



Ministry  
of Defence

# **JSP 375**

## **Management of Health & Safety in Defence**

### **Volume 2 - Audit**

# Contents

<b>Chapter 1 - HS&amp;EP Assurance in Defence.....</b>	<b>1</b>
<b>Chapter 2 - Audit Process .....</b>	<b>2</b>
<b>Chapter 3 - Functional Audits .....</b>	<b>8</b>
<b>Chapter 4 - Linking HS&amp;EP System Requirements and Management Arrangements .....</b>	<b>10</b>
<b>Chapter 5 - Guidance on HS&amp;EP System Requirements .....</b>	<b>11</b>
<b>Annex A - Example Letter to the Senior Officer / Chief Executive .....</b>	<b>A-1</b>
<b>Annex B - HS&amp;EP System Audit – Rating Evaluation .....</b>	<b>B-1</b>
<b>Annex C - Specific System Requirements .....</b>	<b>C-1</b>

# 1 HS&EP Assurance in Defence

## Introduction

1. Responsibility for management of health, safety and environmental protection (HS&EP) is derived from the Secretary of State for Defence's (SofS) Policy Statement. The amplification of the Statement is contained in Defence Policy for Health, Safety and Environmental Protection that sets out the general Organisation and Arrangements (O&A) for Defence to manage HS&EP. The minimum necessary management arrangements for occupational health and safety (H&S) are laid out JSP 375 and the minimum necessary management arrangements for environmental protection are laid out in JSP 418. Defence requires that Commanding Officers (CO) and managers are to conduct assurance of their management arrangements including monitoring and review of governance, audit and inspection as part of their self-assurance (first-party management arrangements) in order to measure, correct, improve and provide evidence about HS&EP performance.
2. The evidence acquired from the second-party assurance processes within a Top Level Budget Holder (TLB) or Enabling Organisation (EO) should principally be used to ensure compliance and enable continual improvement. Suitably summarised, it will support departmental HS&EP performance reporting.
3. Separately, and in addition to self-assurance by TLB / EO, independent third-party reviews (including audit or any other form of evaluation as appropriate) are conducted of the HS&EP management arrangements of organisations against the requirements of the SofS Policy Statement and subordinate pan-MOD HS&EP policy. Such reviews may also be benchmarked directly against Statutory or Defence Regulatory requirements. These reviews provide an independent assessment for the organisation and support Defence in collating departmental reports to the most senior levels and in preparing the Annual Assurance Report.

## Purpose

4. The purpose of this volume of JSP 375 is to provide guidance for HS&EP audit by TLBs, EOs and subordinate organisations. The guidance is applicable for 1<sup>st</sup>, 2<sup>nd</sup> or 3<sup>rd</sup> Party Assurance where the 'Party' describes the degree of separation between auditee and auditor<sup>1</sup>. For example: 3<sup>rd</sup> party assurance audits of any organisation by an external auditor; 2<sup>nd</sup> party assurance audits by an organisation of their own HS&EP management systems at a subordinate level; and as a basis for 1<sup>st</sup> party internal audits by an organisation on their own HS&EP systems. However, organisations have the freedom to use other audit methodologies appropriate to their business and activities that deliver the assurance requirements of Defence. As such, TLBs should compile evidence of compliance with those HS&EP management arrangements specified in pan-MOD HS&EP policy such as self-assurance and incident management. The link between this volume and provision of evidence to support TLB performance reporting is further explored in Chapter 4.

---

<sup>1</sup> MOD follows the definitions in Annex L standard ISOs: for example; ISO 45001 Occupational health and safety management systems – Requirements with guidance for use.

# 2 Audit Process

## Overview

1. An audit process should be based on the system requirements contained in documents and standards including; ISO45001, ISO14001<sup>2</sup>, HSG 65<sup>3</sup>, Defence policy, and provide evidence to inform Defence Key Performance Indicators (KPIs).
2. The role of HS&EP auditors often includes an element of consultancy and post audit support, and the deliverables from the audit process include both formal debriefs to HS&EP policy areas and the communication of best practice across the department. The key activities and roles to consider include: ensuring the activity does not compromise the independence or objectivity of the audit function; the evidence and sample size necessary to support any finding; and whether any finding is likely to improve the organisation's risk management, control and governance processes. Modern audits should endeavour to identify good practices as well as non-conformances.
3. The HS&EP audit process is illustrated in Figure 1.

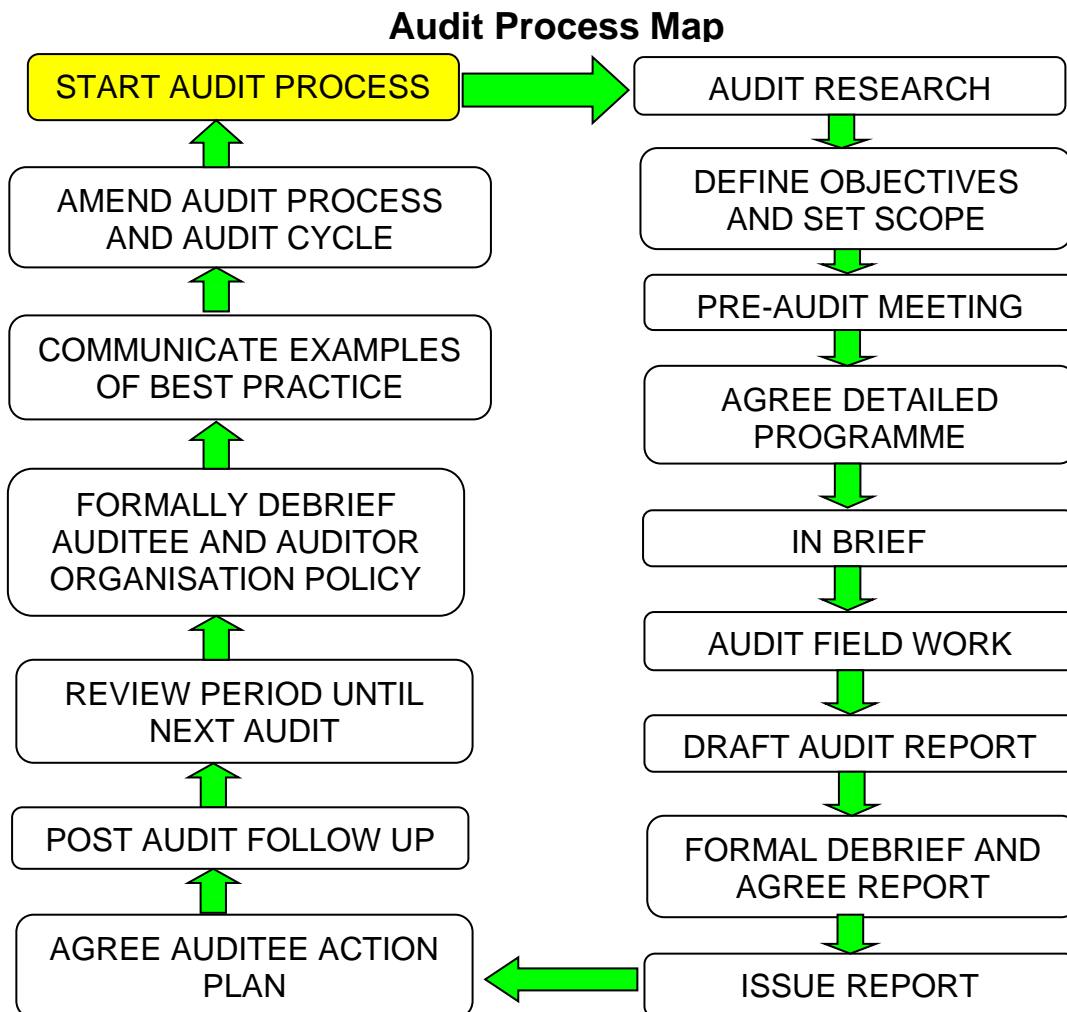


Figure 1

<sup>2</sup> BS EN ISO 14001 - Environmental Management Systems – Specifications with Guidance for Use.

<sup>3</sup> HSG65 - Successful Health and Safety Management.

## Engagement planning

4. An annual audit programme of 3<sup>rd</sup> party assurance audits of TLBs and EOs, is submitted by the DSA to the DSEC for ratification and publication by the end of the preceding December. Further audits may be added to the programme throughout the audit cycle in response to Service Inquiries, Incidents, HSE / Environment Agency / SEPA intervention. The DSA conducts other forms of risk-based assurance including inspection, document review and permissioning roles which may also inform this governance.
5. Prior to undertaking any audit, clear Terms of Reference are to be developed and promulgated to the organisation subject to the audit. These should include: citing the audit authority, audit scope and audit method, resources, timescales, outputs (normally a formal report), brief / debrief details, and sites to be visited.
6. Approximately three months before the programmed audit start date, the nominated Audit Team Leader (ATL) should contact the organisation to be audited to confirm audit dates. They should produce a letter (example at Annex A) to formally notify the Head of the Organisation of the intention to conduct the audit, the identified scope and its proposed start date.

## Audit research

7. An HS&EP management system audit requires a detailed understanding of both the standard / policy under examination and the methods or processes used by the auditee to meet that standard or policy. Effective assurance by audit thus requires effort ahead of the field work, including review of documents and records applicable to the identified scope and thereby deliver focussed interaction during that field work. Audit threads may expand the initial scope by following where the evidence leads. This is likely to also draw upon any corporate knowledge that the auditee may hold including findings of previous audits. A non-exhaustive list of the information sources which should be used in the pre-audit research is below:
  - a. Organisation and Arrangements Statement, including who is responsible and accountable and how this is communicated to staff.
  - b. HS&EP Management System documentation.
  - c. HS&EP assurance reports undertaken by internal or external bodies, including actions taken to close out recommendations.
  - d. impact assessments of any Suitably Qualified & Experienced Personnel (SQEP), SQEP shortfalls, and planned mitigation measures.
  - e. documentation from Boards or Committees set up to monitor / manage HS&EP issues.
  - f. details of enforcement action (internal or external) and action taken as a result.
  - g. incident data, including fatalities, injuries and lessons learnt.
  - h. HS&EP assurance and improvement plans. Risk control development plans.
  - i. annual HS&EP reports.

- j. risk registers for HS&EP.
- k. relevant agreements with other TLBs / EOs / Organisations on HS&EP issues.

## **Pre-audit meeting**

8. For most HS&EP audits, approximately three months before the audit commencement the ATL should arrange for an initial visit to take place. An exception to this arrangement would apply either when the Team Leader is sufficiently familiar with the organisation to be audited, or when the travel time / costs would mean that the visit would not be viable. In such a case planning for the audit should be made by correspondence and telephone conversations.
9. The purpose of the initial visit is:
- a. for the ATL to meet the point of contact within the Organisation's HS&EP team and may include anyone from the TLB Holder / Chief Executive's outer offices and the head of the TLB Safety Centre, to the Establishment HS&EP Adviser / Officer, and TU representatives as appropriate. This should provide the audit team with an understanding of the organisation's size, role, location etc.
  - b. to agree the scope and intended outcomes of the audit.
  - c. to explain the method, purpose, and practice of the audit and the documentation required for review.
  - d. to agree an outline programme of dates, including a date for the ATL to call on the Head of the Unit / Organisation for a brief at the commencement of the audit. The outline programme should define areas to be visited and the personnel to be interviewed in the course of the audit, noting that the onus for arranging the programme for the audit rests with the organisation to be audited.
  - e. to meet focal points. Auditors normally require to be escorted for all their visits and for any tours they conduct. This is necessary to ensure both their safety and to make the greatest use of limited time by leading the way and making introductions to the personnel responsible for the areas they are visiting.
  - f. to discuss any specific HS&EP risks which will be investigated in further detail during the audit.

## **In-brief**

10. The ATL accompanied by the audit team should conduct an opening brief with the Head of the Organisation or empowered representative. The briefing should include the following:
- a. a brief summary of the scope, method, purpose, and practice of the audit.
  - b. discussion of the audit programme covering the areas to be visited.
  - c. an invitation to the Senior Officer / Executive to identify areas of concern, specific risks that need to be addressed, or good practices to be reviewed.

- d. a description of the debrief procedure at the end of the audit and the Audit Report format and contents.
- e. the option for a 'hot debrief' to be given to the Organisation's HS&EP Adviser and the Head of the Organisation as agreed at the end of the fieldwork phase.

## **Evaluation of management system requirements**

11. Audits completed using the methodology in this volume should include an evaluation against the HS&EP requirements of policy, legislation and applicable Defence regulation requirements as well as an assessment of the organisation's performance.
12. There may be occasions when it will be inappropriate for the evaluation to be completed, e.g. when a HS&EP management system is incomplete or under major change. In such cases the ATL should provide assistance to the development through a gap analysis and by making their services available for consultancy as required. Where an ATL is a Regulatory Inspector or appointed as an independent third party for services such as system certification their evaluation will be guided by an enforcement management model or certification criteria, as required. Note: an incomplete or draft system would constitute a finding likely to require urgent action in order that the organisation can comply with MOD policy.
13. HS&EP management systems can be evaluated using a set of system requirements such as those in Annex B. These system requirements are fully supported by detailed guidance notes produced in Chapter 4.
14. Auditors should complete the evaluation through a combination of interviews, review of documentation and site / process surveys. Interviewees should be selected based on the requirements of the scope being audited. For example, all staff could provide evidence of the effectiveness of the system to ensure adequate HS&EP training, whereas evidence of management reviews may be taken from minutes of meetings. It is unlikely that one representative will be able to provide evidence of all HS&EP system requirements.
15. Auditors shall keep a record of the evidence used for the evaluation noting details which decided the level of assurance; these should be recorded with the audit working papers at least until the next audit of that organisation.

## **Audit verification - evidence from site visits**

16. The results gathered at the HS&EP Rating Evaluation stage (Annex B) provide an indication of how the organisation's system has been designed to function and if it is compliant with standards / policy as applicable to the scope. The next phase of an audit is to verify firstly that the systems are in use and secondly that in operation the management system is effective. It is therefore usual that auditors conduct a sites visits verification procedure in order to confirm the standards being achieved.
17. NOTE: When visiting sites as part of an audit, the CO or HoE may request feedback on their HS&EP performance. Whilst any immediate findings should be provided, it should be made clear that, in most cases, the audit scope is wider than the specific site, which is being used as part of the verification and evidence gathering process. It therefore may not be appropriate to share findings at this stage and the auditee sponsor should be consulted before sharing.

18. Auditors are to keep a record of their observations during the verification phase. These shall be retained with the audit working papers at least until the next audit of that organisation.

## **Draft report**

19. On completion of the audit fieldwork, a draft of the Audit Report should be completed within two working weeks. The ATL should forward the draft to the appropriate senior management representative or sponsor of the organisation under audit for fact checking, the report's findings, being evidenced and within scope should not be a matter for negotiation.

20. Production of the Audit Report is the responsibility of the ATL. Each completed report should include the following elements:

- a. an Executive Summary.
- b. narratives addressing each of the within scope main system requirements headings, with observations and recommended corrective action.
- c. audit conclusions.
- d. a recommendation that the Audit Recommendations should form the basis of an Action Plan to be drawn up by the organisation subject to audit.
- e. annexes which could include Terms of Reference for the audit, the audit findings, a list of the organisations / places visited, a list of documents reviewed, progress made against recommendations from the previous audit, and any further evidence supporting the overall audit conclusions; this may include an evaluation of the organisation's performance against pre-determined standards, through the perspective of audit evidence for example: the completed Rating Evaluation (Annex B).

## **Issue report and debrief**

21. Formal approval for issue of the Audit Report to the organisation under audit should be made by the auditing authority.

22. Whenever practicable, before releasing the Audit Report a formal debrief to the Senior Officer / Chief Executive of the audited organisation should be conducted by the ATL.

## **Follow-up actions**

23. Following the formal debrief, the organisation should be requested to produce an Action Plan based on the audit recommendations and observations. The priority and resources allocated to the Action Plan are the prerogative of individual budget holders. A copy of the organisation's Action Plan should be sent to the ATL in order that they can review if the Action Plan adequately covers the recommendations and observations raised in the audit report. If these are not considered to be acceptable then the ATL should contact the organisation under audit in order to agree an acceptable course of action.

24. A follow-up visit should be agreed, usually in six to nine months following the formal debrief, unless defined in the audit standard used. At the agreed time the ATL should revisit the organisation to review implementation and progress against the agreed Action



Plan. The revisit should concentrate solely on issues raised within the audit report and should, where appropriate, include visiting the Head of the Organisation to discuss progress.

25. A post visit letter should be drafted by the ATL to formally close the audit process. The letter should typically record:

- a. the progress made against the action plan; and
- b. the timing for the next review of actions or audit based on hazard profile and HS&EP management performance.

26. An update on issues raised during the audit, particularly any problems with policy implementation should be fed back into TLB / EO Leads for HS&EP and to the MoD's Director HS&EP if appropriate, to ensure any necessary policy / procedural changes can be recommended to the policy / procedure owners.

### **Communication of Good Practice**

27. Following each audit consideration should be made by both the auditor and auditee organisations to publish particularly effective and / or innovative HS&EP management solutions encountered. The sharing of lessons learned from failings and also of good practice is considered an integral part of adding value to an organisation through the audit process. Promulgation should retain the anonymity of the organisation where possible.

### 3 Functional Audits

1. Functional audits are aimed at examining a discrete subject area within HS&EP management. They may be undertaken for a variety of reasons including:

- a. issues identified at a current or previous audit;
- b. new regulations;
- c. focus on issues identified by Regulatory and Statutory Bodies;
- d. compliance with specific regulations;
- e. informed by reactive assessment of accident statistics or by proactive risk analysis or assessment of the impact of issues identified through own or external organisations' reporting processes;
- f. following enforcement action; or
- g. recommendation of a Service Inquiry.

2. While third party MOD wide functional audits may be conducted in relevant areas, TLBs / EOs are encouraged and expected to also conduct functional audits within their own organisations. In order to achieve the best value from all audits and to support an audit tempo proportionate to risk, without duplication, DHS&EP should be informed of any proposed functional audits to be conducted by an organisation.

3. Because functional audits are intended to examine a specific subject, separate Terms of Reference (TOR) should to be defined and agreed for each functional audit undertaken. Other forms of assurance available that may supply evidence, should be identified. The TOR should include the objectives and the scope of the audit. Consideration should be given to including specialist(s) in the functional audit subject area within the audit team.

4. Reporting arrangements for functional audits should be agreed at the start of the audit and incorporated into the TOR.

5. An example of a pro-forma for the TOR / audit objectives for functional audits is produced below; alternatively, a functional audit TOR may take the form of a narrative which makes use of the audit aspects as sub headings.

## Functional Audit Terms of Reference / Audit Objectives proforma

	AUDIT ASPECT	AUDIT DETAILS
a	Subject of the audit.	
b	Scope of the audit.	
c	Aims of the audit.	
d	Objective of the audit.	
e	Specific issues to be covered.	
f	Special factors / additional information.	
g	Audit protocol.	
h	Authority for audit.	
i	Report addressee.	
j	Audit timing, duration and manpower content.	
k	Report date.	

# 4 Linking HS&EP System Requirements and Management Arrangements

## Introduction

1. Organisations need to demonstrate how their Safety and Environmental Management Systems (SEMS) meet the requirements of the Secretary of State's Policy Statement, and links with the specified elements of HS&EP Management Arrangements and HS&EP Performance Assessment Levels applicable to a TLB / EO business and to the expectations of applicable statute and regulation.
2. Where appropriate, TLBs may use the Rating Evaluation system at Annex B to assess their level of performance against eleven elements. The Table cross-refers these elements to specific system requirements in Annex C. An explanation of the eleven elements and expected performance levels can be found in Defence Policy for Health, Safety and Environmental Protection. In delivering this evaluation, it should be recognised that there is often no direct read across from one element to another. At best, there will be a reasonable degree of commonality (for example under d. Personnel competence and training), but in one or two areas (for example under a. Applicable legislation) the link is dependent on the O&A and areas of responsibility.
3. Auditors will need to adopt a degree of common sense and judgement when measuring the outcomes of audits using this JSP 375 methodology to provide scores for the eleven elements. Other Performance Indicators and assessment methods are available and may be appropriate for a particular context. An organisation should endeavour to record the means of their assessment particular to their own O&A in order that equivalence across multiple assessments may be maintained.

# 5 Guidance on HS&EP System Requirements

## Introduction

1. This guidance is for auditors to aid their approach to audit in conjunction with the specific details above. There is no intention to prescribe the use of this or other audit methods. However, organisations are required to demonstrate compliance with Statutory and MOD requirements. It is thus important that, whatever method is used, there is adequate evidence available to support the self-assurance assessment.

## Approach to systems audit

2. The objective of audit is to seek evidence of:
  - a. clear leadership direction on implementation of policy and standards and clarity on the requirements from Statutory bodies or superior organisations;
  - b. consistent implementation of Statutory and MOD mandatory management requirements;
  - c. a clearly defined and structured system for performance measurement; and
  - d. examples of Good Practice as well as areas of fragility or even failure.
3. Auditing should be used to verify:
  - a. the adequacy of management systems and arrangements to ensure compliance with Statutory and MOD mandatory requirements, including agility and resilience;
  - b. that adequate risk control systems exist, are implemented and are consistent with the hazard and risk profile of the organisation, including the appetite for risk;
  - c. that appropriate workplace precautions are in place; and
  - d. that the management system remains effective, particularly through periods of organisational change.

## Summary guidance for lines of inquiry to verify effectiveness of HS&EP management systems

4. The following lines of enquiry are offered for guidance. In pursuing them it is important to cross refer to the HS&EP Management System Rating Evaluation.

## Policy

5. HS&EP organisation and arrangements statements should conform to the Secretary of State's policy statement. The auditor should expect it to show:
  - a. how it will be managed and by whom, include committee structure;
  - b. its applicability to all staff, activities within the organisation and locations;

- c. compliance with relevant Acts, regulations and MOD standards;
- d. how resources are provided as required;
- e. expectation of risk tolerance, escalation and performance reported into annual and other reports;
- f. Letters of Delegation to senior staff setting out what is required of them;
- g. arrangements for dissemination of statements and periodic review; and
- h. contributions to and maintenance of top-8 risks within a TLB and their expression in the bow-tie reports required by DSEC.

## **Planning**

- 6. HS&EP Plan - how it is generated, communicated and used by all levels in the organisation.
- 7. HS&EP management strategy – identification of the key objectives, how they will be implemented, to what standard and by whom.

## **Implementation and operation**

### **Structure and responsibility**

- 8. Evidence of how the auditees at different levels have organised their management structure to ensure HS&EP management is consistently implemented across their areas.
- 9. Organisation charts identifying line management and functional responsibilities and authority.
- 10. Terms of Reference, which define HS&EP management responsibilities, for line managers and those with specific responsibilities in the HS&EP management system.
- 11. HS&EP Standing Orders - how these requirements are cascaded down below HLBs or equivalent.
- 12. Service Level Agreements for HS&EP services to be provided by others: definition of those services; to whom they are provided; standard of service to be provided and arrangements for monitoring / reviewing effectiveness of the service.

### **Training awareness and competence**

- 13. Evidence of the implementation of the strategy through identification of training requirements, training plans and profiles, evaluating the training.

### **Communication**

- 14. HS&EP committee and management board arrangements: their role, constitution and TOR, copies of meeting minutes, evidence that they play a proactive and reactive part in the management of safety. Do they monitor achievement of HS&EP objectives and plans, and inform and direct HS&EP policy for their area?

15. Planning and setting up procedures for the management of contractors ('4Cs' system).
16. Use of HS&EP management information to aid planning and prioritisation of HS&EP management objectives.

### **Management system documentation**

17. Identification of the key requirements across the totality of the HS&EP management system and evidence that there is consistent implementation to meet statutory / MOD mandatory requirements.
18. Specific evidence of Safe Systems of Work derived from structured and systematic hazard analysis, risk assessment and management controls, training, monitoring and review of assessments considering changing circumstances.

### **Emergency preparedness and response**

19. Accident and emergency response arrangements (JSP 375, Vol 1.Chapter 1).
20. Under the MACR Regulations verify that Safety Reports (SR) are being prepared for Upper Tier Sites and Major Accident Prevention Policies for Lower Tier sites.
21. Under Nuclear Regulations, to verify that Safety Case Reports (SCR) remain valid and risk controls are exercised, in accordance with JSP 471.

### **Checking and corrective action**

#### **Monitoring and measuring performance**

22. Evidence of systematic workplace inspection programmes and procedures, action plans and follow-up actions to ensure remedial action is completed and target necessary resourcing and training needs.
23. Evidence that results of performance monitoring and measurement is reported to and monitored by the appropriate level of management, both in the organisation being audited and by the "parent" organisation.
24. Use of audits, annual reports and accident / incident data etc to measure performance across the organisation, set objectives for the future and aid resource targeting and prioritisation.
25. Means of escalation of issues and findings.

#### **Audit**

26. Evidence of structured HS&EP management audit procedures, audit training and programmes, effective reporting procedures, action plans and follow-up action to ensure remedial action.

### **Management review**

27. Arrangements for review of key safety documentation to ensure its continued applicability.

28. Review of requirements of HS&EP Action Plans at least annually.
29. Formal review of HS&EP performance with results formally reported in the Annual HS&EP Report.
30. Evidence of a 'closed loop' reporting and action plan system throughout the management chain. As a minimum this should show compliance with each Volume of this JSP 375 , which provides guidance in accordance with the policy set out in this JSP and Defence Policy for Health, Safety and Environmental Protection. Evidence of policy-compliant business practices should be collated.

## **Bibliography**

31. Code of Practice for Independent Safety Assessors (ISA) - IET, SaRS, BCS, IMechE.
32. IOSH Code of Conduct.
33. IOSH Setting Standards in Health & Safety Advice - A Guide.
34. ISO 19011 - Guidelines for Auditing Management Systems.
35. ISO 17000 - Conformity Assessment.
36. Position Statement - The Institute of Internal Auditors - The Role of Internal Audit in Enterprise-wide Risk Management - Revised 2009.
37. Process Safety Performance Indicators and PSM Audit Programmes (IChemE).
38. The CQI and IRCA Professional Code of Conduct.



## EXAMPLE LETTER TO THE SENIOR OFFICER / CHIEF EXECUTIVE

### **Audit of Health, Safety & Environmental Protection Management Systems within [Insert Organisation]**

In accordance with the overall audit programme required / agreed by [insert authority], I am proposing that an audit of [insert organisation] be undertaken during [insert date]. Initial contact and discussions with [poc] have indicated that this is viable.

The object of the audit is to assess compliance with the TLBs Health, Safety, and Environmental Protection Management System, in accordance with [standard or reference].

The audit team will be led by [insert Name] assisted by [insert Name(s)]. Arrangements should be made for the team to brief [insert Name], in order that they can explain the audit process used to assess compliance.

Following normal practice, the audit will be organised through [insert details of organisation's HS&EP Representative] and it would be helpful if you would give your authority for them to make available all relevant documentation and to organise any visits that the auditors require.

Where appropriate, contact should also be made for the auditors to meet a nominated Safety Representative from your Trade Union side, in order to explain the purpose of the audit.

Where appropriate good practices and non-conformances will be brought to your attention in the final report.

I hope you will find the audit useful in helping you to meet your management goals. Please do not hesitate to contact me if you have any queries.

## HEALTH SAFETY AND ENVIRONMENTAL PROTECTION SYSTEM AUDIT – RATING EVALUATION

<b>ORGANISATION:</b>	<b>LEAD AUDITOR:</b>
<b>INTERVIEWEE(S):</b>	<b>SIGNATURE:</b>
<b>RATING:</b>	<b>DATE:</b>

This Rating Evaluation is one of many systems that may be used to provide an assessment of performance together with a measure of compliance with current legislation and MOD policies. The Rating System conforms, as far as possible, with the subject headings and evidence required of Annex A to Chapter 4 and in Defence Policy for Health, Safety and Environmental.

Further guidance for verifying the System Requirements detailed in the Rating Evaluation is provided in Chapter 5. Assessment of organisational change using these systems requirements is in Defence Policy for Health, Safety and Environmental.

Throughout the Rating Evaluation where the Head of the Organisation is referred to, they may be the TLB / HLB / BLB Holder, CEO of an EO, Duty Holder or in a similar position of authority.

Where a System Requirement is not applicable to the organisation it is to be deleted and the total possible Rating score reduced by 5 for the Section containing the System Requirement.

### System Requirement Ratings

0 - Applies to a MAJOR Non-conformity of the System Requirement which has not been considered or where no control action has been taken.

2 - Applies to a SIGNIFICANT Non-conformity where, either procedures for action have been developed but implementation of the System Requirement is poor in a number of areas, or the procedures are not effective.

4 - Applies to a MINOR Non-conformity where procedures exist across the majority of areas which have been implemented and work well, however, there remain areas where there has been a failure to fully implement the requirements. This category does not include sufficient evidence to record a MAJOR or SIGNIFICANT Non-conformity.

5 - Applies where a FULLY EFFECTIVE system exists in all areas.

## 1. Applicable legislation, Defence regulations, policy and guidance

Elements of HS&EP management arrangements	Rating	Evidence of process and/or implementation
<p><b>1.1 Applicable legislation, Defence regulations, policy and guidance - Annex C (a) of this volume.</b></p> <p><u>System requirement</u></p> <p><i>Covering knowledge of legislation, Defence regulations, policy and guidance relevant to the activities conducted and application of this knowledge to management arrangements, procedures and activities (Including Derogations, Exemptions and Disapplications (DEDs)). It also covers maintenance of that knowledge and arrangements to track and influence emerging legislation, Defence regulations, policy and guidance.</i></p> <p><i>Arrangements are to be in place to ensure that relevant documentation and information is effectively communicated to the Organisation's employees and others who may need to know.</i></p>		
<p>1.1.1 To what extent have effective procedures been established within the organisation for receiving, documenting, retaining and responding to relevant HS&amp;EP communications from bodies <b>external</b> to the organisation (e.g. HSE, other statutory Regulator, SEPA, DSA)?</p>		
<p>1.1.2 To what extent does the organisation have proportionate documentation in place that describes the core elements of the HS&amp;EP Management System and any interaction with, or direction to, related documentation?</p>		
<p>1.1.3 How well does the organisation ensure that documentation essential for the management and interaction of all sections of the HS&amp;EP system is maintained and controlled and refers to related relevant documentation?</p>		

1.1.4 To what extent are arrangements in place to ensure that documentation required for legal and / or compliance reasons is identified and retained in accordance with legislation and MOD policy?		
1.1.5 What arrangements have been made to ensure that, where applicable, formal and agreed arrangements for HS&EP management are made between Parent and Lodger Units (MoU / MoA?) resident within the organisation's sites?		
<b>Sub Total:</b>		

## 2. Information management

Elements of HS&EP management arrangements	Rating	Evidence of process and / or implementation
<p><b>2.1 Information management - Annex C (b) of this volume.</b></p> <p><u>System requirement</u></p> <p><i>This element covers the arrangements to generate and promulgate HS&amp;EP information to those who need it (e.g. workforce, visitors, public, emergency services), the derivation of requirements for records (e.g. for personnel on operations), the arrangements to make and keep such records and the quality control of all information (e.g. risk assessments, procedures) held in whatever media.</i></p>		
<p>2.1.1 The organisation has established and maintained an effective system of documentation control, promulgation and management of the HS&amp;EP management system in hard copy or electronic format. This must comply with MOD policy and DPA 2018.</p>		
<p>2.1.2 The organisation has an effective system of documentation archive of the HS&amp;EP management system in hard copy or electronic format. This must comply with MOD policy, statute, GDPR and DPA 2018</p>		
<p style="text-align: right;"><b>Sub Total:</b></p>		

### 3. Organisational leadership, culture, capability and change management

Elements of HS&EP management arrangements	Rating	Evidence of process and / or implementation
<p><b>3.1 Organisational leadership, culture, capability and change management</b> - Annex C (c) of this volume.</p> <p><u>System requirement</u></p> <p><i>This element covers leadership behaviours and HS&amp;EP culture expected in the organisation, the derivation of capabilities and resources (human, financial and material) required for the organisation to conduct its activities safely (including the interfaces between the organisation and others with which it works) and the arrangements to maintain these.</i></p> <p><i>A HS&amp;EP Statement is to be prepared that outlines the organisation and arrangements (O&amp;A) appropriate to the nature, scale and impacts of the organisation's activities (including products and services as appropriate) and is linked to the SofS Policy.</i></p> <p><i>It also covers the assessment of proposed organisational or resource changes and control of the implementation of agreed changes.</i></p>		
<p>3.1.1 A HS&amp;EP Statement of Intent is to be prepared that outlines the organisation and arrangements (O&amp;A) appropriate to the nature, scale and impacts of the organisation's activities (including products and services as appropriate) and is linked to the SofS Policy, applicable legislation, MOD policy and guidance.</p> <p>How well does each Statement reflect personal commitment of the Head of the Organisation, and the principles for a Statement of Intent, O&amp;A?</p>		
<p>3.1.2 Senior Management take appropriate and proportionate action, in support of the O&amp;A statement, to demonstrate their leadership and commitment to HS&amp;EP.</p>		

3.1.3 How well does the Head of the Organisation ensure that adequate and proportionate resources are provided for managers at every level to enable them to meet the targets set by senior management?		
<b>Sub Total:</b>		

#### 4. Personnel competence and training

Elements of HS&EP management arrangements	Rating	Evidence of process and / or implementation
<p><b>4.1 Personnel competence and training</b> - Annex C (d) of this volume.</p> <p><u>System requirement</u></p> <p><i>This element covers the derivation of competences for all roles having HS&amp;EP responsibilities in the organisation and the means of competence assessment and maintenance for those persons discharging such roles. It also covers the arrangements to train personnel to conduct activities safely.</i></p> <p><i>Arrangements are to be in place to ensure that all personnel receive appropriate HS&amp;EP training, including induction and refresher training.</i></p>		
<p>4.1.1 How well are personnel with specific, job-related HS&amp;EP duties (e.g. safety advisers, line managers) in the organisation, provided with appropriate training for their role and responsibilities?</p> <p>What arrangements are in place to identify HS&amp;EP training requirements at recruitment (induction) and in ongoing careers (Continuing Professional Development / refresher)?</p>		
<p>4.1.2 Arrangements are in place to ensure that all personnel receive appropriate HS&amp;EP training, including induction and refresher training?</p>		
<p style="text-align: right;"><b>Sub Total:</b></p>		



## 5. Risk assessments and Safety Cases

Elements of HS&EP management arrangements	Rating	Evidence of process and / or implementation
<p><b>5.1 Risk assessments and Safety Cases</b> - Annex C (e) of this volume.</p> <p><u>System requirement</u></p> <p><i>This element covers the arrangements to conduct risk assessments and (as necessary) produce, document and maintain safety cases (see Chapter 5 paras 8 – 10) for the activity to be conducted. It also covers arrangements (as necessary) for peer review.</i></p> <p><i>Arrangements are to be in place to ensure that all workplace and site hazards have been identified and recorded, together with assessments of the associated risks and / or environmental impacts.</i></p>		
<p>5.1.1 Arrangements are in place to ensure that all workplace and site hazards have been identified and recorded, together with assessments of the associated risks and / or environmental impacts (including sustainability appraisals).</p>		
<p>5.1.2 How effective are the arrangements for ensuring that a structured process is used for hazard identification for:</p> <p>a) occupational health &amp; linked welfare.</p> <p>b) safety.</p> <p>c) environment.</p>	<p>a)</p> <p>b)</p> <p>c)</p>	
<p>5.1.3 How well does the organisation implement procedures for undertaking Site Risk Assessments?</p>		
<p style="text-align: right;"><b>Sub Total:</b></p>		

## 6. Equipment/materiel and infrastructure design and manufacture

Elements of HS&EP management arrangements	Rating	Evidence of process and / or implementation
<p><b>6.1 Equipment/materiel and infrastructure design and manufacture</b> - Annex C (f) of this volume.</p> <p><u>System requirement</u></p> <p><i>This element covers arrangements to influence the design of equipment / materiel and infrastructure used in conducting the activity, including interfaces with those involved in the design and (as appropriate) the standards to be adopted. It also covers involvement in the manufacture and commissioning of equipment / materiel and infrastructure prior to use, maintenance of knowledge about the design (e.g. its relevance to any safety case) and arrangements for design modification.</i></p> <p><i>Where relevant, how well does the organisation ensure that HS&amp;EP requirements are considered when procuring and / or providing goods and services?</i></p>		
<p>6.1.1 Are arrangements in place to ensure compliant HS&amp;EP, including sustainable development are considered when building / renovating infrastructure?</p>		
<p>6.1.2 How well does the organisation ensure that relevant HS&amp;EP requirements are considered when procuring and/or providing goods and services?</p>		
<p style="text-align: right;"><b>Sub Total:</b></p>		

## 7. Equipment / materiel and infrastructure maintenance

Elements of HS&EP management arrangements	Rating	Evidence of process and / or implementation
<p><b>7.1 Equipment / materiel and infrastructure maintenance</b> - Annex C (g) of this volume.</p> <p><u>System requirement</u></p> <p><i>This element covers the requirements to maintain the material state of the equipment / materiel and infrastructure, and the arrangements for conducting and verifying the necessary maintenance including safe systems of work, if the Commanding Officer's or manager's Organisation is to conduct the maintenance itself.</i></p>		
<p>7.1.1 Are arrangements in place to ensure equipment / materiel and infrastructure are maintained by the Regional Prime Contractor (RPC) taking account of HS&amp;EP requirements, including sustainable development and risks held by appropriate Heads of Establishment?</p>		
<p>7.1.2 Are arrangements in place to ensure equipment, systems, materiel and infrastructure are maintained taking account of HS&amp;EP requirements, including sustainable development when <b>not</b> carried out by an RPC, and risks held by appropriate Accountable Persons?</p>		
<p style="text-align: right;"><b>Sub Total:</b></p>		

## 8. Supervision and control of activities

Elements of HS&EP management arrangements	Rating	Evidence of process and / or implementation
<p><b>8.1 Supervision and control of activities</b> - Annex C (h) of this volume.</p> <p><u>System requirement</u></p> <p><i>This element covers the adoption of Safe Systems of Work (including the generation of procedures where appropriate, informed as necessary by any safety case) to control activities and arrangements for their application including supervision at all levels.</i></p> <p><i>How well does the organisation implement the policies and procedures for co-ordination, co-operation, communication and control (4Cs) of contractors, other visiting workers, and any other persons on their sites?</i></p> <p><i>Are regular and detailed HS&amp;EP Inspections of work activities and the workplace carried out and recorded by line managers and / or employee / Trade Union Safety Representatives?</i></p>		
<p>8.1.1 How proportionate is the organisational planning for management of HS&amp;EP risks i.e. are resources (staff levels, staff effort and risk mitigation) matched to the risks, rather than being evenly distributed across areas of high and low risk?</p>		
<p>8.1.2 To what extent is the HS&amp;EP Management Organisation clearly defined, key personnel identified and their duties and responsibilities for HS&amp;EP management defined, documented and published?</p>		
<p style="text-align: right;"><b>Sub Total:</b></p>		

## 9. Incident management and learning from experience

Elements of HS&EP management arrangements	Rating	Evidence of process and / or implementation
<p><b>9.1 Incident management and learning from experience</b> - Annex C (i) of this volume.</p> <p><u>System requirement</u></p> <p><i>This element covers the notification, recording, investigation and reporting of incidents (which includes, for example, near misses, abnormal occurrences, accidents). It also covers the generation and promulgation of lessons learnt from a Commanding Officer's or manager's own incidents or operational experience, the monitoring of trends and the assimilation into management arrangements of lessons from these and relevant incidents anywhere.</i></p> <p><i>Effective procedures are to be established for reporting / investigating accidents and initiating corrective and preventative action.</i></p>		
<p>9.1.1 To what extent does the organisation monitor and record accident / incident / near miss and occupational ill health records, to identify and analyse trends and take action where required?</p>		
<p>9.1.2 How well are significant shortcomings regarding HS&amp;EP management (including serious incidents) brought to the attention of the Head of the Organisation in a timely and effective manner? How will they communicate this information to all personnel?</p>		

<p>9.1.3. How effective are accident / incident investigation procedures in analysing and determining root causes and providing an effective vehicle to identify recommendations for preventing a recurrence?</p> <p>Do all line managers and other personnel who may require it, have suitable and sufficient training to investigate accidents/incidents?</p>		
<p>9.1.4 How effective are the Organisation's accident / incident reporting procedures in ensuring the reporting and recording of accidents and incidents (including RIDDOR and environmental incidents) with the appropriate Organisation (CESO etc)?</p>		
<p>9.1.5 To what extent have effective procedures been established within the Organisation for receiving, documenting, retaining and responding to relevant HS&amp;EP communications from bodies external to the Organisation (e.g. HSE, EA / SEPA, DSA)?</p>		
<p style="text-align: right;"><b>Sub Total:</b></p>		

## 10. Emergency arrangements

Elements of HS&EP management arrangements	Rating	Evidence of process and / or implementation
<p><b>10.1 Emergency arrangements</b> - Annex C (j) of this volume</p> <p><u>System requirement</u></p> <p><i>This element covers the response to emergencies (including accidents), the preparation for such response and appropriate rehearsal or exercising of such response.</i></p> <p><i>Procedures are to be established for managing foreseeable and potential emergencies and disasters.</i></p>		
<p>10.1.1 To what extent has the Head of the Organisation nominated key personnel and identified them in documented Emergency Control Procedures.</p>		
<p>10.1.2 How well are Emergency and Disaster Control Procedures periodically practiced, tested and recorded, in line with MOD policy / statutory requirements including, where appropriate, the involvement, of Local Authorities?</p>		
<p>10.1.3 To what extent has the Organisation put in place arrangements to review and revise, where necessary, its emergency response plans and procedures, following accidents or emergency situations, or as a result of shortfalls having been discovered?</p>		
<p>10.1.4 Are the policies and procedures for emergency arrangements promulgated appropriately including information being immediately available to civil emergency services when required?</p>		
<p style="text-align: right;"><b>Sub Total:</b></p>		

## 11. Self-assurance

Elements of HS&EP management arrangements	Rating	Evidence of process and / or implementation
<p><b>11.1 Self-assurance</b> - Annex C (k) of this volume.</p> <p><u>System requirement</u></p> <p><i>This element covers the way a Commanding Officer or manager gains confidence that the previous 10 elements are being conducted correctly and in accordance with the overall HS&amp;EP management arrangements. Unless provided for elsewhere in the management arrangements, it also covers internal governance, monitoring, review, quality assurance and advice more generally given (e.g. safety advisory committees).</i></p> <p><i>The organisation is to establish and maintain a regular programme for audits of the HS&amp;EP Management System. This is to ascertain that adequate risk control systems, which are consistent with the hazard profile of the organisation are in place and that all relevant statutory HS&amp;EP requirements are being adhered to.</i></p>		
<p>11.1.1 How well does the organisation monitor compliance with its HS&amp;EP targets and objectives at all levels? Does it have a SHEF committee, staffed at the correct level and lead by the Head of the organisation? How is this recorded/monitored?</p>		
<p>11.1.2 How well does the organisation ensure that actions, placed as a result of HS&amp;EP audits, inspections, or management meetings, are monitored to satisfactory completion?</p>		
<p>11.1.3 Are regular and detailed HS&amp;EP Inspections of work activities and the workplace carried out and recorded by line managers and / or employee / Trade Union Safety Representatives?</p>		



11.1.4 How effective are the organisation's procedures for ensuring that action is taken at the appropriate level to remedy any breaches of legislation or MOD policy?		
<b>Sub Total:</b>		

### HS&EP MANAGEMENT SYSTEM RATING

	Rating (0-5 per category)	
	Awarded	Possible
a. Applicable legislation, Defence regulations, policy & guidance		25
b. Information Management		10
c. Organisational leadership, culture, capability and change management.		15
d. Personnel competence and training		10
e. Risk Assessments and Safety Cases.		20
f. Equipment / materiel and infrastructure design and manufacture.		10
g. Equipment / materiel and infrastructure maintenance.		10
h. Supervision and control of activities		10
i. Incident management and learning from experience.		25
j. Emergency arrangements.		20
k. Self-assurance.		20
<b>TOTAL</b>		<b>180</b>
<b>OVERALL RATING</b>		<b>100%</b>

### RATING CATEGORIES

Rating Category	Comments
<p style="text-align: center;"><b>A</b> 90% - 100%</p>	<p>There is a sound system of control in place to meet overall system objectives. This is to be maintained and reviewed as necessary to reflect changes in legislation.</p>
<p style="text-align: center;"><b>B</b> 75% - 89%</p>	<p>Control systems found to be largely compliant. A small number of important lapses found or some 'fine tuning' across the board required. Concentrated action on specific problems required.</p>
<p style="text-align: center;"><b>C</b> 60% - 74%</p>	<p>The HS&amp;EP system is considered to be placed at risk due to significant inadequacies of control in a number of critical areas, or over a wide range of control procedures. Senior Management is required to prepare a prioritised HS&amp;EP Plan.</p>
<p style="text-align: center;"><b>D</b> Below 60%</p>	<p>Major deficiencies found over a broad range of areas indicating significant lack of control and leaving the system open to system failure. Senior Management need to direct that these deficiencies are rectified as soon as practically possible.</p>

### SPECIFIC SYSTEM REQUIREMENTS

Elements of HS&EP management arrangements	HS&EP performance assessment levels	Evidence to seek
		<p><b>References:</b></p> <p>Health and Safety at Work etc Act</p> <p>Management of Health and Safety at Work Regulations</p> <p>DSA01.1 Chapters</p> <p>JSP 375 Vol 1 Chapter 3</p> <p>JSP 375 Vol 1 Chapter 4</p> <p>JSP 375 Vol 1 Chapter 8</p> <p>JSP 375 Vol 1 Chapter 40</p> <p>JSP 418 Part 1 Chapter 3</p> <p>JSP 418 Part 1 Chapter 4</p> <p>JSP 418 Part 2 Leaflet 1</p>

<p>a. Applicable legislation, Defence regulations, (Including disapplication, exemptions or derogations (DEDs), policy and guidance</p>	<p>Level 4:          Arrangements are compliant.          This element covers knowledge of legislation, Defence regulations, policy and guidance relevant to the activities conducted and application of this knowledge to management arrangements, procedures and activities. It also covers maintenance of knowledge and arrangements to track and influence emerging legislation, Defence regulations, policy and guidance</p>	<p><b>System requirement</b></p> <p><i>Effective arrangements are to be in place to ensure that documentation essential for the management of the HS&amp;EP system is maintained.</i></p> <p>To what extent have effective procedures been established within the organisation for receiving, documenting, retaining and responding to relevant HS&amp;EP communications from bodies external to the organisation (e.g. HSE, EA / SEPA, DSA)?</p> <p>To what extent does the organisation have proportionate documentation in place that describes the core elements of the HS&amp;EP Management System and any interaction with, or direction to, related documentation?</p> <p>How well does the organisation ensure that documentation essential for the management and interaction of all sections of the HS&amp;EP system is maintained and controlled and refers to related relevant documentation?</p> <p>There is a need to determine not only that the organisation has formally documented appropriate HS&amp;EP arrangements, but that they are proportionate to its size, structure, role and the number and level of risk that its activities present. They should relate to both its own workforce and others who might be affected by its activities.</p> <p>Are any dis-applications, exemptions or derogations in place?</p> <p>To what extent are arrangements in place to ensure that documentation required for legal and / or compliance reasons is identified and retained in accordance with legislation and MOD policy?</p>
---	---	---

<p>b. Information Management</p>	<p>Level 4:</p> <p>Arrangements are compliant</p> <p>This element covers the arrangements to generate and promulgate HS&amp;EP information to those who need it (e.g. workforce, visitors, public, emergency services), the derivation of requirements for records (e.g. for personnel on operations), the arrangements to make and keep such records and the quality control of all information (e.g. risk assessments, procedures) held in whatever media.</p>	<p><b>System requirement</b></p> <p><i>Arrangements are to be in place to ensure that relevant documentation and information is effectively communicated to the organisation's employees and others who may need to know.</i></p> <p>Management arrangements should be examined to establish how documentation essential to ensure all areas of the business can operate together and that it remains appropriate to the organisations activities. Auditors need to be confident regarding the degree to which such arrangements can cater for changes in HS&amp;EP requirements and / or Regulatory requirements.</p> <p>Documentation may be produced and retained at different levels, e.g. Corporate Strategy / Management Board level, operating / working level, or that involving the interaction with external bodies.</p> <p>Auditors should look for evidence that the organisation has effective arrangements in place for receiving, collating and retaining information and for ensuring any correspondence from external bodies is forwarded to the member of staff charged with managing that aspect of the organisation's business. Other related documentation and replies should also be retained for future reference, following statutory protocols where appropriate.</p> <p>For safety and environmental management systems and arrangements to work effectively it is necessary that all staff are aware of their individual and collective responsibilities. During the audit this aspect can be tested by observing whether there is evidence of safety and environment information and requirements being promulgated and by talking to members of staff to ascertain how much they know.</p>
----------------------------------	--	---

		<p>Evidence should be available to show how essential HS&amp;EP documentation necessary for meeting regulatory requirements is identified and retained, together with arrangements for ensuring that it remains relevant and is kept up to date. This may provide details of links to other MOD departments and / or Regulatory authorities.</p> <p>Specific evidence of Safe Systems of Work derived from structured and systematic hazard analysis, risk assessment and management controls, monitoring and review of assessments should be maintained.</p> <p>Specific means of communication include HS&amp;EP Notice Boards and internet / intranet sites, which enable minutes of HS&amp;EP meetings, details of inspections, regular safety and environment information updates, names and contact details of safety and environment advisers etc to be read by members of staff. This might also include details relating to the role of management board and HS&amp;EP committee, their TOR and constitution, and evidence that they take an active role in the management of safety and EP, or the arrangements for forthcoming events such as events open to the public - air shows / open days etc.</p> <p>It is important that the organisation employs effective procedures for managing its communications with external parties. This will include both MOD and non-MOD bodies and / or stakeholders, e.g. HSE, EA / SEPA, Local Authorities, English Heritage etc, as well as non-Government organisations and pressure groups. Any communication should be logged and retained for future reference.</p>
--	--	--

		<p>In some cases, stakeholders will also require the organisation to provide periodic and pertinent information of its HS&amp;EP activities, performance and compliance. Auditors should seek verifiable evidence that the organisation has in place effective procedures to ensure that those with responsibilities for communicating HS&amp;EP information to stakeholders are fully aware of their responsibilities, that the information is verifiable, consistent, accurately explained and meets response timescales.</p> <p>The organisation is to establish and maintain documentation of the HS&amp;EP management system in hard copy or electronic format.</p> <p>Additionally, any documentation that the organisation needs to be able to comply with MOD or Statutory Regulations should be available for reference as required. Wherever possible auditors should acquaint themselves with this information prior to the audit commencing to allow time for verification during the audit field-work phase.</p>
--	--	---



c. Organisational leadership, culture, capability and change management

Level 4:  
Arrangements are compliant  
  
This element covers leadership behaviours and HS&EP culture expected in the organisation, the derivation of capabilities and resources (human, financial and material) required for the organisation to conduct its activities safely (including the interfaces between the organisation and others with which it works) and the arrangements to maintain these. It also covers the assessment of proposed organisational or resource changes and control of the implementation of agreed changes.

**System requirement**  
  
*A HS&EP Statement is to be prepared that outlines the O&A appropriate to the nature, scale and impacts of the organisation's activities (including products and services as appropriate) and is linked to the SofS Policy.*  
  
*Senior Management need to take appropriate and proportionate action in support of the O&A statement, to demonstrate their leadership and commitment to HS&EP.*  
  
Does the statement reflect personal commitment, the principle of continual improvement (including setting objectives)?  
  
How are the specific requirements, detailed in the SofS' Policy, enacted within the organisation's own statement? How are duties and responsibilities delegated and designed to apply the strategic principles outlined in the Policy.  
  
Is the need to systematically identify, evaluate and control risks reflected? Is it current and valid? Is the statement supported by suitable organisation and arrangements? Are the organisation and arrangements current, relevant, sufficiently detailed and proportionate?  
  
Does the documentation address the specific nature and scope of the organisation and its activities?  
  
Does it include (where appropriate) arrangements to cover the prevention and mitigation of the consequences of major accidents and spills.

		<p>Does the HoE take the lead role for the management of HS&amp;EP, Chairing the HS&amp;EP committee, leading routine safety tours and inspections, participating in environmental audits as required? Is there clarity of roles, responsibilities and appointments for the organisation?</p> <p>Any arrangements to manage strategic and in-house safety risks or threats to the environment, details of any formal arrangements with external agencies and specific duties assigned to specific members of staff.</p> <p>Is there an acknowledgement and demonstration of delegated duties to reflect the organisational hierarchy requirements?</p> <p>Is there a commitment to review the statement when significant changes occur?</p> <p>Requiring and reviewing accident and incident statistics, setting objectives and targets and personally driving improvements designed to develop and improve the HS&amp;EP culture within the organisation. This may be supplemented with arrangements to ensure that reporting data is brought to the attention of the managing board.</p> <p>In cases of multi-occupancy sites, the Parent (usually the largest Unit or the Site Owner) should ensure that all others sharing site facilities or visiting, conform to any HS&amp;EP requirements that apply site wide.</p> <p>All Parented and Lodger Units should be represented on the appropriate HS&amp;EP Management Committee either individually or collectively.</p>
--	--	---

		<p>Agreements should be formal, documented, signed by the parties concerned and dated. Documentation will form part of Site Emergency Arrangements and the Site Business Continuity Plan. Lodgers may include: other MOD organisations, Cadet and University Air Squadrons, BT, RPCs, MOD Police, MPGS, MGS etc.</p> <p>Where a MOD organisation controls the work site, the Head of the Organisation should take the lead in establishing the appropriate arrangements, including the assessment of shared risks. Where there is no lead MOD organisation all those involved are required to document agreed suitable joint arrangements.</p> <p>HS&amp;EP Statements should adequately detail responsibilities and the organisational and management arrangements, including those to ensure Co-operation, Co-ordination, Communication between, and Control (4Cs) of all parties sharing a workplace. In turn all parties should know which HS&amp;EP organisation and arrangements apply to them and these are to be formally agreed between the various parties.</p> <p>The effectiveness of these arrangements is now considered a vital part of safety management arrangements on MOD sites, with responsibility for effective operation resting with the Site Owner / Head of Establishment.</p>
--	--	--

<p>d. Personnel competence and training</p>	<p>Level 4:</p> <p>Arrangements are compliant</p> <p>This element covers the derivation of competences for all roles having HS&amp;EP responsibilities in the organisation and the means of competence assessment and maintenance for those persons discharging such roles. It also covers the arrangements to train personnel to conduct activities safely.</p>	<p><b>System requirement</b></p> <p><i>Arrangements are to be in place to ensure that all personnel receive appropriate HS&amp;EP training, including induction and refresher training.</i></p> <p>To what extent has the organisation established and maintained procedures to identify training needs for all staff (Safe Person element of 4 Ps (Safe Place, Safe Person, Safe Product and Safe Process)), both at recruitment (induction training) and in their ongoing careers (refresher training).</p> <p>How well are personnel with specific, job-related HS&amp;EP duties e.g. safety advisers, line managers etc in the organisation, provided with appropriate training for their role and responsibilities?</p> <p>The extent of a person's HS&amp;EP training requirement will depend on their job, their experience, and any previous training completed. A training matrix can be used to record this information, together with information on the individual's requirement for further training to achieve the skills and competence necessary to enable them to undertake their role effectively. Induction training should be the first level for all staff, followed by more specific training related to certain procedures or tasks. Refresher training may also be necessary in some cases e.g. First Aider, Radiation Safety Officer, Fire Awareness, whilst urgent training requirements may arise as a result of organisational change.</p>
---	--	--

		<p>Auditors should look for evidence that the organisation is providing effective training based on individual training needs, in particular where the requirement has been linked to the achievement of a safe working environment. Training should be supported with an effective system of post training evaluation, the results of which should be retained for future reference, by both the organisation and the individual concerned.</p> <p>Where training needs are identified a programme is often required to ensure it is delivered and it is effective. This may be supplied by in-house sources or external training organisations and it is important that it is prioritised, sufficiently funded and resourced and monitored for effectiveness.</p> <p>Employee / Trade Union Safety Representatives are to be allowed to attend training courses, noting also the statutory provision made for Safety Representatives to undertake workplace HS&amp;EP inspections in certain circumstances.</p>
--	--	---

<p>e. Risk Assessments and Safety Cases.</p>	<p>Level 4: Arrangements are compliant</p> <p>This element covers the arrangements to conduct risk assessments and (as necessary) produce, document and maintain safety cases for the activity to be conducted. It also covers arrangements (as necessary) for peer review.</p>	<p><b>System requirement</b></p> <p><i>Arrangements are to be in place to ensure that all workplace and site hazards have been identified and recorded, together with assessments of the associated risks and / or environmental impacts.</i></p> <p>How well does the organisation use the principle of proportionality in planning its management of HS&amp;EP risks? Are resources (both in terms of time, effort and money) matched to the risks, rather than being evenly distributed across areas of high and low risk?</p> <p>Is the concept of the 4 Ps (Safe Place, Safe Person, Safe Product and Safe Process) fully understood and implemented? Does the CO / HoE and line manager responsible for the workplace ensure these elements are considered, and included in all risk assessments and mitigations?</p> <p>Risk Registers at different levels should provide specific examples of where risks have been prioritised and mitigated. In doing so it may be appropriate to remember the broader principals for managing risk, all of which might incur resource costs.</p> <p>When planning and determining controls (including changes to existing controls) is risk reduction based on the hierarchy of: elimination, substitution, engineering controls, administrative control and / or working procedures, PPE?</p> <p>The arrangements that have been put in place to manage safety and environmental risk should be examined in order to determine the degree to which the organisation follows a structured process, or whether it is ad-hoc. A sample of risk assessments should be examined to establish whether all potential hazards have been identified, what methodology has been used and whether it is effective.</p>
--	---	---

		<p>This should be undertaken for health and safety in the workplace and across the site and in regard to how site activities impact on the environment. Auditors might also look for evidence that external specialist support has been enlisted where in-house expertise was lacking.</p> <p>There is also a need to seek evidence that all staff understand and accept the duty they have to identify and report hazards in the workplace, as part of the process of mitigating and managing risk. All staff should be aware of the risk assessment procedures that exist in their work area and understand that failing to report a known hazard that subsequently results in an accident or injury, could be regarded as an offence.</p> <p>Existing risk assessments should be reviewed to establish whether they are appropriate, mitigation measures are proportionate to the level of risk presented and whether they are current, signed and dated.</p> <p>Where risk assessments have recommended additional controls should be implemented, workplace instructions, procedures and arrangements should be examined to determine whether they have been implemented correctly and whether they were effective in controlling the risk. Where there is evidence that the controls were ineffective what supplementary actions have been taken and by whom?</p> <p>Site risk assessments should be undertaken regarding both Health and Safety and Environmental Protection. For them to be effective they should identify all potential hazards and assess them for individual and collective risks to the site and its occupants but also any adjoining land, waters or air that might also be affected.</p>
--	--	--

		<p>Documentation that should be examined may include: risk assessments, an Environmental Impacts Register (or Env Manual), Consignment Notes, Public Notices, minutes of meetings (both internal and external) and correspondence with members of the public, local authorities and regulatory authorities.</p> <p>Good practice suggests that in order to maintain a safe working environment all goods and services coming onto the site will be subject to a prior assessment regarding any hazards they might present to either individuals or the environment. This should be on an item by item basis and when interacting with other items already on site. Those with the responsibility for placing contracts and / or ordering, should be interviewed to establish whether suitable procedures are in place and whether the individuals concerned are monitoring them to ensure they are effective.</p>
--	--	---



<p>f. Equipment / materiel and infrastructure design and manufacture.</p>	<p>Level 4: Arrangements are compliant</p> <p>This element covers arrangements to influence the design of equipment / materiel and infrastructure used in conducting the activity, including interfaces with those involved in the design<sup>4</sup> and (as appropriate) the standards to be adopted. It also covers involvement in the manufacture and commissioning of equipment / materiel and infrastructure prior to use, maintenance of knowledge about the design (e.g. its relevance to any safety case) and arrangements for design modification.</p>	<p><b>System requirement</b></p> <p><i>Where relevant, how well does the organisation ensure that HS&amp;EP requirements are considered when procuring and / or providing goods and services?</i></p> <p>Good practice suggests that in order to maintain a safe working environment all goods and services coming onto the site will be subject to a prior assessment regarding any hazards they might present to either individuals or the environment. This should be on an item by item (Safe Product / 4Ps) basis and when interacting with other items already on site.</p> <p>Infrastructure work, including significant renovation or new building planning should be assessed for H&amp;S standards, as well as sustainability and environmental protection measures.</p> <p>Those with the responsibility for placing contracts and / or ordering, should be interviewed to establish whether suitable procedures are in place and whether the individuals concerned are monitoring them to ensure they are effective.</p>
---	--	--

<sup>4</sup> In some circumstances the equipment / materiel or infrastructure may be of such significance to the safety of the activity to be conducted that acquisition HS&EP Management Arrangements may be invoked in this element.

<p>g. Equipment / materiel and infrastructure maintenance.</p>	<p>Level 4: Arrangements are compliant</p> <p>This element covers the derivation of requirements to maintain the material state of the equipment / materiel and infrastructure and the arrangements for conducting and verifying the necessary maintenance including safe systems of work if the commanding officer's or manager's organisation is to conduct the maintenance itself.</p>	<p><b>System requirement</b></p> <p><i>How well does the organisation implement procedures for undertaking Site Risk Assessments?</i></p> <p>How well does the organisation use the principle of proportionality in planning its management of HS&amp;EP risks i.e., are resources (both in terms of time, effort and money) matched to the risks, rather than being evenly distributed across areas of high and low risk.</p> <p>Are responsibilities and line management clearly defined to ensure maintenance of infrastructure and equipment / materiel is managed in a systematic and coherent manner?</p> <p>Risk Registers at different levels should provide specific examples of where risks have been prioritised and mitigated. In doing so it may be appropriate to remember the broader principals for managing risk.</p> <p>How well does the Head of the Organisation ensure that adequate and proportionate resources are provided for managers at every level to enable them to meet the targets set by Senior Management? Does this meet the requirements of the Safe Place element of the 4Ps?</p> <p>When services and maintenance work are carried out under contract, such as site infrastructure maintenance under the RPC contract with DIO, does the Head of the Organisation have sufficient assurance it is being done to the required standard? How is this assurance gained?</p>
--	---	---

<p>h. Supervision and control of activities</p>	<p>Level 4:</p> <p>Arrangements are compliant</p> <p>This element covers the adoption of safe systems of work (including the generation of procedures where appropriate, informed as necessary by any safety case) to control activities and arrangements for their application including supervision at all levels.</p>	<p><b>System requirement</b></p> <p><i>How well does the organisation implement the policies and procedures for co-ordination, co-operation, communication and control (4Cs) of contractors, other visiting workers, and any other persons on their sites?</i></p> <p><i>The organisation is to establish and maintain documented procedures to monitor HS&amp;EP performance on a regular basis.</i></p> <p><i>Are regular and detailed HS&amp;EP Inspections of work activities and the workplace carried out and recorded by line managers and / or employee / Trade Union Safety Representatives?</i></p> <p>How well does the O&amp;A statement reflect the personal commitment of the Head of the Organisation, the principle of continual improvement (including setting objectives), pollution prevention, and the need to systematically identify, evaluate and control all H&amp;S risks?</p> <p>HS&amp;EP Statements should adequately detail responsibilities and the organisational and management arrangements, including those to ensure 4Cs of all parties sharing a workplace. In turn all parties should know which HS&amp;EP organisation and arrangements apply to them and these are to be formally agreed between the various parties.</p> <p>All visitors entering the site, including members of the MOD and the Armed Forces, whether regular or not, are to be made fully aware of any HS&amp;EP procedures and / or local regulations that might affect them whilst on site. This should take place at the entrance to the site, but individual area / building requirements may be provided by the local line management if that is more convenient.</p>
---	--	--

	<p>How effective are the organisation's procedures for ensuring that action is taken at the appropriate level to remedy any breaches of legislation or MOD policy?</p> <p>The Head of the Organisation must have procedures to ensure they are informed as soon as any serious breach of legislation or MOD policy is discovered together with action taken / required.</p> <p>To what extent are the HS&amp;EP objectives and targets, at all levels within the organisation SMART (Specific, Measurable, Achievable, Realistic and Time-bound)?</p> <p>To what extent is the HS&amp;EP management organisation clearly defined, key personnel identified and their duties and responsibilities for HS&amp;EP management defined, documented and published? This could include a diagram which indicates the names / posts, location, and duties of key HS&amp;EP personnel.</p> <p>Terms of Reference that define HS&amp;EP management responsibilities for line managers and those with specific responsibilities in the HS&amp;EP management system, such as Head of Establishment, 4C's Co-ordinator, Environmental Protection Adviser, Health and Safety Adviser, Radiation Safety Officer / Protection Supervisor, Building Custodian, Waste Manager, Utilities Manager etc.</p> <p>Are control measures being resourced to meet targets and objectives as well as to address weaknesses in controls identified following audits, inspections or HS&amp;EP Committee meetings.</p> <p>Other indicators could be the adequate provision of funding for HS&amp;EP related work services, risk mitigation and training and the adequacy of the HS&amp;EP organisation in relation to the organisation's risk profile.</p>
--	---

<p>i. Incident management and learning from experience.</p>	<p>Level 4:</p> <p>Arrangements are compliant</p> <p>This element covers the notification, recording, investigation and reporting of incidents (which includes, for example, near misses, abnormal occurrences, accidents). It also covers the generation and promulgation of lessons learnt from a commanding officer's or manager's own incidents or operational experience, the monitoring of trends and the assimilation into management arrangements of lessons from these and relevant incidents anywhere.</p>	<p><b>System requirement</b></p> <p>Effective procedures are to be established for reporting / investigating accidents and initiating corrective and preventative action.</p> <p>To what extent does the organisation monitor accident / incident / near miss and occupational ill health records, to identify and analyse trends and act where required?</p> <p>How effective are the organisation's accident / incident reporting procedures in ensuring the reporting and recording of accidents and incidents (including environmental incidents)?</p> <p>Accident / incident data held by the organisation is recorded, examined and managers interviewed with a view to determining whether an effective system examines the immediate cause / root cause and trends as part of a process to help prevent accidents, injuries and ill health, as well as prevent pollution incidents. How are accidents / incidents reported, recorded and investigated?</p> <p>Are specialist advisers and senior managers involved in any investigations?</p> <p>How effective are procedures for initiating and ensuring the completion of corrective and preventative actions following accidents or incidents i.e. does it learn from such events?</p> <p>Accident / incident investigations need to be robust and easy to use if they are to be effective and prevent similar accidents / incidents occurring again.</p>
---	--	--

		<p>Formal arrangements for using accident / incident investigation findings as part of a review of existing arrangements and processes should be in place and be understood by all those involved in the process. Failure to have suitable arrangements of this type may lead to remedial actions not being initiated and may allow the accident to re-occur.</p> <p>How well are significant shortcomings regarding HS&amp;EP management (including serious incidents) brought to the attention of the Head of the Organisation in a timely and effective manner?</p> <p>Evidence should be available regarding how the Head of the Organisation is apprised of the results of accident investigations. This may be contained in letters to other parts of MOD, to external Stakeholders, Regulatory Authorities and in local safety bulletins to all staff. This will show how effective the accident reporting system is overall and how seriously it is taken by the leadership of the organisation.</p> <p>For the HS&amp;EP action / management plan to be effective it should detail the specific arrangements for identifying and assessing safety and environmental risks, together with details of how strategic targets related to are to be achieved, recorded and reported.</p> <p>To what extent have effective procedures been established within the organisation for receiving, documenting, retaining and responding to relevant HS&amp;EP communications from bodies external to the organisation (e.g. HSE, SEPA, DSA)?</p>
--	--	---

<p>j. Emergency arrangements.</p>	<p>Level 4:</p> <p>Arrangements are compliant</p> <p>This element covers the response to emergencies (including accidents), the preparation for such response and appropriate rehearsal or exercising of such response.</p>	<p><b>System requirement</b></p> <p><i>Procedures are to be established for managing foreseeable and potential emergencies and disasters.</i></p> <p>To what extent has the Head of the Organisation nominated key personnel and identified them in documented Business Continuity Plans / Major Incident Plans (BCP / MIP) or similar?</p> <p>Emergency and disaster plans, including those relating to business continuity should be assessed to establish the degree to which the organisation understands its responsibilities not only for its own people but for all those who might be affected in an emergency. Plans should begin by identifying the type of emergency, the scale and scope of what this might entail both in resource terms and the wider community. They should identify posts and / or people who will perform key tasks during an emergency and detail the duties and responsibilities of them and others with whom they will need to interact. This is particularly important on multi-occupier sites such as those run under RPC or Aquatrine arrangements.</p> <p>Emergency plan information packs containing details and locations of hazards, fire-fighting appliances, emergency water storage, evacuation routes etc should be available to be picked up by the emergency services at the entrance to the site and at strategic points throughout the site.</p> <p>How well are emergency and MIPs periodically practiced, tested and recorded, in line with MOD policy / statutory requirements including where appropriate, the involvement of Local Authorities?</p>
-----------------------------------	---	---

		<p>Emergency Plans should be practiced in accordance with Statutory Requirements, MOD Regulations or when considered necessary by managers for them to retain a level of confidence in the plans and the actions of staff in an emergency. This should take place without prior notice wherever possible and include as many staff as practically possible. A full-scale practice involving all staff together with local authority emergency services, should be conducted at least every two years or more often if required by legislation or to cater for the risk profile of the organisation.</p> <p>To what extent has the organisation put in place arrangements to review and revise, where necessary, its emergency response plans and procedures, following accidents or emergency situations, or as a result of shortfalls having been discovered?</p> <p>Evidence showing how emergency plans and procedures have been reviewed and / or revised following actual or practice usage should be available to the auditors. Any revisions should have been authorised and dated by a competent, authorised person and contain details of what changes have been made and why.</p>
--	--	---



<p>k. Self-assurance.</p>	<p>Level 4:</p> <p>Arrangements are compliant</p> <p>This element covers the way a Commanding Officer or manager gains confidence that the previous 10 elements are being conducted correctly and in accordance with the overall HS&amp;EP management arrangements. Unless provided for elsewhere in the management arrangements, it also covers internal governance, monitoring, review, quality assurance and advice more generally given (e.g. safety advisory committees).</p>	<p><b>System requirement</b></p> <p><i>The organisation is to establish and maintain a regular programme for audits of the HS&amp;EP Management System, in order to ascertain that adequate risk control systems, which are consistent with the hazard profile of the organisation, are in place and that all relevant statutory HS&amp;EP requirements are being adhered to.</i></p> <p>How well does the organisation ensure that actions, placed as a result of HS&amp;EP audits, inspections, or management meetings, are monitored to satisfactory completion?</p> <p>How effective is the organisation's internal audit process in determining the adequacy of risk control systems and assessing compliance with relevant policy and statutory requirements?</p> <p>The audit process should ensure that all areas of the organisation are reviewed periodically, determined by the type and level of risk presented by the business or business activities. The process should be structured and tailored to take account of resource availability, time between audits etc.</p> <p>Auditors should seek evidence of a suitable and effective process that provides the information required to manage the business safely, in accordance with legislation and in compliance with MOD requirements. This should be tailored to the risk profile of the organisation and be transparent in its operation. It might also follow industry best practice where a business need can be demonstrated.</p> <p>Auditors should seek evidence that the organisation reviews the outputs from the audit process as part of an ongoing process of assuring compliance and managing risk.</p>
---------------------------	--	---

		<p>To what extent has the organisation made changes to its HS&amp;EP statement, objectives, resources, or other elements of the management system as a result of management reviews?</p> <p>Auditors should look for evidence of formal action plans related to audits and inspections, whether undertaken internally or by external specialists. These should detail the remedial actions required, include a time / date by which they should be completed and identify those responsible for implementation (SMART). Where action plans have not been completed satisfactorily, the reasons should be determined.</p> <p>The organisation's O&amp;A Statement should contain details of how and when HS&amp;EP documentation should be reviewed and nominate a suitable person to carry this out. This may be required as part of a statutory requirement, as a result of a change in process or because a new hazard or risk has been identified. Details should be recorded and kept on file.</p> <p>Records of discussions / meetings specifically arranged to consider the effectiveness and suitability of the HS&amp;EP management system, particularly regarding the information provided by managers as part of their duty to assess and manage risk should be kept. Details of any changes made considering these discussions and whether changes have increased confidence in the overall assurance arrangements or highlighted further issues should be recorded.</p> <p>Managers need to establish, as part of regular reviews, whether the HS&amp;EP Objectives and Targets that they have set, are being met. This is to establish whether they are effective or not and to assess whether they are providing the required level of assurance that systems and arrangements match the risk profile of the organisation</p>
--	--	---