DSA 03-OME Part 1 (JSP 520)- Defence Code of Practice (DCOP) and Guidance Notes for OME Acquisition
DSA VISION

Protecting Defence personnel and operational capability through effective and independent HS&EP regulation, assurance, enforcement and investigation.
PREFACE

AUTHORITY

1. This document is crown copyright and the intellectual property rights of this publication belong exclusively to the Ministry of Defence (MOD). However, material or information contained in this publication may be reproduced, stored in a retrieval system or transmitted in any form provided it is used for the purposes of furthering safety and environmental management.

STATUS

2. This document:
   a. Is uncontrolled when printed.
   b. Will be updated as part of a continuous improvement programme but at least 12-monthly from the period of document issue date.

REQUESTS FOR CHANGE

3. Proposed changes, recommendations or amendments to DOSR Regulations and Guidance publications can be submitted by anyone using the DOME Request for Change Function (RFC) available for every Dome publication in the DOME library located here or by completing the Word version of the Change Proposal Form available from the DOME Library, see figure 1 below for the location.

4. Any post and grammar change proposals can be approved or rejected by the DOSR PRG Authors without involvement of the associated Working Group.

5. Technical change proposals will need to be submitted to the associated Working Group for review and approval or rejection.

6. When incorporating changes care is to be taken to maintain coherence across regulations.

7. Changes effecting Risk to Life will be published immediately.

8. Other changes will be incorporated as part of routine reviews.
REVIEW PROCESS

9. The DOSR PRG team will ensure these OME Regulations remain fit for purpose by conducting reviews through the DOSR Governance Committees, involving all Stakeholders.

FURTHER ADVICE AND FEEDBACK

10. The document owner is the DOSR. For further information about any aspect of this document, or questions not answered within the subsequent sections, or to provide feedback on the content, contact:

<table>
<thead>
<tr>
<th>Job Title</th>
<th>DOSR-Policy, Regulations and Guidance</th>
</tr>
</thead>
<tbody>
<tr>
<td>E-mail</td>
<td><a href="mailto:DSA-DOSR-PRG@mod.gov.uk">DSA-DOSR-PRG@mod.gov.uk</a></td>
</tr>
<tr>
<td>Address</td>
<td>Juniper #5004, Level 0, Wing 1, Abbey Wood North, Bristol, BS34 8QW</td>
</tr>
</tbody>
</table>
# AMENDMENT RECORD

<table>
<thead>
<tr>
<th>No</th>
<th>Section</th>
<th>Para</th>
<th>Amendment Summary</th>
<th>Agreed</th>
<th>Date</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
Contents: Audits

1  Overview
   Audit Aims and Objectives
   Audit Arrangements
   Types of Audit
   Self Audit
   Independent Safety Audit (ISA)
   Director Technical (DTech) Audit
   Defence Safety Authority (DSA) Audit
   Audit Process
1 Overview

1. The Defence OME Safety Regulator (DOSR) is required by Director Defence Safety Authority (DSA), to ensure that the overarching Safety and Environmental Management System (SEMS) is understood and is operating effectively in organisations with responsibility for Ordnance Munitions and Explosives (OME) safety management within the land, maritime and air domains.

2. Safety Auditing is defined as “the systematic, independent and documented process for obtaining evidence and evaluating it objectively to determine the efficiency, effectiveness and reliability of the total health and safety management system. Organisations with responsibility for OME shall be subject to regular audit of its SEMS. Periodicity is dependent on the level of risk perceived or assessed, the value that could be added by audit, or as required by management. Arrangements shall be in place for completion of corrective actions arising from audits.

3. The purpose of audit is to ensure that OME systems comply with MOD regulations, Statutory requirements and internal processes for safety and environmental management. It provides a systematic and independent examination of an OME SEMS to determine its effectiveness. Periodic audits will ensure the continued effectiveness of an OME SEMS, and enables any deficiencies to be addressed by appropriate and timely action.

Audit Aims and Objectives

4. The aim and objectives of an audit is to ensure compliance with the Regulations in DSA 02.OME Part 1 (JSP 520), in particular consideration should be given to the:

   a. Provision of evidence that the OME SEMS is operating effectively.
   b. Identification of opportunities to improve the OME SEMS.
   c. Identification of opportunities to raise awareness of safety issues.
   d. Identification of any training needs and competency requirements.
   e. Provision of compliance assurance with applicable safety standards, both statutory and non-statutory.
   f. Recognition of good practice.
   g. Communication of findings to the management review process.
   h. Improvement of the SEMS processes.

Audit Arrangements

5. Project Team Leaders (PTL) should establish an internal audit programme for their overarching SEMS, and for individual project SEMS, as appropriate, which examines the safety management of OME. Only a Suitably Qualified and Experienced Person (SQEP) should conduct internal audits on their own area. If this is not possible, then a SQEP may be seconded either internally (e.g. peer review) or from an external source (e.g. Independent Safety Auditor (ISA)).
6. For complex or high risk programmes, consideration should be given to appointing an ISA to carry out audits of the SEMS.

7. Audits should be programmed and undertaken prior to the completion of a significant phase of a project, when major milestones are reached and / or in line with the agreed audit programme. The audit programme should be recorded in the SEMP. Audits may be undertaken by different authorities and organisations depending on a system’s position in the acquisition cycle, the level of scrutiny or expertise required.

8. Interfaces between MOD and the contractor should be subjected to audit and review, and regular reviews of the quality of the safety management arrangements. Those responsible should also take appropriate action to ensure it has adequate arrangements in place, to control any residual safety risks it needs to manage, as well as monitor future performance.

Types of Audit

Self Audit

9. Conducting self-assessments through audit is a Defence Equipment and Support (DE&S) mandated safety management tool \(^1\) and can be a valuable means of obtaining feedback on whether objectives are being met, and whether internal processes and procedures are being adhered to. This can be carried out by a SQEP from within the PT or from another project team. Self-assessments aid in identifying and gathering evidence that may be required during external audits and will ensure familiarity with the audit process.

Independent Safety Audit (ISA)

10. As part of a PT’s assurance arrangements, and to maintain safety integrity across large and / or high risk projects, it is strongly recommended that the PTL, or equivalent, considers the appointment of an ISA during the project, in consultation with the Safety and Environmental Panel (SEP), to undertake the task of audits and other assessment activities to:

   a. Provide assurance that safety activities comply with planned arrangements.
   b. Provide assurance that safety activities are implemented effectively and are suitable to achieve objectives.
   c. Confirm whether related outputs meet requirements.

11. The ISA should have a well-defined role that is clearly understood by all parties. This role might include providing assurance by auditing the safety process being followed, or by undertaking some safety assessment independently to check the primary assessment. The role may change at different points through the life cycle, but the ISA’s independence should not be compromised by involving them in activities such as setting Safety Requirements, tender assessment or providing

---

\(^1\) Acquisition Safety and Environmental Management System Part 1 – Policy.
specific advice on engineering changes. The ISA should be independent of the organisation being supported and be able to demonstrate competence relating to the system(s) under review.

12. The primary role of an ISA is assessment and validation of the SEMS and its outputs. This is usually carried out through audit of the following:

   a. The safety management arrangements set out in the SEMP.
   b. The safety activities set out in the contractor’s Safety Programme Plan.

13. As such, the ISA should sit as a full member of the SEP and their role and function should be defined in the SEMP. Further guidance on the role, selection of, and work performed by an ISA can be found on the Acquisition System Guidance (ASG).

Director Technical (DTech) Audit

14. DTech provides Chief Defence Material (CDM) with assurance that safe and environmentally compliant procedures and processes are defined and complied with within DE&S, so that equipment, systems, support, logistics and the operation of DE&S are safe and environmentally compliant. The Quality Safety Environmental Protection (QSEP) Branch, provides policy, advice and guidance to support the continuous improvement of DE&S acquisition based safety and environmental protection issues. The QSEP Branch may undertake audits of the DE&S Operating Centres.

Defence Safety Authority (DSA) Audit

15. The DOSR will undertake risk based audits of systems as directed by DSA-DOSR-TL. An audit programme is proposed by the DSA-DOSR-Assurance-ATL and endorsed by DSA-DOSR-TL at the beginning of each reporting year and may include audits at Top Level Budget (TLB) level, or at other organisational levels.

16. Audits at 2 Star Level within the DE&S Operating Centre will be conducted in accordance with the DOSR Safety Audit Manual sponsored by DSA-DOSR-TL. It should be noted that DOSR auditors may also be involved in audits under the authority of other DSA Regulators e.g., Defence Maritime Regulator (DMR) or the MAA.

17. Reporting to the DOSR TL. The DSA-DOSR-Assurance-ATL and DSA-DOSR-PRG-ATL will prepare an Audit Report, which is included in the Assurance Report to the DOSR-TL, containing details of:

   a. OME Systems and Safety Management activities e.g. Incident Reporting, audited during the report year.
   b. Summary of audit results.
   c. An analysis of the deficiencies found and remedial action to be taken to address trends.
   d. An assurance statement on the effectiveness of OME safety management.
   e. Any lessons learned.
Audit Process

18. The process for conducting an audit, either internally or externally, should be based on the following steps:

a. The publication of an audit programme and notification to the auditee of the intention to carry out an audit. The auditor will ensure that personnel involved are notified in good time.

b. Issue of the audit questionnaire to the auditee in sufficient time to allow the questionnaire to be completed (citing evidence) and returned to the auditor prior to the audit.

c. On receipt of the completed questionnaire, the auditor will arrange a suitable date for the audit.

d. During the audit the auditor will meet the key personnel and progress through the questionnaire in a logical order, entering any comments as supplied.

e. Following completion of the audit the auditor will discuss his or her findings with the auditee; this may identify a number of rectification actions. Where opportunities for improvement have been identified these will be discussed with the auditee and agreed.

f. The auditor will draft an audit report recording observations made, degree of compliance and, if applicable, agreed areas of improvement. In addition, any rectification actions will be recorded. The report will be issued to the auditee and should be jointly signed by both parties as a record of the work and actions agreed.

g. Follow-up audits may be required to monitor the progress of recommendations made for improvement, or rectification actions. On completion of the follow-up audit, the auditor will send a follow up audit report to the auditee for agreement and signature.