



NSF International Strategic Registrations Audit Report

Indorama Ventures Mobility Scottsboro

300 Serrano Way
Scottsboro, 35769

C0098395

Audit Type

Re-certification Audit

Lead Auditor

Jim King

Team Auditors

Neal Cormany

Standard

ISO 14001:2015

(Exp Date: 20-OCT-2026)

ISO 45001:2018

(Exp Date: 19-OCT-2023)

Audit Date(s) :

08/21/2023 - 08/25/2023

Recommendation

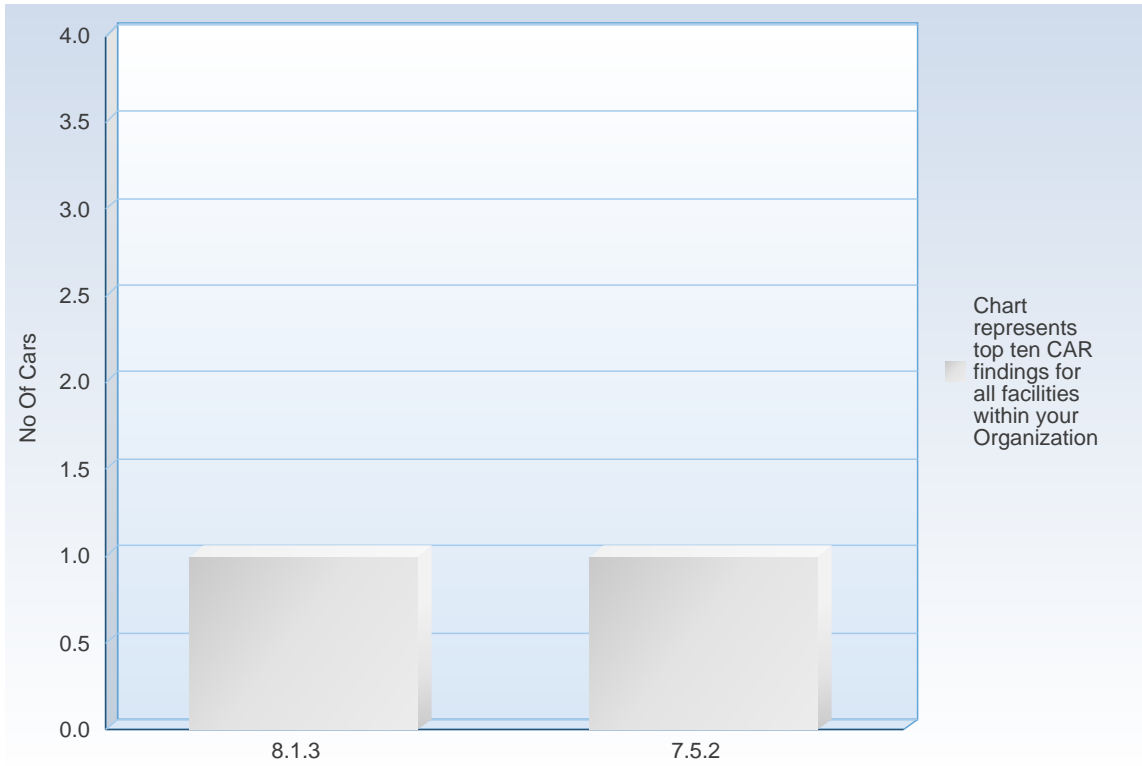
ISO 14001:2015 : Recertification; No NCRs

ISO 45001:2018 : Recertification; No NCRs





Top 10 Non Compliant Standard Clauses
CAR Chart Displays Current and Previous Years Data



Indorama Ventures Mobility Scottsboro

Standard Clause Description
8.1.3 Management of change 7.5.2 Creating and updating

Executive Summary.	
Question	Answer/Notes
Provide a statement on the conformity and the effectiveness of the management system together with a summary of the evidence relating to the capability of the management system to meet applicable requirements and expected outcomes:	Answer: The company's management system was determined to be suitable and effective in demonstrating conformity to the applicable requirements, and the intended outcomes of the management system processes.
Provide a statement regarding the internal audit:	Answer: Internal audits for applicable year were planned and conducted according to a published schedule by competent personnel. The internal audit records reviewed demonstrate that the process is effective in ensuring that the company management system remains properly implemented and maintained.
Provide a statement regarding the management review process:	Answer: Management review for the company was conducted according to the established frequency and records for the applicable year were reviewed and verified as meeting the standard requirements. All required inputs were reviewed by Top Management and resulted in appropriate actions.
If the Management review for the company was NOT conducted according to the established frequency, choose all of the applicable items that apply:	Answer: Not Applicable
Provide a conclusion on the appropriateness of the	Answer: The scope of registration was reviewed and determined to be accurate and



certification scope:	appropriate for the management system audited.
Provide confirmation that the audit objectives have been fulfilled:	Answer: The objectives of the audit in the published audit plan were fulfilled in the time allocated.
Provide details regarding any deviation from the audit plan and their reasons:	Answer: The objectives of the audit in the published audit plan were fulfilled in the time allocated.
Provide any significant issues impacting on the audit programme (3-year registration cycle):	Answer: Custom Additional Notes: The overall performance and metrics support the ongoing effectiveness of the management system.
Document significant changes, if any, that affect the management system of the client since the last audit took place:	Answer: There have been no significant changes affecting the management system since the last NSF-ISR audit.
Are there any unresolved issues:	Answer: None
Note, where applicable, whether the audit is combined, joint or integrated:	Answer: This audit was integrated with the applicable standard, those audit details are included herein.

Opportunities	
ISO 14001:2015,ISO 45001:2018	Opportunity None identified.

Corrective Action Requests
There is NO Corrective Action Request in this audit.

Site Information
The audit was based on a sampling of the company's management system.

Industry Codes
NACE:DB 17.1

Scope of Registration
ISO 14001:2015 : Manufacture of Nylon Fiber for Automotive and other Industrial Applications.
ISO 45001:2018 : Manufacture of Nylon Fiber for Automotive and other Industrial Applications.



Opportunities for Improvements

ISO 14001:2015,ISO 45001:2018

Opportunity	Observations / Auditor Notes
Opportunities for Improvements-03	<p>Location of OFI: Location; Control of Documented Information (7.5)</p> <p>Discussed With: Discussed; Top management at closing meeting</p> <p>Description: Description ; OFI: The management of retained and maintained documentation is being performed as required. Consider creating more electronic documentation for efficiency of practice.</p>

ISO 14001:2015,ISO 45001:2018

Opportunity	Observations / Auditor Notes
Opportunities for Improvements-01	<p>Location of OFI: Location; Identification of Aspects/Hazards (6.1, 6.1.2)</p> <p>Discussed With: Discussed; Top Management</p> <p>Description: Description; OFI: The identification and evaluation of aspects/significant are being performed. Consider expanding the aspects list and evaluating the process for identifying significant aspects and assigning them operational controls and objectives</p>

ISO 14001:2015,ISO 45001:2018

Opportunity	Observations / Auditor Notes
Opportunities for Improvements-02	<p>Location of OFI: Location; Hazards Assessment, (6.1.2)</p> <p>Discussed With: Discussed with; Top management at closing meeting</p> <p>Description: Description; OFI: Hazard Assessment are performed and reestablished every five years; SPCC, JHAs. With no changes to the production process having been made over the years, consider reevaluating the requirements in 29 CFR 1910, and 40 CFR more often than five years. The original third party consultant has recently passed away and there is no one tracking any changes to the code.</p>

Processes

ISO 14001:2015,ISO 45001:2018

Process Name	Observations / Auditor Notes
Consultation and Participation	<p>Process; The objective evidence provided has shown Consultation and Participation is being effectively implemented and maintained as required by the standard, contracts, risk management and the Management System. Interviews with employees and the management team has shown a good understanding of the requirements of the management system. There have been no significant issues identified during this assessment. Production records, internal audits, management reviews, customer feedback and risk evaluations are good, and reviews are thorough.</p> <p>Objective; The overall process was effective based on the overall objective evidence provided. with no significant issues identified.</p> <p>Summary; The facility is approximately 50% of employees are part of a bargaining unit, Steel Workers Union. The union representative participated in the May 31, 2023, Safety Committee Meeting; meeting minutes reviewed. The union representative participated on a safety incident involving a spool discharged and hit an employe in the ankle. The resolved incident included the union representative.</p> <p>The maintained process is identified in the Procedure for Consultation and Participation of Workers (104.S.0200), Rev 1, 8/9/22. Monthly on line safety training is offered and</p>



Process Name	Observations / Auditor Notes
	<p>required of salaried and hourly employees. The non managerial workers have been consulted on the scope of the OHS management system is a bar code Safety Culture can be scanned by any employees to communicate with management. Training is performed on line and is available without restrictions. Computers are set up in the break room for communication. Consultation and participation was provided as objective evidence in the several incidents evaluated for this audit. Training is current and supervisors are accountable for maintaining the employees training.</p> <p>N/A;</p>
Context and Scope	<p>Process; The objective evidence provided has shown Context and Scope is being effectively implemented and maintained as required by the standard, contracts, risk management and the Management System. Interviews with employees and the management team has shown a good understanding of the requirements of the management system. There have been no significant issues identified during this assessment. Production records, internal audits, management reviews, customer feedback and risk evaluations are good, and reviews are thorough.</p> <p>Objective; The overall process was effective based on the overall objective evidence provided. with no significant issues identified.</p> <p>Summary; Context and Scope of the organization: Indorama Ventures Mobility Scottsboro has determined external and internal issues that are relevant to its purpose and its strategic direction and that affect its ability to achieve the intended result(s) of its quality management system. External Issues: Economic environmental and trends, international trade conditions, competitive products and, services, customer specific requirements, technology trends, raw material availability, and prices. Internal Issues: Bargaining Unit (Union), internal audit results, competitive analysis, results of reviews, audits, complaints and feedback, organizational performance. The organizational Context also includes: Understanding company products, Identifying "interested parties" (stakeholders) are those who receive products, or may be impacted by them, or others who have significant interest in the organization, identifying and understanding the needs and expectations of interested parties and determining the scope of the quality management system. External and internal issues are reviewed and monitored during the Management Review Process.</p> <p>Scope: The scope of certification continues to be correct and fully aligns with the management system.</p> <p>N/A;</p>
Continual Improvement	<p>Process ; The objective evidence provided has shown XXX is being effectively implemented and maintained as required by the standard, contracts, risk management and the Management System. Interviews with employees and the management team has shown a good understanding of the requirements of the management system. There have been no significant issues identified during this assessment. Production records, internal audits, management reviews, customer feedback and risk evaluations are good, and reviews are thorough.</p> <p>Objective; The overall process was effective based on the overall objective evidence provided. with no significant issues identified</p> <p>Summary; CI: A review of the entire ISO 9001:2015, SO 14001:2015 and ISO 45001:2018 management system is under way to complete the integration of the three standards into one management system. There is training for the employees associated with this integration process that will help in the transition.</p> <p>CI: Corporate Indorama is issuing "7 Golden Rules of Safety." These rules will be considered other requirements from an interested party. The rules include: Permits to work, Hot Work, Energy Isolation, Confined Space Entry, Working at Heights, Lifting Operations, and Operation of Vehicles. These new requirements will be included in the OHS portion of the IMS.</p> <p>CI: Indorama has initiated a Sustainability program. The process includes Environmental performance, Social Impact, and Robust Governance.</p>



Process Name	Observations / Auditor Notes
	N/A;
Leadership	<p>Process; The objective evidence provided has shown Leadership and Policy is being effectively implemented and maintained as required by the standard, contracts, risk management and the Management System. Interviews with employees and the management team has shown a good understanding of the requirements of the management system. There have been no significant issues identified during this assessment. Production records, internal audits, management reviews, customer feedback and risk evaluations are good, and reviews are thorough.</p> <p>Objectives; The overall process was effective based on the overall objective evidence provided. with no significant issues identified.</p> <p>Summary; The Leadership has been identified in the Quality Manual and their responsibility and verified during interviews with top management thereby fulfilling the requirements as set in 5.1.1. In discussions with the management team and a review of the management review report, the overall participation and commitment from the local management team is effective and participation on a daily basis confirmed with the objective evidence and understanding of production and customer requirements. The Quality Policy has remain unchanged during the past audit cycle and is reviewed during the management review annually. The policy continues to meet the requirements of the standard.</p> <p>N/A;</p>
Management Review, Internal Audit and Corrective Action	<p>Process; The objective evidence provided has shown Management Review, Internal Audit and Corrective Action is being effectively implemented and maintained as required by the standard, contracts, risk management and the Management System. Interviews with employees and the management team has shown a good understanding of the requirements of the management system. There have been no significant issues identified during this assessment. Production records, internal audits, management reviews, customer feedback and risk evaluations are good, and reviews are thorough.</p> <p>Objective; The overall process was effective based on the overall objective evidence provided. with no significant issues identified.</p> <p>Summary; Management Review: The management reviews for the past three years of certification were reviewed. The reviews follow the standard at Clause 9.3. The current review follows the same process and is complete. The current review for March 23, 2023. The previous three years of management reviews were reviewed and found to show a consistent level of detail and good meeting minutes, action items, and decisions made. The process has matured and is effective.</p> <p>Internal Audit and Corrective Actions: An Internal Audit schedule exists. The results of the following Internal Audits conducted, during 2021-2023, were reviewed for this recertification. Logistics, Order Entry, Spinning, Palletizing, Internal Audits, Corrective Actions, Lab Activities and Management Review. The audits are process driven and effectively performed. Records are being maintained and are discussed during the management reviews. The established schedule is being followed and is based on the status and importance of the area audited. PHP Fibers/Indorama Ventures performs a full system audit annually. Audits are conducted by trained and independent internal auditors. An effective internal audit system exists at this time. Audit results for the current audit cycle identified April 1 through May 10, 2023, for the process to be completed and findings closed.</p> <p>Corrective Actions: The Ultrasonic Operation, WI #224-0810, the inspection review was inadequate, and the corrective action was to update WI for changes to the pH test. During the past audit cycle there were no significant or major nonconformances. Opportunities for Improvement require CAs. This process is robust with the level of detail good. The CA process is effective and provides a detailed look into the evaluation of the quality management system performance. CA can be written outside the internal audit process. The CAR system is being utilized in all areas of the management system. Customer Concerns, Internal Audit findings, nonconforming product, and all other areas of concern are addressed through the CAR system. The Continual Improvement projects, listed in the</p>



Process Name	Observations / Auditor Notes
	<p>Closing Meeting section of this report, were reviewed. The CPAR system is reviewed during Management Review. The corrective action systems are effective at this time. Audit IA040122-IA001-4 were evaluated as a sample of the current audit cycle CAR. The process is effective.</p> <p>N/A;</p>
<p>Nonconformance/Incident and Continual Improvement</p>	<p>Process; The objective evidence provided has shown Incidents and Continual Improvement is being effectively implemented and maintained as required by the standard, contracts, risk management and the Management System. Interviews with employees and the management team has shown a good understanding of the requirements of the management system. There have been no significant issues identified during this assessment. Production records, internal audits, management reviews, customer feedback and risk evaluations are good, and reviews are thorough.</p> <p>Objective; The overall process was effective based on the overall objective evidence provided. with no significant issues identified.</p> <p>Summary; Incident, nonconformity, and corrective action: An incident reporting and corrective action process is in place The objective evidence provided included the following report: Number 03-23, March 23, 2023. An employee while cleaning a metal filter the filter slipped and injured his finger. The incident was reported, recorded information by a witness provided a statement. The CA includes a hoist system to provide the lifting capability necessary to safely move the filter down. The Accident Reporting Guideline (work instruction), lists the steps necessary for the initiation of the investigation, recorded information, the 1st Injury Report of Injury Form. Complete the 301 Form, Injuries, and Incident Report OSHA 301. At the end of the year Form 301A will be filled out. Incident 05-21, May 21, 2021, Incident an employee received lacerations to arm when the window blocking the draw field came down; initiated by accident. Incident Number 05-22, 12/28/22. An employee fell off the ladder. The employee was working alone purging the Extruder 24, the second employee left to take care of another problem. As the employee was descending the ladder shifted and he fell approximately six feet. CA, replaced ladder with ladders that have hand rails, safety stairs, and use of a smaller three gallon bucket to help employees keep balance. The CA and root cause analysis are consistent with the requirements of gathering information and evaluating processes. There were no apparent systemic issues identified in the previous three years of incident investigations.</p> <p>N/A;</p>
<p>Operation</p>	<p>Process; The objective evidence provided has shown Operations is being effectively implemented and maintained as required by the standard, contracts, risk management and the Management System. Interviews with employees and the management team has shown a good understanding of the requirements of the management system. There have been no significant issues identified during this assessment. Production records, internal audits, management reviews, customer feedback and risk evaluations are good, and reviews are thorough.</p> <p>Objective; The overall process was effective based on the overall objective evidence provided. with no significant issues identified.</p> <p>Summary; Eliminating hazards and reducing OH&S risks: The use of Job Hazards Assessments (JHA) and Job Hazards Assessments are the primary tools for identifying and mitigation hazardous risks. The JHA's review each identify the Task, the hazard, the eyes/face protection, foot, hand/arm hearing and head/clothing requirement for each job. Risk levels are identified as High, Medium and ow. Serious potential injury, and other not previously identified. The hazard categories include: Impact/flying or falling objects, chipping, grinding, moving, equipment and tools. Penetration, sharp objects that my cause a cut. Compression, crushing, pinching, rollover. Chemical agents, contact with chemical liquids, vapors, dust. The evaluation of the following was made and observed throughout the production floor: Multicraft Maintenance, Quench Floor Operator, Beaming Operations, Lab Technician, Pack Build, Packing/Sorting/Palletizing. Supply Room Clerk. Operating the Beamer, cutting with utility knife, handling rough objects (cuts or abrasions to hands), checking and sanding of Beam spurs, operating forklifts, Beam cleaning. Lab Technician. Work instructions</p>



Process Name	Observations / Auditor Notes
	<p>Management of Change: Procedure for Hazard Identification and Addressing OH&S Risk and Opportunities (104.S.0150) Rev 1, 8/9/22. MOC as identified in 3.1 of the procedure an evaluation of the risk and risk reductions are mitigated before the change is implemented. Hazard Evaluation Record (104.A0900), List of Workplaces and Employees with Significant Risk (104.A0095). Changes are identified as Internal: staff changes, changes in processes work instructions and materials. External Changes: Changes and/or amendments in regulations/standards/legislation, and development of OH&S knowledge and technologies. Control: risk elimination, substitution, technical technological controls, signage/warnings/administrative, PPE. External: Application of controls to determine if hazard is still relevant and whether the controls in place are still effective.</p> <p>Procurement: Outsourcing, Contractors, sign and acknowledge the "In Plant Safety and Procedures for Contractors. Reviewed: Apache Fab, TranSouth and HCS Engineering Company Attachment 104.A010, Rev 1, 6/28/20. The contracting with any outsourcing/contractors is maintained by the Maintenance Department. Procurement vets the contracted entity. The contractors used at this location have a long standing relationship with PHP.</p> <p>Emergency preparedness and response: The Integrated Contingency Plan prepared by a third party, H3 Environmental, Inc., last reviewed 8/9/23, updates to key internal contacts and Emergency Contact List. The 5 year review of the plan was formally performed 5/22/20. The next review will be in 2025 unless there are significant changes to operations. Each shift as a drill monthly, and the detail is maintained in the Fire Issues file on the U Drive in the local server. The drills for the 2020, 2021, 2022, 2023 years has shown a consistent application of the requirement with no issues identified. The result of the drills resulted in an evaluation of the emergency phone contact numbers. Has been the only change to the Plan within this audit cycle.</p> <p>N/A;</p>
Organizational roles, responsibility, and authorities	<p>Process; The objective evidence provided has shown XXX is being effectively implemented and maintained as required by the standard, contracts, risk management and the Management System. Interviews with employees and the management team has shown a good understanding of the requirements of the management system. There have been no significant issues identified during this assessment. Production records, internal audits, management reviews, customer feedback and risk evaluations are good, and reviews are thorough.</p> <p>Objective; The overall process was effective based on the overall objective evidence provided. with no significant issues identified.</p> <p>Summary; Organizational roles, responsibility, and authorities: An organization chart is in place that lists job titles that refer to job descriptions. Within the various job descriptions and Sop/WI's are the identified roles, the full responsibilities, and authorities to effectively perform their roles. Responsibilities are identified in the flow charts for each process covered under the quality management system.</p> <p>N/A;</p>
Performance: Legal and Other Requirements, Compliance	<p>Process; The objective evidence provided has shown Performance: Legal and other requirements, Compliance is being effectively implemented and maintained as required by the standard, contracts, risk management and the Management System. Interviews with employees and the management team has shown a good understanding of the requirements of the management system. There have been no significant issues identified during this assessment. Production records, internal audits, management reviews, customer feedback and risk evaluations are good, and reviews are thorough.</p> <p>Objective; The overall process was effective based on the overall objective evidence provided. with no significant issues identified.</p> <p>Summary; The Legal and Other requirements have been initially identified by a third party consultant. The evaluation of activities associates with the following local requirements include OSHA requirements identified in 29 CFR 1910: Abrasive wheel machinery; guarding; 1910.215, observed in the production line and</p>



Process Name	Observations / Auditor Notes
	<p>maintenance shop equipment.</p> <p>Automatic sprinkler systems; fire protection; 1910.159, observed</p> <p>Blood borne pathogens; toxic and hazardous substances; 1910.1030, spill kits and training records for hazardous waste handlers.</p> <p>Compressed gases; compressed gas and air equipment; 1910.169 and 253, tanks chained properly.</p> <p>Confined space; general environmental controls; 1910.146, compactor is only confined space.</p> <p>Cranes and hoists; materials handling and storage; 1910.179, slings/chains inspected.</p> <p>Electrical safety; electrical; 1910.301 and 399, electrical panels free and clear of obstructions and in very good condition.</p> <p>Emergency exits; exit routs, emergency action plans, and fire prevention plans; 1910.36 and 37, exits clearly marked and free from obstruction.</p> <p>Emergency eyewash and shower stations; medical and first aid; 1910.151, stations are inspected monthly for operation, and up to date, free and clear of obstructions.</p> <p>Emergency management; emergency action plans, and fire prevention plans; 1910.38, emergency response plan current, drills up to date.</p> <p>Employee access to exposure and medical records; toxic and hazardous substances; 1910.1020, HR maintains records which are available to employees.</p> <p>Exposure to chemical hazards; 1910 Subpart Z toxic and hazardous substances; 1910.1000-1029, training performed, material handling and storage proper for the materials.</p> <p>Fall protection; 1910 Subpart D walking and working surfaces; 1910.23 and 132, tie off for working at heights observed, surfaces clean and unobstructed as observed.</p> <p>Fire detection systems; 1910 Subpart L fire protection; 1910.164, fire detection inspections of water lines up to date.</p> <p>Fire extinguishers; 1910 Subpart L fire protection; 1910.157, fire extinguishers tagged, current, signage in place, properly charged.</p> <p>First aid; medical and first aid; 1910.151, medical kits labeled with current inspection clearly marked on each kit.</p> <p>Fixed extinguishing systems; fire protection; 1910.160, fire pumps inspected weekly.</p> <p>Flammable and combustible liquids; hazardous materials; 1910.106, stored in Flammable Cabinets.</p> <p>Hand and power tools; hand and portable and other hand held equipment; 1910.242, inspected before each use.</p> <p>Hazard communication; toxic and hazardous substances; 1910.1200, signage, training at hire and annual training and new introduced products require training for those employees affected.</p> <p>HAZWOPER; hazardous materials; 1910.120, not required at this time, but identified in case this requirement is activated.</p> <p>Industrial Lighting 1926.56</p> <p>Jacks and stands; hand and portable and other hand held equipment; 1910.244, six month inspections.</p> <p>Ladders; walking and working surfaces; 1910.25-29, stored properly, walking surfaces clear of obstructions.</p> <p>Lock out tag out; general environmental controls; 1910.147, LOTO kit observed outside maintenance</p> <p>There have been no regulatory visits or actions/citations taken during this past audit cycle.</p> <p>N/A;</p>
<p>Planning- Operational Controls,</p>	<p>Process; The objective evidence provided has shown Planning- Operational Controls, is being effectively implemented and maintained as required by the standard, contracts, risk management and the Management System. Interviews with employees and the management team has shown a good understanding of the requirements of the management system. There have been no significant issues identified during this assessment. Production records, internal audits, management reviews, customer feedback and risk evaluations are good, and reviews are thorough.</p> <p>Objective; The overall process was effective based on the overall objective evidence provided. with no significant issues identified.</p> <p>Summary; ID (Planning & Change): The polymer is delivered by truck via a vetted vendor. The QA Lab draws a sample to determine if the polymer is within specification. If yes, the polymer is off loaded and directed to the SSP Reactor, sent to the Dried Silo and into a holding silo prior to distribution to the extruder hoppers. If the polymer is not within</p>



Process Name	Observations / Auditor Notes
	<p>specification it remains on the truck and the load is rejected. The extruder is the first step in manufacturing the yard product. Process inspections are made at the final step of the Winder process. If the yarn is rejected the Winder is Blockaded so the yarn is not inadvertently processed as finished product. Finished completed product the QA Lab (using current ASTM Method D 1776-20) takes a sample and yarn condition for 12 hours. Nylon products are susceptible to moisture and need to be conditioned. The finished product is given a package ID and sorted looking for physical defects. Once inspected at a final the sorting and packaging is performed. The finished product is palletized, shrink wrapped, and placed into holding area until the QA Lab releases the product for shipping. Requirements for products and services: Customer criteria is established by placing an order for existing products the company makes. New products may be made to order. Production: Container inspection (truck carrying the polymers, truck seal 0010993, and 0010994), Critical Materials Release Form #15445, 49,810 pounds, Product Code 42ABH, Vendor Ascend, Storage location, SSP1 (silo), Product release is the lab verifying the polymer meet purchase specification. BOL, 650445418, Ascend Performance Materials Operations, Synthetic Plastic Flake Nylon Polymer 6'6 Type 42ABH verified to customer PO P0019150-20, Order Number 3016171031, 19 June 2023. Packing List reconciled. Certificate of Analysis verified against the Indorama specifications. This product was tested and then authorized to place into the SSP Reactor. The process hoppers are continuous and once filled begin the make the yarn. The Sequel Server has the recipe targets, set points, and manufacturing specifications. Quick Checks are performed with new runs, changes to processes, winder changes, etc. The production runs are based on received orders, which may be multiple offers from different customers. Acceptance ranges vary by customer, however the yarn produced fits within acceptance ranges to meet a variety of customer needs. ID and traceability is performed with package ID at the end of the production process bar code. The day of construction will provide the through out of the polymer feed process and able to determine which polymers were used for each yarn run. Bar Codes are used by the QA Lab, Shipping, AND Packaging.</p> <p>N/A; r</p>
Risk	<p>Process; The objective evidence provided has shown Risk is being effectively implemented and maintained as required by the standard, contracts, risk management and the Management System. Interviews with employees and the management team has shown a good understanding of the requirements of the management system. There have been no significant issues identified during this assessment. Production records, internal audits, management reviews, customer feedback and risk evaluations are good, and reviews are thorough.</p> <p>Objective; The overall process was effective based on the overall objective evidence provided. with no significant issues identified.</p> <p>Summary; Procedure Management of Change and Risk Assessment QHSE 6.0, Management of Change Log is uses as the tool for addressing the management of risk and the processes associated with change and risk. The log has listed the risks associated with the description or risk associated with change, amount of product, start date and duration of the change, risk description, determine if customer approval is required, Yes/No to proceed with the change, impact rating (1-5), Probability (1-5), recommended actions, target date for the change, actions taken, FMEA Control change, WI/Procedure change. Samples of change: New HVAC in lab, new shrinkage tester installed, new Duo/Roll cleaner, Helix angles SDW, Silo for chip/resin conditioning, new machines, M1 and M27 are examples reviewed and found to follow the requirements of the procedure.</p> <p>N/A;</p>
Support	<p>Process; The objective evidence provided has shown Support is being effectively implemented and maintained as required by the standard, contracts, risk management and the Management System. Interviews with employees and the management team has shown a good understanding of the requirements of the management system. There have been no significant issues identified during this assessment. Production records, internal audits, management reviews, customer feedback and risk evaluations are good, and reviews are thorough.</p> <p>Objective; The overall process was effective based on the overall objective evidence provided. with no significant issues identified.</p>



Process Name	Observations / Auditor Notes
	<p>Summary; Competence and Awareness: Procedure Training QHSE7.2, The organization has identified the following: The organization has established that persons doing work under the Indorama Ventures Mobility Scottsboro control are aware of: the quality policy, relevant EHS objectives, the implication of not conforming with the quality management system requirements, understanding the quality policy, quality objectives associated with the quality management system, how they contribute to the effectiveness of the quality management system, and any implication of not conforming with the quality management system requirements. Resources of training and the corresponding competence and awareness were well documented, as per Procedure: Training QHSE7.2. Infrastructure and Environment for the operation of processes. The facility is well maintained, and the infrastructure is conducive for the manufacturing of quality nylon and polyester yarn manufacturing. The facility is well lit and organized. Organizational knowledge is being captured in work instructions and continual training for newer employees. There are no third party service providers that can impact product quality except for the third party calibration services. Communication was observed with information bulletin boards with the QHES policy, production, up time/down time of equipment by machine/process. External communication is limited to the interested parties, particularly customer interaction and customer focus. The required documented information that is maintained and retained was reviewed. The procedures, work instructions, spreadsheets, are managed on the shared drive. Work instructions are being uploaded into the shared drive as an ongoing continual improvement. No significant issues were identified. Creating and updating the maintained documentation is the responsibility of the Quality Manager. The management of retained and maintained documentation is electronic. Communication: Procedure for Communication 104.E.0310, Rev 2, 8/9/22. Internal communication have been established for concerns associated with environmental and OH&S issues raised by employees have a direct line to top management via: Telephone, internal email, daily production meetings, BMP/SPCC inspection checklists, Monthly PTL Safety Observation Sheets, Monthly Internal HSE Audits, Weekly Operation & Maintenance Housekeeping & Cleaning Records, employee suggestion box, In person and via Safety Culture App. QHSE 7.5 Documented Information identifies the creation, maintenance approval and obsoleting of documented information required by the standards. Document control for the required documentation is electronic and the current version is maintained electronically. A continual improvement is being planned to install computer terminals throughout the facility to enhance internal communication and provide more access to organizational communication. The Documentation required by the standard has been met.</p> <p>Changes or additions to the environmental policy and procedures are communicated to the affected employees by top management through distribution of the revised policy to each department along with a sign-off sheet for each employee to acknowledge their review of the policy. Inquiries associated with environmental issues are communicated by external parties are forwarded to the HSE Manager. Methods of internal communication include but are not limited to: periodic Management Team meetings, daily production meetings, employee training, announcements on notice boards, telephone, email, and conversations with employees about their understanding of the Environmental and OH&S Policies, Environmental and OH&S Objectives and Targets and EMS and OH&S and effectiveness. The HSE Manager responds to internal communications related to the EMS and/or OH&S MS, and records them into the Internal Communication Report.</p> <p>N/A;</p>

ISO 45001:2018

Process Name	Observations / Auditor Notes
Beaming - NC	<p>The objective evidence provided has shown the Beaming process is being effectively implemented and maintained as required by the standard, contracts, risk management and the Management System. Interviews with employees and the management team has shown a good understanding of the requirements of the management system. There have been no significant issues identified during this assessment. Production records, internal audits, management reviews, customer feedback and risk evaluations are good, and reviews are thorough.;</p> <p>The overall process was effective based on the overall objective evidence provided. with no significant issues identified.;</p>



Process Name	Observations / Auditor Notes
	<p>Persons Interviewed: Brian Wilcox, Beaming Operator Shirley Maness, Beaming Operator</p> <p>Documentation reviewed: EHS Policy Statement Work Instructions</p> <p>Interviews with employees from Beaming addressed the following:</p> <ul style="list-style-type: none"> - Employee knowledge of the Environmental and H&S policy (5.2); - Employee knowledge of HSE roles, responsibilities and authorities (5.3) - Consultation and participation of workers (5.4) - Employee awareness of environmental aspects, hazard identification and assessment of risk and opportunities (6.1.2); - Employee awareness and job competence (7.2; 7.3); - Employee knowledge of internal communication (7.4.2); - Employee knowledge of documents and records process (7.5.3) (as appropriate); - Employee knowledge of operational controls for their jobs (8.1.2); and - Employee training, knowledge, and experience in emergency response (8.2; <p>NA;</p>
Laboratory - NC	<p>The objective evidence provided has shown the Beaming process is being effectively implemented and maintained as required by the standard, contracts, risk management and the Management System. Interviews with employees and the management team has shown a good understanding of the requirements of the management system. There have been no significant issues identified during this assessment. Production records, internal audits, management reviews, customer feedback and risk evaluations are good, and reviews are thorough.;</p> <p>The overall process was effective based on the overall objective evidence provided. with no significant issues identified.;</p> <p>Persons Interviewed: Dennis Godwin, Lab Analyst</p> <p>Documentation Reviewed: Work Instructions SDS Notebook</p> <p>Interviews with employees from Lab addressed the following:</p> <ul style="list-style-type: none"> - Employee knowledge of the Environmental and H&S policy (5.2); - Employee knowledge of HSE roles, responsibilities and authorities (5.3) - Consultation and participation of workers (5.4) - Employee awareness of environmental aspects, hazard identification and assessment of risk and opportunities (6.1.2); - Employee awareness and job competence (7.2; 7.3); - Employee knowledge of internal communication (7.4.2); - Employee knowledge of documents and records process (7.5.3) (as appropriate); - Employee knowledge of operational controls for their jobs (8.1.2); and - Employee training, knowledge, and experience in emergency response (8.2; <p>NA;</p>
Maintenance - NC	<p>The objective evidence provided has shown the Maintenance process is being effectively implemented and maintained as required by the standard, contracts, risk management and the Management System. Interviews with employees and the management team has shown a good understanding of the requirements of the management system. There have been no significant issues identified during this assessment. Production records, internal audits, management reviews, customer feedback and risk evaluations are good, and reviews are thorough.;</p>



Process Name	Observations / Auditor Notes
	<p>The overall process was effective based on the overall objective evidence provided. with no significant issues identified.;</p> <p>Person interviewed: Roger McCutchen, Maintenance Coordinator Tim Case, Maintenance Technician Caleb Hilldy, Maintenance Auxiliary Training Charlie Warneke, Maintenance Technician (B Shift) Nick Huckabee Maintenance Technician Mike Maness, Maintenance Supervisor</p> <p>Documentation Reviewed: Reviewed PM System Weekly West Fire Pump Checklist 8/24/23</p> <p>Interviews with employees from Maintenance addressed the following:</p> <ul style="list-style-type: none"> - Employee knowledge of the Environmental and H&S policy (5.2); - Employee knowledge of HSE roles, responsibilities and authorities (5.3) - Consultation and participation of workers (5.4) - Employee awareness of environmental aspects, hazard identification and assessment of risk and opportunities (6.1.2); - Employee awareness and job competence (7.2; 7.3); - Employee knowledge of internal communication (7.4.2); - Employee knowledge of documents and records process (7.5.3) (as appropriate); - Employee knowledge of operational controls for their jobs (8.1.2); and - Employee training, knowledge, and experience in emergency response (8.2 <p>;</p> <p>NA;</p>
<p>Performance Evaluation - NC</p>	<p>The objective evidence provided has shown the performance evaluation process is being effectively implemented and maintained as required by the standard, contracts, risk management and the Management System. Interviews with employees and the management team has shown a good understanding of the requirements of the management system. There have been no significant issues identified during this assessment. Production records, internal audits, management reviews, customer feedback and risk evaluations are good, and reviews are thorough.;</p> <p>The overall process was effective based on the overall objective evidence provided. with no significant issues identified;</p> <p>Monitoring and Measuring and Analysis Monitoring and measuring of the key HSE requirements are defined on the Matrix for Permits and Certifications. The matrix contains all monitoring requirements for the HSE including sampling, reports, inspections etc. Compliance evaluations are accomplished by monthly HSE audits and the Compliance Evaluation Record. No instrumentation or other measuring devices, requiring calibration, are used as part of the HSE management system.</p> <p>Internal Audit Internal audits are conducted annually in accordance with the IDP.8.2.2 Internal audit procedure dated 12/31/2019. The last complete internal audit was conducted 3/31/23 and the internal audit is ongoing for 2023. Completion date is August 31, 2023.</p> <p>Management Review Management reviews are conducted in accordance with the IDP.5.6 Management Review Rev. 8 dated 12/21/2019. The organization has an amended procedure intended to accommodate ISO 45001 and in accordance with the 104.A045 HSE Management Review Agenda template.</p> <p>The performance process is effective based on review of documentation and interviews with HSE management</p>



Process Name	Observations / Auditor Notes
	<p>Persons Interviewed: Toni Miller, Quality Manager Melton Potter, HSE Manager Steve Howell, consultant and former Plant Manager Jake Fowler, HSE Administrative Clerk</p> <p>Documentation reviewed: Internal Audit Procedure (IDP.8.2.2) Management Review Procedure (IDP.5.6) Internal Checklist for ISO 45001 Internal Audit Checklist for ISO 14001 Management Review Agenda Management Review 3/23/23 Internal Audit 3/31/22 Audit Schedule for 2023 Integrated Contingency Plan 8/9/23 First Aid CPR Training 10/20/22 Industrial Hygiene Report 7/8/21 Annual Notification of Regulated Waste Activity 4/4/22 Conformance Evaluation Record 104.E.0280 XXXX HSE Housekeeping Audit Observation Worksheet (May, June, July) Non Hazardous Waste Manifest 2/9/21, 11/16/21 Hazardous Waste Manifest 1/3/21, 12/2/22, 10/31/22, 1/6/23 Hazardous Waste Report to ADEM 3/22/23 Waste Supporting Document 2022 HSE Investigation Form (Fall Protection and Ladder Safety) 1/30/23</p> <p>;</p> <p>NA;</p>
Planning - NC	<p>The objective evidence provided has shown the planning process is being effectively implemented and maintained as required by the standard, contracts, risk management and the Management System. Interviews with employees and the management team has shown a good understanding of the requirements of the management system. There have been no significant issues identified during this assessment. Production records, internal audits, management reviews, customer feedback and risk evaluations are good, and reviews are thorough.;</p> <p>The overall process was effective based on the overall objective evidence provided. with no significant issues identified</p> <p>;</p> <p>Aspects/Impacts Aspects/Impacts are determined according to the Procedure for Identification and Evaluation of Environmental Aspects and Hazards/Risks are determined according to the Hazard Assessment Procedure.</p> <p>List of Significant Aspects: Water consumption (steam generation/ cooling towers) Contaminated storm water (exhaust fan residue into storm water) Power consumption. Natural gas consumption. Boiler SSP unit (tower- solid state polymerization)</p> <p>Hazard identification and OHS risk assessment: The organization maintains a hazard identification process that is well developed for the tasks associated with product manufacturing and maintenance. The Hazard Assessment Procedure governs the process and the Hazard Assessment and PPE Equipment Summary sorts hazards by task.</p>



Process Name	Observations / Auditor Notes
	<p>Hazard Listing broken into departments: --Multi-craft (Maintenance) --Shipping/ Receiving --LSDW Quench Floor SSP-1 --HSDW Quench Floor. SSP-2 --Beaming --Lab tech --Pack/ Build (pallets) --Sorting/ palletizing --Supply Room Clerk --Administrative offices.</p> <p>Aspects/Risks are reviewed annually.</p> <p>Compliance Obligations Identification of legal and other requirements is defined on the List of Interested Parties, Legal and Other Requirements and the Matrix for Permits and Certifications</p> <p>Objectives The plant has identified and documented requirements for the setting of objectives and actions/plans to achieve objectives for both ISO 14001 and ISO 45001. The objectives, established annually, are based on the safety and environmental policies.</p> <p>List of HSE objectives: 2% Annual Sickness Target Zero OSHA Recordable and Lost Time Injuries Encourage gym attendance to promote fitness and health Zero reportable environmental incident rate Maintain WW testing to comply with SID permit</p> <p>Person Interviewed: Melton Potter, HSE Manager Toni Miller, Quality Manager Jake Fowler, HSE Administrative Clerk</p> <p>Documentation Reviewed: EMS Manual (2/12/18) OH&S Manual (5/15/20) Process Aspects Chart (104.A025) List of Interested Parties, Legal and Other Requirements (104.E.0270) Procedure for Identification and Evaluation of Environmental Aspects (104.E.0240) Environmental Objectives and Planning to Achieve Them (104.A027) Register of Key Risk & Opportunities (104.A085) Procedure for Hazard Identification and Addressing OH&S Risks and Opportunities (104.5.0150) HS&E Regulatory Requirements (104.5.01-45) Hazard Assessment Procedure (104.5.0042) Identification and Evaluation of Environmental Aspects and Risks (104.E.0240) Compliance Evaluation Record (104.E.0280) Legal Requirements Checklist (Attachment 104.A130) Reviewed completed checklist 5/9/23 Hazard Assessment for new palletizing robot Matrix for Permits and Certifications HSE Objectives ;</p> <p>NA;</p>



Verification of CARs For ISO 14001:2015,ISO 45001:2018

Yes.

A CAR, T5248899-12, 8/10/22 was verified as being closed from a previous audit. The corrective action on this closed Major CAR along with the Verification Audit report was performed 8/10/22. A review of the client documentation and MOC process and Log were found to be complete. No issues identified.