

OHSAS 18001:2007 GUIDANCE DOCUMENT

Occupational Health & Safety Management System



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4.1 General requirements

The organisation needs to define and document the scope of the OH&S management system and ensure that it is implemented and supported throughout the organisation.

Before a system can be developed, the organisation needs to determine the risks that need to be managed where efforts should be concentrated. This could be completed by some form of initial review. Questions that could be asked at this stage of implementation are:

- What risks are there to the employees?
- What are the risk to visitors, contractors and suppliers?
- What regulations need to be complied with?
- What are the current levels of performance?
- What practices, controls and Safe Systems of Work are currently in place?

There is some freedom and flexibility in defining the scope and boundaries of an OH&S Management System, but the overall aim is to safeguard life. Therefore, this management system more than any other will require your certification body to visit the workplace of your employees, including any field activities where employees are away from the main premises, to ensure that they are implementing the system and applying effective controls. The scope should not attempt to exclude an activity or part of a process on the grounds of riskiness, that are essential to the operation of the organisation as a whole. Where a part of an organisation is excluded from the scope of its OH&S management system, the organisation should be able to justify the exclusion. Organisations should be aware that exclusion from 'scope' does not exclude continuing to meet legal requirements.

4.2 Occupational Health & Safety Policy

Based on the identified significant risks (see below), the organisation's top management shall define and document the Occupational Health & Safety Policy. This is currently a legal requirement for organisations with more than 5 staff.

The purpose of the policy is to establish the framework for what has to be achieved before moving into the Plan-Do-Check-Act (PDCA) cycle of planning, implementation and operation, monitoring and corrective action and management review.

Regarding the Policy

- Is it relevant to the business and its operations?
- Does it contain commitments to continual improvement, prevention of injuries and ill health and to comply with legal and other relevant requirements? For example, statements such as: "We aim to provide a safe and healthy work place", "We shall continually strive to reduce accidents and injuries to a minimum", "We consider compliance with legal requirements as minimum acceptable performance."
- Does it provide a framework for setting and reviewing objectives and targets? The above statements are an example of this.
- Is it documented, communicated, reviewed and maintained?

Statements in the policy must not be misleading and it is important that the Policy is a credible document and is not used to imply a better performance than is actually being achieved. Remember that the Policy is an auditable document.

The term 'available to interested parties' in the Standard means "available on request", not necessarily an active distribution. The minimum requirement is that the policy should be available to all interested parties and communicated to all employees.

Employees do not need to be able to recite the policy verbatim, but they should be able to demonstrate an understanding of how the policy is reflected in their work and how they contribute to meeting the policy.

OHSAS 18001 IMPLEMENTATION MODEL



4.3 PLANNING

4.3.1 Planning for Hazard Identification, Risk Assessment and Risk Control

Hazard identification and the assessment of significance

is the key to the whole system as it is the impacts of significant risks that need to be managed.

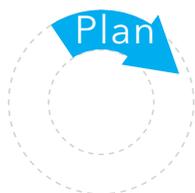
All hazards must be identified and then assessed in order to determine if they are significant. Most organisations use the Risk Assessment process to fulfil this requirement of OHSAS 18001. Appropriate controls must be put in place to reduce risk to a tolerable level. This can be an iterative and on-going task. The types of risk exposures to be considered include all those that could lead to death, ill health, injury, damage or other loss. Consideration of risk should ensure to capture not just physical risks but also occupational risks.

The organisation should then determine significance based on a declared procedure (criteria). There is no single recommended or accepted method for evaluation of risks. It is up to the organisation to decide which method to use, but the method must be sound and justifiable. The criteria should, however, include potential as well as actual outcomes and the likelihood and/or probability of the risks occurring. Some potential questions are:

- Have all activities been identified: current and planned, under normal, abnormal (e.g. maintenance) and emergency situations?
- Have all the hazards involved in the activity including those arising from the work place environment been identified?
- Have the risks involved in the above been assessed and appropriate control measures put in place?
- Are the significant risks considered when setting objectives/targets?
- Do the control measures for significant risks feed into the monitoring and internal auditing programmes?

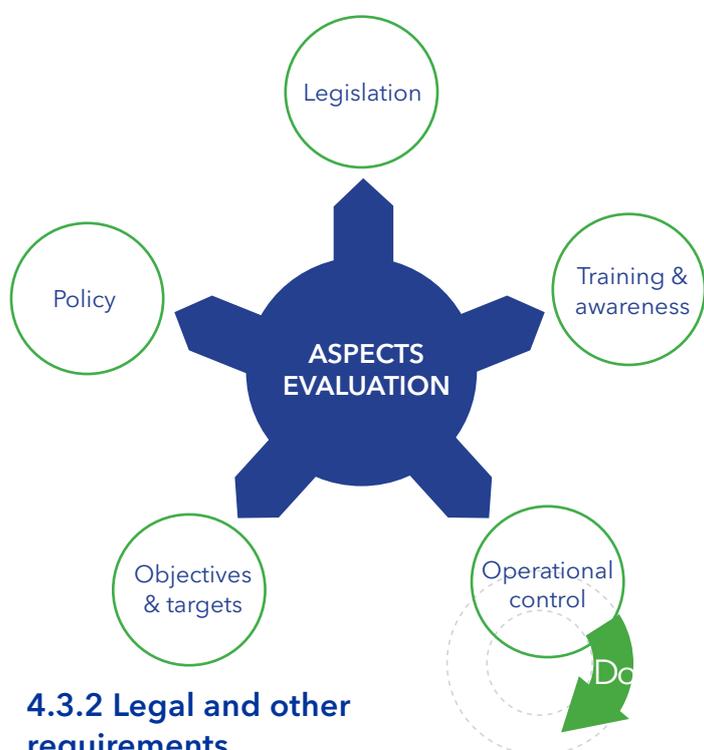
There should be documented assessments of the above and records of any significant findings. There should also be periodic reviews of risk assessments to ensure that the process is logical and remains up-to-date.

The model below shows how the hazard identification/ risk assessment process feeds into other elements of the OH&S management system. Once the significant hazards and risks have been identified it is possible to:



- Create a relevant Occupational Health & Safety Policy;
- Set objectives and targets to improve performance and/or reduce risk;
- Determine where operational controls/procedures are needed to manage risks;
- Determine where specific training may be required;
- Identify relevant legislation.

RISK ASSESSMENT & LINKS TO OTHER ELEMENTS OF THE MANAGEMENT SYSTEM



4.3.2 Legal and other requirements

Understanding the legal framework and demonstrating compliance with legal and other requirements (e.g. codes of practice that the business has subscribed to, or corporate requirements) is a critical part of the OHSAS 18001 standard. There must be a process for identifying and keeping up-to-date with all relevant legislation, regulations, permits, licences and other requirements. If any changes to legal requirements are identified then there should be effective communication to those that need to know.

In essence certification is seeking to ensure that:

- There is a robust process for identifying legal and

other requirements and for deciding whether they are applicable or not;

- Key requirements are communicated to those that need to know; and
- There are periodic reviews to capture changes.

The organisation should have some means to prove that they have identified applicable compliance requirements. This could be some form of "register".

4.3.3 & 4.3.4 Objectives, targets and OH&S Management programme(s)

Objectives and targets must be documented and be consistent with the policy and the identified significant environmental aspects and legal requirements. Employees responsible for achieving objectives and targets should have been involved in their development so as to ensure understanding and reality.

Objectives and targets must be "SMART", and revised where necessary:

- Specific
- Measurable
- Achievable
- Relevant
- Time-bound

Programmes must include the designation of responsibility, the means of achievement and the timeframes by which they are to be achieved. In essence, this equates to whom, how and by when? Particular emphasis should be given to clearly defining the means of achieving each programme with consideration given to the setting of milestones and the use of project plans. If appropriate, some form of "normalisation" can be used (e.g. per employee, hours worked etc.).

Objectives and targets must ideally be focussed on improving occupational health and safety performance, but other objectives are acceptable. Examples of improvements can include:

- Health and safety performance (e.g. quantified reductions in loss time accidents);
- Control (e.g. improved training resulting in greater control);

- Knowledge and information (e.g. investigations to gain greater technical understanding before committing to investment).

Some organisations set objectives and targets that reflect compliance with legislation. Whilst this is not prohibited by the standard, the organisation should aim to demonstrate continual improvement in actual performance. Certification will be seeking to evaluate whether the objectives and targets an organisation has set itself are “demanding yet achievable”.

4.4 IMPLEMENTATION AND OPERATION



4.4.1 Structure and responsibilities

For effective implementation, an organisation should develop the capabilities and support mechanisms necessary to achieve its OH&S policy, objectives and targets and manage its significant risks.

“Resources” can include personnel, equipment and administration processes such as planning schedules (including inspection, test and verification) and the maintenance of appropriate health and safety records. Some questions are:

- Have responsibilities and authorities defined, documented and communicated?
- Have management provided all resources needed to implement and control the OH&S management system?
- Is there an appointed management representative, and is this role defined?
- Do all managers demonstrate their commitment to improving health and safety?

Unlike other management system standards (e.g. ISO 9001 and ISO 14001 for Quality and Environmental Management Systems), OHSAS 18001 requires that Management Representatives must be members of the top management. In most cases this will be a member of the senior management team, but in the case of large organisations this would have to be a board or executive committee member. Their responsibilities

and authorities should be defined and documented.

The OH&S management system should clearly define responsibilities and roles. This is best done through organisational charts and/or work instructions, process diagrams/procedures and job descriptions. As a minimum there should be a description of these roles and responsibilities within the OH&S management system.

4.4.2 Training, awareness and competence

For successful Occupational Health and Safety performance, it is essential that employees are competent to undertake their tasks. This obviously varies according to the type of business and the risks involved. For example, this will be less critical in an office than a construction site! The organisation should ensure necessary education, training and experience for all personnel performing tasks on its behalf that can cause significant health and safety risk exposures (this also includes contractors and visitors). Questions to review are:

- What competencies do we need to manage our risks?
- Are any related to legal requirements to maintain competence certifications?
- How are training needs identified, and awareness and competence assured?
- Have all members of the organisation been made aware of their responsibilities, the effects their work can have on themselves and others and the consequence of non-compliance?
- Do employees know their health and safety roles and responsibilities?
- Are employees aware of emergency procedures?
- Are there records of training and evidence of competence?

All personnel should have been made aware of the organisation’s significant hazards and risks where either it affects them or they can affect others. They should understand the overall objectives and the system and there are a range of channels that can be used such as training, tool box talks, briefings, notice boards,

newsletters, intranet pages, e-mails etc.

A record of the training received is required to be retained and available for review and audit.

Where an organisation hires subcontractors/contractors that are “under its control” (e.g. on its site) to undertake tasks with occupational health and safety risks, it must also obtain records of education, competency and/or experience as well as receipt of advanced documentation demonstrating how operational tasks will be performed.

4.4.3 Consultation and Communication



Top management must ensure that an effective process is in place to consult with and communicate to employees, contractors, visitors and “relevant interested parties” with respect to matters that can affect their health and safety. In order to be effective, it should include feedback on concerns and on the effectiveness of the management system.

There must also be a process for employee participation and consultation regarding occupational health and safety issues. This includes participation in risk assessments and identifying appropriate controls, appropriate involvement in accident and incident investigation and reviews of the effectiveness of the management system (e.g. policies and objectives). There must be consultation where there are any changes affecting employees occupation health and safety and representation enabled on occupation health and safety issues (e.g. via union or safety committee representatives). Consultation should also be extended to any contractors where their occupation health and safety arrangements may be affected.

Internal communication is important to ensure effective implementation of the OH&S management system. Methods of internal communication may include regular meetings, tool box talks, newsletters, bulletin boards, and intranet sites. Records should be maintained, as appropriate, that provide proof of internal communications. These could include meeting minutes, newsletters, posters etc.

4.4.4 Documentation



This is a general requirement highlighting what system documentation should be in place. The purpose it is to ensure that the organisation’s safety management system is cohesive and that all interactions are understood.

There should be documents that describe:

- How the OH&S management system works, its core elements and how they interact?
- The system scope
- Where to find the relevant information and the management system should provide direction to related documentation and information

OH&S management system documentation can be integrated with existing quality and environmental management systems. Many organisations now effectively work to an “operator system” where procedures cover relevant aspects of quality, environment and health and safety considerations to ensure that the process is completed “right first time”, reduces risks of potential pollution and defines how the job should be done safely. The only words of warning, however, are in operations where critical issues do not overlap. In other words, if a task (e.g. confined space entry) was to be amalgamated with other quality and environmental issues, it may risk diluting the focus on the confined space entry task. This is an illustrative example, but the message should be that critical tasks require a high degree of focus.

It is not a requirement of OHSAS 18001 Standard to prepare a management system manual but, “best practice” is to document the OH&S management system in a manner that is easily understood, repeatable and effective. Any manual, “system description” or “signposting document” should only be as detailed as is needed. It does not need to regurgitate the words in the 18001 Standard, but could be more of a “link” or “signpost” document showing how the organisation manages its occupational health and safety issues as well as addressing the requirements of the Standard.

4.4.5 Control of Documents

The organisation must have a process for developing, distributing, controlling and maintaining OH&S management system documentation.

Is there a procedure to control documents and does it ensure that they are:

- identifiable, reviewed, authorised and revised as necessary?
- include responsibility for creation/revision?
- of the current revision at the operating location?
- removed if obsolete or otherwise marked to show status?
- legible, dated, well ordered and retained for a specific period?

4.4.6 Operational Control

The purpose of operational control is to ensure that all operations associated with the identified significant risks, applicable regulations, policy and objectives are being effectively managed and controlled. This element of OHSAS 18001 is the part that seeks to put in effective controls to manage the identified risks.

Some points to consider include:

- Are operations relative to significant risks, policy and objectives/targets planned and controlled?
- Does this include maintenance activities?
- Are there documented Safe Systems of Work/ procedures/work instructions where needed?
- Have clear operating criteria been established and are they clearly understood by those that need to know?
- Is change managed appropriately?
- Are procedures communicated to and followed-up with suppliers and contractors if necessary?

Methods of control could include:

- Documentation describing work methods such as Safe Systems of Work, procedures, work instructions, Method Statements;
- Setting clear operational criteria;
- Monitoring adherence to these methods and criteria;
- Information, instruction, training and supervision;
- Issuing Permits to Work;
- Effective maintenance of equipment;
- Task observations;

- Audits.

Some activities which are normally considered as insignificant can become significant risk exposures when operating under abnormal conditions or in the event of an accident or emergency. The organisation must be prepared for any such situations that are reasonably foreseeable. A typical example of an abnormal situation would be operations occurring during maintenance or shutdown. Controls must include part time and subcontractor workers.

- Records may also include items like:
 - Permits to Work;
 - Records of inspections;
 - Audit records;
 - Records of task observations.

4.4.7 Emergency preparedness and response



The organisation must be prepared for any accident or emergency situations that are reasonably foreseeable. This should take the form of an Emergency Plan setting out actions to be taken in emergency situations. Typical contents of such plans may include the procedures to be followed, contact telephone numbers, control points, emergency isolation points and various plans (e.g. fire plans, hazardous material storage areas etc.).

Procedures should be tested in the most practicable way and corrective action taken where they did not work or needed improvement. This can often take the form of emergency drills or practices on a routine basis; but desk-top exercises and computer simulations are also used.

4.5 CHECKING



4.5.1 Performance measurement and monitoring

Measurement and Monitoring is the continuous assessment of performance over time. Most companies use accident statistics as a measurement of performance. This is acceptable, but is a lagging indicator and by itself is not enough as accident numbers are a reactive and quantitative indicator. The standard also looks for proactive or leading indicators, which can be quantitative or qualitative. Proactive or leading indicators are things done to actively prevent incidents and accidents. These can include performance indicators based on training, inspections, OH&S meetings, audits, timely close out of non-conformities etc.

Procedures should include how monitoring will be undertaken, the frequency, criteria, and the records that will be maintained. Calibration controls are also required for instruments used to monitor occupational health and safety. This obviously varies from company to company.

4.5.2 (4.5.2.1 and 4.5.2.2) Evaluation of compliance



The organisation will need to demonstrate how it evaluates compliance with applicable legal and other requirements (e.g. Group requirements, company standards, industry standards, Approved Codes of Practice etc.). Most organisations fulfil this clause via their internal audit processes, but other compliance audits, checks and reviews can be used.

The organisation should define its processes for evaluating compliance with legal and other requirements and must keep records of these evaluations. This area is commonly misunderstood – it is not the identification of legal requirements that is being questioned here. It is the assurance processes that are in place to be able to demonstrate that the applicable legal requirements are being complied with by the business. As stated this is usually completed

through some form of internal audit process. It is worth highlighting that if an organisation uses internal audits as the method for checking compliance, that it needs to be aware to demonstrate which 'compliance issues' were captured – usually shown in the output audit report.

4.5.2 INCIDENT INVESTIGATION, NON CONFORMITY, CORRECTIVE AND PREVENTIVE ACTION

4.5.3.1 Incident investigation

The organisation will need to have procedures to help demonstrate how accidents, incidents (including near misses) and nonconformities are reported and investigated. The organisation will have to show that it has implemented effective corrective action and confirm that the action has not created any further hazards.

4.5.3.2 Nonconformity, corrective and preventive action



This Section of OHSAS 18001 requires the organisation to establish, implement and maintain procedures for dealing with actual and potential nonconformities and taking corrective action and preventive action.

Nonconformity

The organisation must control any nonconformity – rectify the immediate problem and mitigate the impacts.

Corrective action

They must also identify the cause of the problem and take action to avoid repetition – corrective action.

Preventive action

There also needs to be a mechanism for identifying and eliminating potential problems – preventive action.

Corrective and preventive action should be commensurate with the hazards and risks encountered. The organisation must seek to resolve root causes, rather than just treating symptoms. Changes as a

result of action taken must be reflected in procedures.

Records of nonconformities, corrective and preventive actions must be maintained and could should include:

- A description of the actual or potential nonconformities (i.e. an accident/incident reporting form).
- Causes of nonconformities.
- The actions taken to eliminate the causes of actual and potential nonconformities.
- Any procedural changes implemented and documented as a result of nonconformities.
- Records of accident reports should be kept securely, particularly since they often contain personal data which must be protected. In cases where compensation claims arise, the accident report may be the most important part of a company's defence.

It is worth noting that without identifying the root cause, preventive action may not be achieved. Root cause investigation could include the use of the simple '5 Whys matrix'.

4.5.4 Control of records



The organisation must establish and maintain a system for identifying, looking after and disposing of OH&S records. The records must remain legible, identifiable and retrievable. This may be important if electronic systems are used as there can be software and hardware changes over time. Record retention times must be defined and recorded.

A system needs to be established to protect against damage, loss or deterioration of such records. Remember some records such as medical records may need to be kept for 40 years or more.

Records should include:

- Records maintained for statutory and legal purposes.
- Records as pre-determined by the OH&S management system procedures and processes.
- Training records.
- OH&S inspection and audit records.
- Consultation reports.
- Accident / incident reports.

- OH&S meetings minutes.
- Medical reports and health surveillance records.
- PPE issue and maintenance records.
- Management reviews.
- Hazard identification, risk assessment and risk control records.
- The corrective actions taken to eliminate the causes of actual and potential nonconformities.
- Any procedural changes implemented and documented as a result of nonconformities.

4.5.5 Audit



An audit programme must be developed and it must cover the entire system. The purpose of the audit is to ensure compliance with planned arrangements and identify opportunities for improvement. The audit programme should be based around the significant risks of the business.

It should be ensured that:

- Periodic audits are planned and cover the whole system.
- Audits review whether the management system is being implemented and maintained to demonstrate conformance with OHSAS 18001, legal requirements and procedures.
- The audit programme and schedule is based on the OH&S importance of the activity – identified significant risks and the results of the previous audits.
- Audit procedures should cover the scope, frequency, methodology, responsibilities and reporting mechanisms.

The audit programme should be proportional to the significant risks and hazards and consider performance against objectives and targets as well as the results of previous audits.

Internal auditors must be 'competent' and 'impartial'. 'Competent' means that the auditors understand the process being audited, have an understanding of OH&S risks and relevant legislation. They should also be familiar with management systems and auditing techniques.

'Impartial ' means that the auditors are not directly responsible for the activities that they are auditing. This does not mean that an OH&S Manager cannot audit parts of the OH&S management system, but it does mean that they cannot audit those parts of the system where they have direct responsibility.



4.6 Management review

The purpose of a management review is to determine the effectiveness of the OH&S management system and its ability to achieve its objectives. It must be conducted at sufficient intervals and as a minimum this should be annually. For a newly established system this may need to be more frequently. All relevant and pertinent information must be provided to make the review meaningful. Appropriate levels of management must be involved in the review and follow up - again to make it meaningful and to ensure that necessary actions are implemented.

Records of the organisation's management reviews must be retained and documented in such a way to demonstrate conformance with the standard which states that input to management reviews shall include:

- a. results of internal audits and evaluations of compliance with applicable legal requirements and with other requirements to which the organisation subscribes;
- b. the results of participation and consultation (see 4.4.3);
- c. relevant communication(s) from external interested parties, including complaints;
- d. the OH&S performance of the organisation;
- e. the extent to which objectives have been met;
- f. status of incident investigations, corrective actions and preventive actions;
- g. follow-up actions from previous management reviews;
- h. changing circumstances, including developments in legal and other requirements related to OH&S; and
- i. recommendations for improvement.

The outputs from management reviews shall be consistent with the organisation's commitment to

continual improvement and shall include any decisions and actions related to possible changes to:

- a. OH&S performance;
- b. OH&S policy and objectives;
- c. resources; and
- d. other elements of the OH&S management system.

Relevant outputs from management review shall be made available for communication and consultation (see 4.4.3).

It should be noted that the OH-S Policy is reviewed during the management review and in the event of changes does not necessarily mean it has to be re-dated and re-issued as long as the output record keeping of the management review acknowledges no changes as deemed by Top Management.

Also, analysis of non-conformities, internal audits and legal requirements can have a influence on setting or revising Objectives and the audit programme.

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