03/2022		08:30	Site 5: FSS Western Cape Region, Cape Town (Management System & Operations)	4, 5, 6, 7, 8, 9, 10
02/03/2022		08:30	Site 13: FSS Secureco Metsu, Durban (Management System and Operations)	4, 5, 6, 7, 8, 9, 10
04/03/2022		08:30	Site 7: FCS Western & Northern Cape Region, Parow, Cape Town (Management System & Operations)	4, 5, 6, 7, 8, 9, 10
07/03/2022		08:30	Site 5: FCS Free State, Northern Cape, and North West Region, Bloemfontein (Management System and Operations)	4, 5, 6, 7, 8, 9, 10
08/03/2022		08:30	Site 4: FCS Limpopo Region, Polokwane (Management System and Operations)	4, 5, 6, 7, 8, 9, 10

Appendix: Your certification structure & ongoing assessment programme

Scope of Certification

FS 681530 (ISO 9001:2015)

The Provision of Services for the Guarding of Assets and Property as well as Cash Management Services and End to End Cash Handling Solutions

Assessed location(s)

The audit has been performed at Permanent Locations.

Pretoria / FS 681530 (ISO 9001:2015)

Location reference	0047653747-010
Address	Fidelity Security Group (Pty) Ltd Fidelity Security Services Free State/Northern Cape/Mpumalanga 358 Asetileen Road Silvertondale Pretoria South Africa
Visit type	Re-certification Audit (RA Opt 2)
Assessment reference	3333926
Assessment dates	09/03/2021
Deviation from Audit Plan	No
Total number of Employees	70
Effective number of Employees	24
Scope of activities at the site	The provision of services for the guarding of assets and property
Assessment duration	1 day(s)

Hermanstad / FS 681530 (ISO 9001:2015)

Location reference	0047653747-015
Address	Fidelity Cash Solutions (Pty) Ltd North West & Mpumalanga 478 Van Riebeeck Street Hermanstad South Africa
Visit type	Re-certification Audit (RA Opt 2)
Assessment reference	3333933
Assessment dates	08/03/2021
Deviation from Audit Plan	No
Total number of Employees	40
Effective number of Employees	14
Scope of activities at the site	Provision of cash management services and end to end cash handling solutions
Assessment duration	1 day(s)

Certification assessment program

Certificate Number - FS 681530

Location reference - 0047653747-000

		Audit1	Audit2	Audit3
Business area/Location	Date (mm/yy):	02/21	02/22	02/23
	Duration (days):	12	13,5	12
Opening Meeting		X	X	X
Management Interview		X		
FSG Helderkrui Management System (Context of the Organization, Leadership, Policy, Organizational Roles, Responsibilities and authorities, Risks and Opportunities, Quality Objectives, Change Management, Competence, Awareness and Communication, Documented Information, Customer satisfaction, Analysis and Evaluation, Internal Audit, Management Review, Nonconformity and Corrective Action, Continual Improvement)		X	X	X
FSG Helderkrui Sales & Marketing		X		X
FSG Helderkrui Finance & Credit Control		X		X
FSG Helderkrui Human Resources			X	
FSG Helderkrui NCC Control Room			X	
FSG Helderkrui Legal			X	
FSG Helderkrui Tenders				X
FSG Helderkrui IT Support				X
FSG Helderkrui Risk			X	X
FSG Helderkrui Procurement Asset & Management			X	
FCS Midrand Management System (Context of the Organization, Leadership, Policy, Organizational Roles, Responsibilities and authorities, Risks and Opportunities, Quality Objectives, Change Management, Competence, Awareness and Communication, Documented Information, Customer satisfaction, Analysis and Evaluation, Internal Audit, Management Review, Nonconformity and Corrective Action, Continual Improvement)		X	X	X
FCS Midrand HR and Recruitment			X	
FCS Midrand Transport		X		X
FCS Midrand Investigations and Claims		X	X	X
FCS Midrand ATM Management and Reconciliations		X	X	X
FCS Midrand New Business Development		X		X
FCS Midrand Billing and Creditors			X	

		Audit1	Audit2	Audit3
Business area/Location	Date (mm/yy):	02/21	02/22	02/23
	Duration (days):	12	13,5	12
Site 11: FSS Mpumalanga/Northern Province Region, Robertville (Management System and Operations)			X	
Site 6: FCS KZN Coastal and Inland Region, New Germany (Management System and Operations)			X	
Site 8: FSS KwaZulu Natal Region, Durban (Management System and Operations)			X	
Site 13: FSS Secureco Metsu, Durban (Management System and Operations)		X	X	
Site 5: FSS Western Cape Region, Cape Town (Management System & Operations)			X	
Site 7: FCS Western & Northern Cape Region, Parow, Cape Town (Management System & Operations)			X	
Site 4: FCS Limpopo Region, Polokwane (Management System and Operations)			X	
Site 5: FCS Free State, Northern Cape, and North West Region, Bloemfontein (Management System and Operations)			X	
Site 6: FSS Eastern Cape Region, Port Elizabeth (Management System and Operations)				X
Site 2: FCS Gauteng/Free State Region Germiston (Management System and Operations)		X		X
Site 3: FCS Gauteng North/North West and Mpumalanga Region, Hermanstad (Management System and Operations)		X		X
Site 8: FCS Eastern Cape Region, Port Elizabeth (Management System and Operations)		X		X
Site 1: Payroll Eastern Cape, Roodepoort (Management System)		X		
Site 2: Secureco Roodepoort (Management System)		X		
Site 3: CSG Guarding Roodepoort (Management System)		X		
Site 4: FSS Gauteng Region, Robertville (Management System and Operations)		X		X
Site 7: FSS Free State/Northern Cape Region, Silvertondale (Management System and Operations)		X		X
Site 12: FSS Eyethu, Kimberly (Management System and Operations)		X		
Site 14: Fidelity Services Group Swaziland, Mbabane (Management System and Operations)		X		X

Certification assessment program

Certificate Number - FS 681530

Location reference - 0047653747-010

		Audit1
Business area/Location	Date (mm/yy):	
	Duration (days):	
Part of Sampling Plan		

Certificate Number - FS 681530

Location reference - 0047653747-015

		Audit1
Business area/Location	Date (mm/yy):	
	Duration (days):	
Part of Sampling Plan		

Justified exclusions / non applicable clauses

Exclusions of the standard are not permitted for certificate: FS 681530

Mandatory requirements – re-certification.

Review of assessment finding regarding conformity, effectiveness and relevance of the management system:

The management system has shortcomings in the following areas as indicated in the non-conformances raised during this and previous assessments:

- ISO 9001:2015 Clause 5.2.2 Communicating the Quality Policy (April 2018)
- ISO 9001:2015 Clause 6.2 Quality objectives and planning to achieve them (April 2018, February 2020)
- ISO 9001:2015 Clause 7.5.2 Creating and Updating Documented Information (April 2018)
- ISO 9001:2015 Clause 7.5.3 Control of documented information (April 2018, February 2020)
- ISO 9001:2015 Clause 8.1 Operational Planning and Control (April 2018)
- ISO 9001:2015 Clause 8.5.1 Control of Production and Service Provision (April 2019, February 2020)
- ISO 9001:2015 Clause 9.2 Internal Audits (April 2018)
- ISO 9001:2015 Clause 10.2 Nonconformity and Corrective Action (April 2018, April 2019)

Management system strategy and objectives:

The following documented information was available:

- FSGHOQP Quality Policy and Objectives Rev 4 dated 01 March 2019
- Eastern Cape AIT Strategic Objectives 2020/2021
- FSGHOFCSQP Quality Policy and Objectives Rev 7 dated 02 March 2020
- Fidelity Cash Solutions Strategic and Quality Objectives - 2019/2020/2021/2022

Review of progress in relation to the organisation's objectives:

The following documented information was available:

- FSGHOQP Quality Policy and Objectives Rev 4 dated 01 March 2019
- Eastern Cape AIT Strategic Objectives 2020/2021
- FSGHOFCSQP Quality Policy and Objectives Rev 7 dated 02 March 2020
- Fidelity Cash Solutions Strategic and Quality Objectives - 2019/2020/2021/2022

Review of assessment progress and the re-certification plan:

The following Areas were assessed:

- Fidelity Services Group Management System (4, 5, 6, 7, 8, 9, 10)
- Interview with General Manager (4, 5, 6, 7, 8, 9, 10)
- Fidelity Services Group - Fidelity Security Services Management System (4, 5, 6, 7, 8, 9, 10)
- Fidelity Services Group - Fidelity Security Services Operations (4, 5, 6, 7, 8, 9, 10)
- Fidelity Services Group - Fidelity Cash Solutions Operations (4, 5, 6, 7, 8, 9, 10)
- Fidelity Services Group - Fidelity Cash Solutions Management System (4, 5, 6, 7, 8, 9, 10)

BSI Client Management Impartiality and Surveillance Strategy:

All P and T codes appropriate, and included in assessment team

Continue with the current Total assessment days / Cycle.

Expected outcomes for accredited certification

What accredited certification to ISO 9001 means

ISO 9001:2015 specifies requirements for a quality management system when an organization: needs to demonstrate its ability to consistently provide products and services that meet customer and applicable statutory and regulatory requirements; and aims to enhance customer satisfaction through the effective application of the system, including processes for improvement of the system and the assurance of conformity to customer and applicable statutory and regulatory requirements.

What accredited certification to ISO 9001 does not mean

1) It is important to recognize that ISO 9001 defines the requirements for an organization's quality management system, not for its products and services. Accredited certification to ISO 9001 should provide confidence in the organization's ability to "consistently provide product that meets customer and applicable statutory and regulatory requirements". It does not necessarily ensure that the organization will always achieve 100% product conformity, though this should of course be a permanent goal.

2) ISO 9001 accredited certification does not imply that the organization is providing a superior Product or service, or that the product or 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

'Just for Customers' is the website that we are pleased to offer our clients following successful registration, designed to support you in maximising the benefits of your BSI registration - please go to www.bsigroup.com/j4c to register. When registering for the first time you will need your client reference number and your certificate number (47653747/FS 681530).

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-ZA/Contact-us/>

Notes

This report and related documents are prepared for and only for BSI's client and for no other purpose. As such, BSI does not accept or assume any responsibility (legal or otherwise) or accept any liability for or in connection with any other purpose for which the Report may be used, or to any other person to whom the Report is shown or in to whose hands it may come, and no other persons shall be entitled to rely on the Report. If you wish to distribute copies of this report external to your organisation, then all pages must be included.

BSI, its staff and agents shall keep confidential all information relating to your organisation and shall not disclose any such information to any third party, except that in the public domain or required by law or relevant accreditation bodies. BSI staff, agents and accreditation bodies have signed individual confidentiality undertakings and will only receive confidential information on a 'need to know' basis.

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.