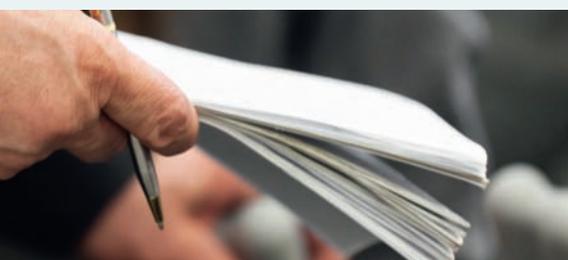




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Labour
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Geneva



Audit Matrix for the ILO Guidelines on Occupational Safety and Health Management Systems (ILO-OSH 2001)



Programme on Safety and Health at Work and the Environment
(SafeWork)

Audit Matrix

**for the ILO Guidelines
on Occupational Safety and Health
Management Systems
(ILO-OSH 2001)**

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This guide was produced under the project “Linking safety and health at work to sustainable economic development: From theory and platitudes to conviction and action” (2009-2012), funded by the Swedish International Development Cooperation Agency (SIDA).

The project promotes the improvement of occupational safety and health for all workers through the development of global products addressing the methodological and informational gaps in this field, and through the mobilization of national stakeholders towards the implementation of practical measures at national, local and enterprise levels. The outputs of the project include training materials, practical tools and policy guidance to reinforce national and local capacities in occupational safety and health, and to help constituents design and implement occupational safety and health policies and programmes.

Preface

Governments, employers and workers now recognize the positive impact on productivity, and on the reduction of hazards and risks, of introducing occupational safety and health (OSH) management systems at the organization level.

In 2001 the ILO therefore developed the *ILO Guidelines on Occupational Safety and Health Management Systems, ILO-OSH 2001*, to help governments, employers and workers to continually improve their OSH performance.

This user guide has been designed to help auditors in measuring the effectiveness of an organization's OSH management system, and should be used in tandem with the *Implementation Guidance for the ILO Guidelines on Occupational Safety and Health Management Systems, ILO-OSH 2001*. Auditing is one of the key steps in both implementing an OSH management system and evaluating its performance. This guide is a practical tool that will help in identifying the strengths and weaknesses in an organization's OSH management system, and in highlighting opportunities for improvement.

By using the guide, auditors will be able to measure an organization's OSH performance, and compare it against the 16 items described in ILO-OSH 2001, with a view to identifying weaknesses, providing solutions for improvement, and continually improving OSH performance.

It would not have been possible to develop this audit guide without the financial contribution from the Swedish International Development Cooperation Agency (SIDA). Mr Tony Smith, Manager, Smith EHS Services, drafted the guide. Mr Pavan Baichoo and Mr Tsuyoshi Kawakami from the ILO SafeWork Programme provided technical contributions for finalizing the contents. Ms Amélie Schmitt, Chief Technical Adviser of the SIDA-funded project, coordinated the development of the guide.

I am sure that this guide, in conjunction with *ILO-OSH 2001* and the *Implementation Guidance for the ILO Guidelines on Occupational Safety and Health Management Systems, ILO-OSH 2001*, will provide a valuable set of tools for employers' and workers' organizations, as well as for those responsible for OSH within their organizations, for continually improving their OSH performance.

Seiji Machida, Director,
SafeWork.

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User guide

This audit matrix has been designed to measure the effectiveness of an organization's occupational safety and health (OSH) management system and OSH performance, and to compare them against the *Guidelines on Occupational Safety and Health Management Systems, ILO-OSH 2001*. It is designed to identify the strengths and weaknesses that exist in an organization's OSH management system, and to highlight opportunities for improvement. The matrix incorporates the requirement to complete a SWOT analysis for each item of the ILO-OSH 2001 guidelines. This will show the strengths, weaknesses, opportunities and threats that exist within the organization being audited.

The matrix is intended to help auditors measure the 16 items recommended in the ILO-OSH 2001 guidelines, and which make up the OSH management system in an organization:

Policy

- Occupational safety and health policy
- Worker participation

Organizing

- Responsibility and accountability
- Competence and training
- Occupational safety and health management system documentation
- Communication

Planning and implementation

- Initial review
- System planning, development and implementation
- Occupational safety and health objectives
- Hazard prevention
 - Prevention and control measures
 - Management of change
 - Emergency prevention, preparedness and response
 - Procurement
 - Contracting

Evaluation

- Performance monitoring and measurement
- Investigation of work-related injuries, ill health, diseases and incidents, and their impact on safety and health performance
- Audit
- Management review

Action for improvement

- Preventive and corrective action
- Continual improvement

In order to assess the OSH management system and OSH performance accurately, the audit measurements should be honest and accurate. Marks need to be allocated carefully, and should be given only when the organization closely matches one of the five statements on each horizontal line of the matrix. In total, 159 separate lines of statements are used in the matrix, which provides an overall maximum score of 795 marks.

Although the audit matrix expresses the auditor's opinions about the OSH management system and OSH performance, these opinions should, wherever possible, be supported by reliable evidence. Auditors need to start the audit with an open mind, and to not pre-judge the situation. They need to maintain an investigative approach, and seek evidence and draw conclusions that are supported by facts, wherever possible.

Evidence generally falls into four broad categories:

- ➔ **Documentation.** In making the assessments required by the matrix, auditors should use a wide range of evidence sources. This will include an examination of documents relating to policies, procedures, processes, organizational communications, incidents and OSH performance records.
- ➔ **Inquiry.** The auditors should ask questions both formally and informally. Many questions will be asked verbally, in an informal manner. These are often supported by more formal questions, which might for example be asked in the form of a written request for information, or as questionnaires and surveys. Auditors should treat evidence gained in this way as "soft", because the answers they receive are the opinions of third parties, and may not be impartial, or may even be given to mislead the auditors.
- ➔ **Observation.** Auditors will also collect evidence through what they have heard, seen or touched during the audit. Observations and physical examinations are very reliable sources of audit evidence, and carry extra weight because the auditors have gathered the evidence themselves.
- ➔ **Testing and verification.** Auditors will normally perform both system tests on the OSH management system and checks on the physical work environment, equipment and tools. This involves checking that the OSH management system and the physical work environment and equipment, tools and safety systems are working as they are supposed to. Auditors will also need to check that the organization is complying with national and state laws.

The auditors need to conduct interviews with workers, supervisors, managers, senior management, contractors, contract workers, the safety and health committee, workers' representatives, and also other specialist functions such as a company nurse or doctor, or industrial hygienists. Physical inspections and walk-throughs are also essential, to ensure that the information gained from documents, records and interviews is true and accurate.

How to use the matrix

The basic principle is that, for each of the 159 horizontal lines of the matrix, the auditor will choose the statement that most closely fits the organization's status. The auditor will then allocate a mark that corresponds to the column to which the statement belongs. As explained above, these lines of statements are grouped in 16 tables, which correspond to the 16 thematic items recommended in *ILO-OSH 2001*.

As an example, let us examine item 3.1, Occupational safety and health policy.

NONE (1)	POOR (2)	FAIR (3)	GOOD (4)	EXCELLENT (5)	RATING
The organization does not have a written OSH policy.	The organization has a written OSH policy, but it does not comply with national laws and regulations.	The organization has an OSH policy that complies with national laws and regulations, but does not comply with ILO guidelines.	The organization has an OSH policy that complies with national laws and regulations, and also with ILO guidelines.	The organization has an OSH policy that complies with all national laws and regulations, ILO guidelines, and collective agreements.	
	The written OSH policy is inadequate, although it does provide a limited description of management attitudes to OSH.	The policy briefly outlines the management attitude to OSH and a commitment to prevention of work-related injuries and ill health.	The policy describes the management attitude to OSH and the total commitment to protecting workers by preventing injuries, ill health, diseases and incidents.	The policy describes the management attitude to OSH and the prevention of injury, illness, diseases and incidents, and it has been agreed in consultation with workers and their representatives.	

If the organization has no written OSH policy then the correct score would be 1 mark. If the organization has an OSH policy that meets national laws and regulations and ILO guidelines, then it would score 4 marks, unless it has also agreed the policy with workers and their representatives, in which case it would score 5 marks. We then proceed to the second line and again decide which statement most closely fits the organization's status. We proceed through each line in this way until we have completed section 3.1 of the matrix.

In order to make these judgements, auditors need to be able to find reliable evidence that ensures they can allocate the correct scores. This will allow them to identify the strengths and weaknesses, and also to identify both opportunities for improvement and possible threats to the business that need to be brought senior management's attention. This SWOT analysis will figure in the "auditor's feedback" at the bottom of each scored thematic item.

Two completed samples of item 3.2, Worker participation, are provided in Appendices 1 and 2 as examples of how to use the matrix.

We suggested that an “audit summary” be established at the end of the audit period, which takes the actual total scores of the organization for each of the 16 items audited and compares them with the maximum possible scores. A “traffic light” – red, orange or green – can then be allocated to each of the items, to highlight areas where improvement is necessary. Appendix 3 provides a completed sample of such an audit summary.

General considerations in preparing pre-audit planning

Auditors need to conduct considerable planning before starting the audit. They need to decide when the audit should take place, and establish a sensible schedule for the work. They will need to agree on this workplan with the senior management of the organization being audited, unless it is an unannounced audit.

Auditors need to plan who they want to interview, what they want to see, and what documents and records they need to examine. As the audit progresses they may want to talk to people who were not on their interview list when they made the audit plan.

Auditors should ascertain exactly what documents they will need to examine as part of their audit preparation. A sample audit preparation document is attached as Appendix 4.

Auditors need to have obtained copies of the relevant national OSH laws (both federal and state), and have a copy of the *ILO-OSH 2001* guidelines, plus documents relating to industry best practices and the standards expected by certification bodies. They need to have examined the organization’s OSH policy document to determine whether it meets the requirements of national OSH laws, regulations, approved codes of practice and the *ILO-OSH 2001* guidelines.

Auditors will need to use multiple sources of evidence in order to audit and score the OSH performance of an organization accurately. Evidence will come from examining documents relating to plans, programmes, processes, policies, procedures, rules, records, statistics and data. This information should tell them what should be happening in the business, and the performance that is expected. They can measure then performance against these expectations.

Having examined the above documentary sources of information, they then need to measure whether what was described in the documents is actually happening in reality. Interviews with senior and middle management, supervisors, workers, contractors, contract workers, and OSH and medical personnel should help check their understanding of and compliance with the OSH policy and OSH management system. Interviews should also be held with unions and workers’ representatives, and with safety and health committee members.

Auditors also need to conduct comprehensive observations of the workplace, and look at house-keeping, and the condition of facilities, machinery, equipment, tools, and devices. They should examine closely all safety equipment and devices, fire and evacuation measures, personal protective equipment (PPE), and the storage and use of hazardous materials. They will use their observations to identify “at-risk” behaviours, and look at supervision and the organization and control of work.

Auditors should also look at the procedures for controlling energy sources, machine guarding and materials handling, and at whether there is an appropriate system for managing change, and communicating changes to the workforce.

Auditors should examine worker behaviours to identify “at-risk” behaviours. They should check compliance with standard operating procedures, and that work is being performed in the way prescribed by the job safety analysis or task analysis. They should question workers to ascertain their knowledge of OSH policy, procedures and rules. They should also ask workers and supervisors about the communication of OSH expectations and OSH results.

Audits must focus on identifying weaknesses and looking for improvements. Where problems are identified, corrective actions need to be formulated and remedial measures put in place in a timely manner.

Audits should lead to the correction of weaknesses in the OSH management system and its application in the workplace. Where weaknesses exist, an improvement plan needs to be formulated and put into action. Auditors should look to see whether weaknesses identified by previous audits and inspections have been corrected.

On-site audit activities

The OSH audit is intended to assess and verify the strengths and weaknesses of the OSH management system, and to improve both this system and OSH performance. It is vitally important that everyone understands the purpose of the audit, and that it is seen as a positive measure to improve OSH management and performance. This should ensure higher standards of OSH, and a reduction of incidents and “at-risk” behaviours.

Opening interview

It is normal audit practice to begin the audit with an opening conference with senior site management. This allows the auditors to introduce themselves and explain the audit process. They will define the scope of the audit, and explain its purpose. They will also discuss the audit schedule. The schedule of activities is agreed with senior management, and communicated to each part of the organization that will be audited.

Auditors are briefed on any hazardous conditions that exist on the site, and on the controls that are used to protect workers. Auditors need to wear appropriate personal protective clothing and equipment for their on-site activities. Arrangements need to ensure that these are available, unless the auditors have their own that provides the same levels of protection.

Auditors and senior management agree a timetable for the exit interview that will be used to present the preliminary findings of the audit. Site management will be given an agreed amount of time to examine the preliminary report, and to challenge any audit findings that they disagree with, or wish to challenge, or on which they need further clarification.

Typically, at the end of the opening interview, auditors will be given an orientation tour of the site with an explanation of expected safety behaviour, emergency response and evacuation procedures. OSH control measures and required PPE are explained as well.

Programme assessment and verification

The OSH audit then moves on to programme assessment and verification by starting a comprehensive review of OSH programme documentation. The auditors will examine policies, programmes, procedures, risk assessments, standards and related documents.

They will examine accident and incident reports, first-aid injury records, safety inspection records, citations and warnings from regulatory bodies. They will look at previous audit reports, certification assessments, industrial hygiene survey reports, task analysis, job safety analyses (JSAs), material-handling assessments, process safety management documentation, and risk assessments. They will examine absence, illness and sickness rates. Supporting statistical data and corrective action logs should be reviewed.

The documentation review will be followed by a wide range of interviews with plant managers, departmental managers, supervisors, team leaders, union representatives, safety and health committee members, medical personnel and a wide range of workers. They should be questioned on their awareness of the OSH programme and its implementation. Auditors should look for concerns, and for opportunities for improvement.

The auditors should spend sufficient time on examining the workplace, and this will involve the activities of the various departments. This is when auditors should identify the degree of acceptance and the quality of implementation of OSH policies, programmes, procedures and OSH activities.

During an audit the auditors will collect a huge amount of information and data. It will be impossible for them to remember it all unless they have taken notes as the audit progresses. So, irrespective of the experience of the auditors, it is absolutely essential that they take detailed field notes.

Auditors should look at the housekeeping to see whether a clean, tidy, healthy and safe work environment exists. They should also observe work processes to see whether procedures are followed, and that hazards have been identified and are properly controlled. If the auditors have specific concerns, they may require specialist testing to be undertaken, and will then review the test reports.

Auditors should also spend some time observing both task and non-task-related behaviours. They should compare the task-related behaviours with those that are described in the task analysis, job safety analysis or permit to work.

Exit interview

An exit interview is held with senior and site management in order to share the preliminary audit results and the observations of the audit team. Site management is given the opportunity to respond to these findings and observations, and to seek or provide clarification of issues arising from the report. A date is agreed for the receipt of any responses or challenges to the audit findings that the site management wish to make. The organization is normally thanked for its cooperation and help, and a date is agreed upon for the delivery of the final report.

Final audit report

The final audit report should include the date and location of the audit, and identify all the participants who took part in or contributed information for the audit. The report should identify clearly which parts or activities of the organization were audited.

The report will include the audit findings, results and observations. It will also propose corrective actions, and set deadlines by which corrective actions or audit responses are to be completed. This would include the means of verifying corrective actions.

Audit response

When the audited organization has received the final audit report, it should respond by describing what corrective actions have been taken and what actions are planned. It is essential that every weakness, every opportunity for improvement, and every threat identified in the audit report is subject to corrective actions and improvements. A log should be created that lists all the items that need to be addressed. This should set the timelines for improvements and corrections of each item needing such action, with responsibility allocated to a designated person for that action.

Audit closure

The audit file is not normally closed until a closure statement has been prepared. This should comprise of a listing of the audit findings, together with the corrective actions relating to each one. Closure occurs only when corrective actions are complete, and have been verified.

Policy

Policy

Item 3.1 Occupational safety and health policy

	NONE (1)	POOR (2)	FAIR (3)	GOOD (4)	EXCELLENT (5)	RATING
A	The organization does not have a written OSH policy.	The organization has a written OSH policy, but it does not comply with national laws or regulations.	The organization has an OSH policy that complies with national laws and regulations, but does not comply with ILO guidelines.	The organization has an OSH policy that complies with national laws and regulations, and also with ILO guidelines.	The organization has an OSH policy that complies with all national laws and regulations, ILO guidelines, and collective agreements.	
B	The organization does not have a written OSH policy.	The written OSH policy is inadequate, although it does provide a limited description of management attitudes to OSH.	The OSH policy briefly outlines the management attitude to OSH and a commitment to prevention of work-related injuries and ill health.	The OSH policy describes the management attitude to OSH and the total commitment to protecting workers by preventing injuries, ill health, diseases and incidents.	The OSH policy describes the management attitude to OSH and the prevention of injury, illness, diseases and incidents, and it has been agreed in consultation with workers and their representatives.	
C	The organization does not have a written OSH policy.	The OSH policy has not been agreed with workers or their representatives.	The OSH policy has been agreed with only very limited consultation with workers.	The OSH policy has been agreed in full consultation with workers and their representatives.	Workers are encouraged to participate actively in all aspects of the OSH management system, and are consulted on all matters relating to OSH policies.	

NONE (1)	POOR (2)	FAIR (3)	GOOD (4)	EXCELLENT (5)	RATING
D The organization does not have a written OSH policy.	The OSH policy is not appropriate for the type or size of business.	Some elements of the OSH policy are appropriate for the type and size of business.	The OSH policy is generally appropriate for the type and size of business.	The focus of the OSH policy is to find ways to prevent workplace injuries, illnesses and diseases, and to ensure the welfare of the workforce.	
E The organization does not have a written OSH policy.	The OSH policy is not written in a concise way, and lacks clarity.	The OSH policy is not sufficiently clearly written, and is therefore not always understandable by everyone.	The OSH policy is concise and clearly written, and is understandable by everyone.	The OSH policy makes it clear that everyone has OSH responsibilities, their performance of these duties is monitored, and people are held accountable.	
F The organization does not have a written OSH policy.	The OSH policy is not effectively communicated or easily accessible to everyone in the workplace.	The OSH policy is communicated, but is not readily accessible by everyone in their place of work.	The OSH policy is generally effectively communicated, and is readily accessible to everyone in their place of work.	The OSH policy is very well communicated, and ensures that the OSH management system is compatible with or is integrated into the other enterprise organizational management systems	
G The organization does not have a written OSH policy.	The OSH policy fails to communicate the responsibilities and expectations of workers and managers.	The OSH policy provides some limited descriptions of the responsibilities and expectations of workers and managers.	The OSH policy describes the overall the responsibilities and expectations of workers and managers.	The OSH policy describes in detail responsibilities and expectations of workers and managers, making it clear that performance will be monitored and people held accountable.	

	NONE (1)	POOR (2)	FAIR (3)	GOOD (4)	EXCELLENT (5)	RATING
H	The organization does not have a written OSH policy.	There is no external communication of OSH policy, responsibilities or expectations.	Very limited communication of OSH policy responsibilities and expectations is provided to external bodies.	The OSH policy is also communicated to all contractors, visitors and new hires, and is covered in worker orientation.	The OSH policy is also communicated to external groups and the community so that they may understand the organization's attitude to OSH.	
I*	The organization does not have a written OSH policy.	The OSH policy is dated, and has not been reviewed or updated for several years.	The OSH policy is updated only infrequently, and has not been reviewed or updated for the past two years.	The OSH policy is regularly reviewed, updated, and signed by senior management.	The OSH policy is reviewed and updated at least annually. It is signed by senior management and also describes the cardinal OSH rules of the enterprise.	
OVERALL SCORE FOR ITEM 3.1 OCCUPATIONAL SAFETY AND HEALTH POLICY (max. score for this item is 45)						

Auditor's feedback
<i>Strengths</i>
<i>Weaknesses</i>
<i>Opportunities</i>

Threats

Guidance notes

OSH policy is the foundation of an effective OSH management system, and without such a policy, safety and health is not properly managed or assured.

Ideally, the policy should be no more than one A4 page long; it should be concise, and simple to understand by everyone in the organization.

The OSH policy should provide overall direction and guidance relating to occupational health and safety.

It should include a vision statement that encapsulates the organization's approach to OSH, such as " OSH FIRST" or " Maintaining an injury-free workplace" .

OSH policy should be treated as a constant value that will never change, irrespective of changing priorities within the business.

A mission statement should also describe the organization's overall objective relating to OSH – e.g. to be the safest steel company in the United States.

Management leadership needs to drive the OSH process and add value by eliminating or reducing injuries and illnesses.

OSH policy should set out the principles and guidelines for OSH decisions.

The policy should state clearly top management's commitment to safety and health.

The policy should have the signature of the president or CEO, or of the most senior manager on the site.

The policy should state the organization's commitment to compliance with regulatory requirements and collective agreements on OSH.

Workers will be consulted and encouraged to participate in all elements of OSH, and be empowered to act when they identify unsafe conditions or unsafe behaviour.

OSH policy will be regularly reviewed, updated and improved through a continuous improvement process. Review should take place at least annually.

OSH duties and responsibilities will be described, and everyone is held responsible and accountable for their own and their co-workers safety and health.

Policy

Item 3.2 Worker participation

	NONE (1)	POOR (2)	FAIR (3)	GOOD (4)	EXCELLENT (5)	RATING
A	There is no clear evidence within the organization of management encouraging or seeking to involve or get workers to participate in OSH matters.	Participation is limited to following OSH rules, procedures, and instructions. There is little input by workers in OSH matters.	Participation is encouraged by management, but is limited to dealing with specific OSH problems within the organization. Management does not get involved in planning or hazard recognition activities.	Management has clearly defined the roles and responsibilities of individual workers, and of the safety and health committee.	The management policy and systems documentation describes the importance of worker participation and involvement in creating a safe and healthy workplace.	
B	OSH communication with workers is infrequent, and tends to involve mainly small numbers of workers and be focused on supervisors.	Management has minimum communication with workers on OSH matters.	Management maintains a limited amount of communication with workers. This communication is generally a top-down process, and little evidence exists that management knows what their workers' concerns are.	There is regular and frequent dialogue with workers, and the workers' views are regarded as being very important.	The documentation describes specific worker participation goals, and the benefits that are gained for the organization and its workers. It makes safety and health communications to be vital to ensure that every person in the organization understands their roles and responsibilities.	

	NONE (1)	POOR (2)	FAIR (3)	GOOD (4)	EXCELLENT (5)	RATING
C	Workers' safety and health representatives have been appointed but rarely meet. Their role has not been defined, and they have little involvement in planning, evaluating or seeking improvement and solutions to OSH problems.	A safety and health committee has been formed, but has no clear role, and meets very infrequently. Safety and health representatives have little involvement in planning.	The enterprise has established a safety and health committee that conforms and complies with the requirements of national laws and regulations, and practice. The committee's role has been defined, and includes working with management in evaluating, planning and implementing solutions and improvements.	The enterprise has established a safety and health committee that conforms and complies with the requirements of national laws and regulations, and practice. The role of the committee has been defined, and includes hazard recognition and OSH communications. The committee also has an active role in evaluating OSH changes, and in building worker competences in OSH.	The organization ensures that all changes to the work environment and procedures are discussed with workers and their representatives. The benefits are communicated so that workers can properly understand why changes are being made, and how these changes will be beneficial. The safety and health committee is highly involved in all OSH matters, and ensures that workers' concerns are dealt with in a timely manner.	
D	Workers and their representatives are rarely consulted on changes to processes and procedures.	There is only minimal consultation with workers regarding OSH matters, and changes to processes and procedures.	There is only limited consultation with workers regarding OSH matters, and changes to processes and procedures.	There is a positive approach to involving workers in OSH matters, and this includes consultation on changes to processes and procedures.	The enterprise ensures that workers and their representatives are consulted, informed and trained on all aspects of OSH that impact on their work and safety.	
E	The organization makes no time available for workers or their representatives to have meetings inside their normal working hours.	The organization makes little time available for workers or their representatives to have meetings. These are very infrequent; they focus mainly on issues raised by management, and only rarely on issues raised by workers.	The organization does have meetings on a regular basis, but these tend to occur only once per quarter, and the agenda items for discussion tend to not include issues raised by workers or their representatives.	The organization makes time and resources available to allow regular meetings to discuss OSH issues. Workers have the opportunity to put issues on the agenda for discussion.	The organization makes time and resources available to allow workers and their safety and health representatives to actively participate in evaluating, organizing, planning and implementation of actions to improve the OSH management system.	

	NONE (1)	POOR (2)	FAIR (3)	GOOD (4)	EXCELLENT (5)	RATING
F	The OSH culture within the organization is that safety and health is an extra expense, and causes extra work to be done.	The OSH culture within the organization fails to properly see the value of good OSH procedure and practices. This negative attitude is transmitted to workers.	The OSH culture in the organization is indifferent to OSH, and takes no really positive initiatives to promote worker participation or involvement in OSH matters.	The OSH culture in the organization is positive, and this has encouraged good levels of worker involvement and participation.	The OSH culture is extremely positive, and is valued by both management and workers. Workers are fully engaged and participate widely on OSH matters.	
G	Workers feel little responsibility for OSH performance. They regard it as the responsibility of the management or the OSH professional. Job descriptions do not detail OSH performance.	Workers accept some responsibility for OSH performance, but are not given the opportunity to participate fully in OSH matters. OSH is not detailed in job descriptions.	Workers see OSH as part of their role and responsibility, and OSH is an element in their job descriptions. Workers do not receive feedback or recognition for OSH performance.	Workers see OSH as part of their responsibilities, which is stated in their job description. They are encouraged to make suggestions that will improve OSH performance. Workers receive feedback on OSH performance, but no formal award or recognition process exists.	Workers take ownership of OSH programmes; they apply them diligently, and take pride in promoting them. OSH performance is subject to a rigorous appraisal process by supervisors and managers. A reward and recognition process is in place.	
H	Workers have received very little information or training on OSH issues. They are unable to state the major hazards in their work environment, or the measures to be taken to minimize risks.	Workers received basic OSH information and training at the time of their induction. They have received no refresher or OSH competence-building training, and have limited understanding of OSH.	Workers have received basic OSH training, and some additional training regarding OSH laws, regulation and rules. They are able to identify hazards in their workplace, and state the risks that exist and the measures to be taken to minimize these risks.	Workers have received basic OSH training and refresher training. They can state the hazards in their workplace. They are capable of undertaking task analysis to identify hazards, and are able to evaluate potential solutions.	The organization has developed and use competence-building tools which ensure that all workers have a thorough understanding of OSH concepts and the site-specific risks that they may encounter. Workers are capable of undertaking hazard identification and risk assessment, and are able to conduct safety behaviour observations.	
OVERALL SCORE FOR ITEM 3.2 WORKER PARTICIPATION (max. score for this item is 40)						

Auditor's feedback
<i>Strengths</i>
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<i>Weaknesses</i>
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<i>Opportunities</i>
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<i>Threats</i>
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Guidance notes
<p>In many cases, national laws will mandate that the organization must encourage and nurture worker participation. Even if not mandated by national laws, worker participation is an essential element of an effective OSH management system, irrespective of the size or type of organization.</p> <p>Employers should ensure that workers and their representatives are consulted, informed and trained on all aspects of OSH, including emergency arrangements, associated with their work.</p> <p>Employers should make arrangements for workers and their representatives to have the time and resources to participate actively in the processes of organizing, planning, implementation, evaluation and action for improving the OSH management system.</p> <p>The organization should ensure, as appropriate, the establishment and efficient functioning of a safety and health committee, and the recognition of workers' safety and health representatives.</p>

Workers should be actively involved in emergency preparedness, task analysis, safety assessments, evaluation and revision of standard operating procedures, OSH training programmes and evaluations/audits.

Workers at every level of the organization should be actively involved in the development, implementation and continuous improvement of OSH arrangements.

Worker participation is an essential element of sound OSH arrangements, and ideally workers should be encouraged to assume ownership of the OSH process.

Workers should feel empowered to act immediately if they see unsafe conditions or at-risk behaviours in the workplace, and should have the power to stop work where they see any situation that could cause harm to people or property.

Good communications are vital to ensure that workers and management are constantly updated on OSH issues and matters.

The organization should ensure that workers have both formal and informal channels to communicate their concerns regarding OSH issues, and to be able to share their ideas to improve the OSH programme.

Organizing

Organizing

Item 3.3 Responsibility and accountability

	NONE (1)	POOR (2)	FAIR (3)	GOOD (4)	EXCELLENT (5)	RATING
A	No one in the organization has taken responsibility for OSH or the protection of workers.	Management demonstrates little interest in OSH, and fail to take overall responsibility for OSH.	The organization accepts some responsibility for OSH, but no overall control is exercised.	The organization accepts responsibility for OSH and the protection of workers.	The organization clearly demonstrates its acceptance of responsibility to protect workers and others from hazards.	
B	Roles and responsibilities have not been defined.	Roles and responsibilities have been communicated verbally, but have not been documented. Workers pay little regard to fulfilling their roles or responsibilities.	Roles and responsibilities have been communicated both verbally and in writing. When questioned, some workers were unable to state clearly what their roles and responsibilities were.	Roles and responsibilities have been communicated both verbally and in writing to most workers. When questioned, workers were able to describe their roles and responsibilities.	Roles and responsibilities have been communicated to every worker, both verbally and in writing. Workers were able to describe their roles and responsibilities in detail, and were enthusiastic about performing these.	
C	There was no measurement of performance being made, and workers were never made accountable for their performance.	There was no action taken by management to make workers accountable for performing their roles and responsibilities.	Some workers were aware of their roles and responsibilities. They were aware that they would be observed and measured only occasionally, and that this did not involve every worker.	Most workers were aware of their roles and responsibilities, and they knew that some level of observation and measurement would generally be made. Workers knew that they would generally be made accountable for their behaviour.	All workers knew exactly their roles and responsibilities, and were aware that their performance was being measured. Workers knew that they were held accountable, and that action would be taken if they failed to fulfil their role to the satisfaction of management.	

	NONE (1)	POOR (2)	FAIR (3)	GOOD (4)	EXCELLENT (5)	RATING
D	<p>The enterprise failed to define and communicate the OSH structure that was in place to manage safety and health. No one was identified as being responsible for OSH.</p>	<p>OSH was not seen as a line management function, but was placed in the hands of a safety officer. Management was disengaged from the OSH process, and workers had no clear understanding of their duties or responsibilities.</p>	<p>OSH was seen as a line management function, but, when questioned, supervisors claimed they had no time to manage safety and health issues.</p>	<p>OSH was seen as a line management function, and this was welcomed by line supervisors and managers. Senior management supported line managers, and ensured that line management was visible and able to identify where workers were not fulfilling their roles or responsibilities.</p>	<p>OSH was seen as a line management function, and every worker had a safety and health role and responsibility. The organization of health and safety had been communicated and understood by all, and workers carried out their duties and responsibilities enthusiastically. Workers understood the structure of OSH management, and who held authority for different elements of OSH.</p>	
E	<p>The supervisors in the organization showed no interest in health and safety, and focused only on maximizing production and productivity.</p>	<p>Supervisors felt little responsibility for health and safety, and did not see OSH as a line responsibility.</p>	<p>Supervisors accepted that they had responsibility for OSH, and were willing to perform this duty, but lacked the time to give it the right level of attention.</p>	<p>Supervisors accepted they had a duty to protect workers from OSH hazards. They actively involved and encouraged workers in fulfilling their OSH duties and responsibilities. They scheduled time each week to observe workers, and to provide feedback to workers on their performance.</p>	<p>Supervisors accepted they had a major responsibility to protect workers from health and safety hazards. Supervisors and managers scheduled time each day to conduct observations, and to obtain feedback from workers regarding OSH issues.</p>	

	NONE (1)	POOR (2)	FAIR (3)	GOOD (4)	EXCELLENT (5)	RATING
F	The organization has no system that promotes cooperation and communication between its workers and management. This means the organization fails to implement all the elements of an effective OSH management system.	The organization has no OSH management system that is consistently in place and being applied. OSH activity is fragmented, and frequently workers and their representatives do not receive any communications relating to OSH activities or issues. This results in poor cooperation between different sections and groups.	The organization has some elements of an effective OSH system in place. There is good cooperation and communication with some parts of the organization. This needs to be enlarged to reach all parts of the business.	The organization has an effective OSH management system, which is followed by all parts of the organization. Good communication channels exist with all parts of the business, and this ensures that everyone in the organization is kept aware of OSH issues.	The organization has an integrated approach to providing an effective and robust OSH management system. Full cooperation and excellent communication exists within all elements of the organization. This ensures an effective, holistic approach to OSH management.	
G	The organization provides very limited resources for OSH, and this allows totally inadequate OSH activity. Necessary OSH activities are not carried out because of a lack of funding.	The organization provides limited and very inadequate resources for OSH. This means there is no budget for necessary OSH efforts.	The organization provides funds to provide for basic OSH needs. Insufficient funds are made available to allow major improvements to OSH matters.	The organization provides adequate resources to allow for all normal OSH activities and requirements. These funds allow OSH to perform at a good level. Investment is made each year to improve OSH, and to fund continuous improvement.	The organization has a very comprehensive budget system, which ensures that adequate resources are available for OSH efforts. There is also a contingency fund to ensure that resources are available for non-budgeted and emergency situations. Management states that if an OSH need is essential, funds will always be made available.	

	NONE (1)	POOR (2)	FAIR (3)	GOOD (4)	EXCELLENT (5)	RATING
H	There are serious inadequacies in the identification, elimination and control of workplace hazards. The duty to identify hazards and assess risks has not been made the responsibility of a competent person.	The process of identifying, eliminating and controlling hazards is not carried out well. Some risks are not properly recognized, and are therefore not controlled to produce acceptable levels of risk.	The identification, elimination and control of hazards are not carried out to an appropriate standard. Risks are sometimes not assessed properly, and mitigation measures are not put in place.	The identification, elimination and control of hazards is generally dealt with to a good standard. Risks are generally accurately assessed, and mitigation measures are used to produce acceptable risk levels.	The organization has an outstanding programme for hazard identification and risk control, which covers processes, procedures and human behaviour. Risk assessments use both qualitative and quantitative measurements, and the results of assessments are widely communicated throughout the organization.	
I	No senior manager takes responsibility for OSH, or carries out periodic reviews of the OSH management system.	A junior manager takes responsibility for OSH issues, but fails to carry out periodic assessments or reviews of the OSH management system.	A senior manager has been appointed to take responsibility for OSH. Little time is spent talking with workers and supervisors, and only limited attention is given to dealing with OSH issues.	A senior manager takes responsibility and authority for the development and implementation of the OSH management system. Regular contact with workers and supervisors is maintained, and OSH issues are dealt with.	A senior manager is authorized to take responsibility for OSH, and maintains daily contact with workers and supervisors. OSH issues are quickly assessed and dealt with, and improvements to the OSH management system are pursued.	
OVERALL SCORE FOR ITEM 3.3 RESPONSIBILITY AND ACCOUNTABILITY (max. score for this item is 45)						

Auditor's feedback

Strengths

Weaknesses

Opportunities

Threats

Guidance notes

The organization must take overall responsibility for the protection of workers' safety and health, and provide leadership for OSH activities in the organization. The organization and its senior management should allocate responsibility, accountability and authority for the development, implementation and performance of the OSH management system and to achieve OSH objectives.

Structures and processes should be established to:

- ensure that OSH is a line management responsibility, and that this is known and accepted at all levels within the organization;
- define and communicate to members of the organization the responsibility, accountability, and authority of persons who identify, evaluate or control OSH hazards and risks;
- provide effective and visible supervision to ensure the protection of workers' safety and health;

- promote cooperation and communication between members of the organization, including workers and their representatives, to implement the elements of the organization's OSH management system;
- fulfil the principles of OSH management systems contained in relevant national guidelines, tailored guidelines or voluntary programmes, and ensure compliance with national OSH laws and regulations;
- establish and implement a clear OSH policy and measurable objectives;
- establish effective arrangements to identify and eliminate or control work-related hazards and risks and promote health at work;
- establish prevention and health promotion programmes;
- ensure effective arrangements for the full participation of workers and their representatives, and of safety and health committees if they exist;
- a person or persons at senior management level is/are appointed with responsibility, accountability and authority for (1) development, implementation, periodic review and evaluation of the OSH management system, (2) periodic reporting to the senior management on OSH performance and the OSH management system, (3) promoting the participation of all members of the organization.

Organizing

Item 3.4 Competence and training

	NONE	POOR (2)	FAIR (3)	GOOD (4)	EXCELLENT (5)	RATING
A	The organization has not established the competences required in OSH.	The organization has established the competences required for OSH only for high-risk operations and tasks requiring work permits.	The necessary competence requirements in OSH have been determined for workers within the organization. However, supervisors and managers have not been subject to any OSH competence assessment.	The necessary competence requirements in OSH have been determined for all workers and supervisors. However, managers have not been subject to OSH competence assessment.	The necessary competence requirements in OSH have been determined for all levels of workers, supervisors and managers within the organization.	
B	No competences relating to OSH have been documented or communicated.	Competences relating to OSH have been minimally documented, and have not been widely communicated.	Competences have been documented for most workers, but do not exist for supervisors and managers. They have been only partially communicated.	Competences have been documented in writing for all workers and supervisors, and have been communicated to them.	Competences have been documented in writing for all levels of workers, supervisors and managers, and have been communicated throughout the organization.	
C	No review system exists.	Competences that have been determined are not subject to an appropriate form of regular review and updating.	Competences have been determined, and some are subjected to appropriate review and updating, but this is not done systematically.	Competences are reviewed on a regular basis, and actions are taken to ensure that these competences are maintained.	Competences are reviewed on a regular basis, and actions are taken to ensure that these competences are maintained. The organization has a timetabled programme for reviews.	

	NONE	POOR (2)	FAIR (3)	GOOD (4)	EXCELLENT (5)	RATING
D	No competences have been established for contractors, or temporary or casual workers.	No competences have been established for contractors' personnel, except for those working with high-risk operations and tasks subject to work permits.	Competences have been established for some contractors' personnel, and for those working with high-risk operations and tasks subject to work permits.	Competences have been established for all contractors' personnel, and also for some temporary and casual workers.	Competences have been established for all contractors' personnel, and also for all temporary and casual workers. Contractors' personnel are required to attend a comprehensive orientation programme.	
E	A very simple induction programme exists, but focuses on work methods and task methodology and fails to deal with OSH issues or OSH responsibilities.	An induction programme exists for new workers, but fails to deal adequately with OSH issues, or to focus on the OSH duties that are expected of every worker.	New workers are provided with an orientation programme that covers the basic OSH duties and responsibilities of all workers.	New workers, those transferring to different duties and workers returning from long periods of absence are provided with a comprehensive orientation programme.	New workers, those transferring to different duties and workers returning from long periods of absence are provided with a comprehensive orientation programme. Workers sign a commitment to adhere to the cardinal OSH rules for the organization, and to follow risk mitigation measures, incident reporting, etc.	

	NONE	POOR (2)	FAIR (3)	GOOD (4)	EXCELLENT (5)	RATING
F	<p>OSH training is limited to on-the-job observation of other workers. No written training materials are used, and training is delivered mainly by verbal communication. An effective competence assessment process does not exist.</p>	<p>OSH training is limited to on-the-job observation of other workers, supplemented with some written material. No documentation system is in place to track progress, or the resulting OSH competences.</p>	<p>OSH training is provided to all workers to allow them to reach their prescribed competence level. It lacks effective assessment to guarantee that the necessary competences have been met.</p>	<p>OSH training is provided to ensure that workers have the competences needed to be able to complete work safely and without risk to their health. The training is mostly delivered through a structured programme using verbal communications, written materials and on-the-job modules.</p>	<p>OSH training is provided to ensure that workers have the competences needed to be able to complete work safely and without risk to their health. Training is very well structured, and includes classroom and on-the-job modules that develop OSH competences. An effective assessment process exists to measure results.</p>	
G	<p>The organization does not provide OSH refresher training.</p>	<p>OSH refresher training is rarely provided and, when provided, lacks substance and quality.</p>	<p>OSH refresher training is provided to only part of the workforce, and is very often subject to delays.</p>	<p>OSH refresher training is provided, but is not managed by an effective planning process. Scheduling sometimes leaves some workers having prolonged periods without refresher training.</p>	<p>OSH refresher training is provided, and is managed through a training plan which ensures that workers' competences are maintained at all times during their employment.</p>	
H	<p>Most workers do not have the necessary competences to carry out their duties and responsibilities.</p>	<p>Some workers do not have the necessary competences to carry out their duties and responsibilities.</p>	<p>The organization lacks sufficient competent OSH personnel to be able to manage all work-related hazards and risks, or to implement all the elements of the OSH management system.</p>	<p>The organization has some competent OSH personnel to identify, eliminate and control work-related hazards and risks, and to implement most elements of the OSH management system.</p>	<p>The organization has sufficient competent OSH personnel to identify, eliminate and control work-related hazards and risks, and to fully implement the OSH management system.</p>	

NONE	POOR (2)	FAIR (3)	GOOD (4)	EXCELLENT (5)	RATING
<p>I OSH training is carried out at a minimum compliance level, and lacks planning and improvement plans.</p>	<p>OSH training is carried out for some workers, but is not planned or focused on OSH competence development and improvement.</p>	<p>There is evidence of some quality OSH competence-building training. Planning exists, but focuses on immediate needs.</p>	<p>Good quality OSH training is executed in accordance with OSH needs assessments. Training plans exist, but are not totally in line with OSH strategies or continuous improvement.</p>	<p>Training is executed in accordance with a strategic plan, and focuses on the continuous improvement of OSH competences.</p>	
OVERALL SCORE FOR ITEM 3.4 COMPETENCE AND TRAINING (max. score for this item is 45)					

Auditor's feedback
<i>Strengths</i>
<i>Weaknesses</i>
<i>Opportunities</i>
<i>Threats</i>

Guidance notes

OSH competences should be defined by the employer, who should establish and maintain arrangements and systems to ensure that all persons are competent to carry out the safety and health aspects of their duties and responsibilities.

OSH training should be based on a training needs assessment that can identify the competences required to satisfy regulatory requirements and to minimize OSH hazards and risks.

In assessing competence, it is necessary to consider the attitudes, skills, knowledge, experience and practice that workers need in order to be able to perform their duties and responsibilities safely, and without risks to the health and safety of themselves and of others.

Employers should have in place or have quick access to sufficient OSH competence to be able to identify, eliminate or control work-related hazards and risks, and to be able to implement an effective OSH management system.

OSH competences should be established for all members of the organization.

OSH training should be provided to all members of the organization, and must be delivered by a competent person.

Employers must provide effective and timely initial training to all new workers, and to workers transferring jobs or returning to work after long periods of absence.

Employers must also ensure that all contractors' personnel, temporary and casual workers receive appropriate OSH information and training.

The organization must provide effective and timely refresher OSH training at appropriate intervals.

The effectiveness of OSH training must be evaluated to assess the comprehension and retention of the training.

The OSH training provided should be subject to review by workers and by the safety and health committee, where it exists.

OSH training must be properly documented, and should be appropriate to and consistent with the size and nature of the activity carried out by the organization.

OSH training programmes should be reviewed and modified as necessary to ensure their relevance and effectiveness is updated to reflect any changes which have happened, and to consider opportunities for improvement.

OSH training should be provided to all participants at no cost, and should be scheduled during working hours.

If the workers in the organization are multilingual, then training must address the different languages of the workforce.

OSH training efforts should be prioritized on activities that have the highest levels of risk, based on the degree of likelihood and severity.

Organizing

Item 3.5 Occupational safety and health management system documentation

	NONE (1)	POOR (2)	FAIR (3)	GOOD (4)	EXCELLENT (5)	RATING
A	OSH is not treated in a systematic way, and lacks even basic documentation of the OSH management system.	OSH management system is poorly documented, and is limited to an inadequate written policy statement.	OSH management system is partially documented, but fails to meet requirements as set down in the ILO guidelines.	OSH management system is fairly well documented, and sets out with reasonable clarity the policy and objectives for OSH.	OSH management system is comprehensively documented.	
B	There is no clear, documented process for managing OSH.	A very basic process for managing OSH is described.	A process for OSH management is described, but is inadequate.	The processes that are in place to manage OSH effectively are described in some detail.	Systems and processes that manage OSH effectively are in place, and are described comprehensively.	
C	Documentation does not exist that describes the key management roles and responsibilities.	A very basic and inadequate description of key management roles and responsibilities exists.	OSH management systems are described in moderate detail. The documentation shows management roles and responsibilities.	OSH systems are well described, and the documentation clearly shows their goals and objectives. Good progress is shown in the integration of OSH into business plans and systems.	OSH systems documentation shows that OSH is a demonstrable core business value, and is aligned with the overall corporate objectives. OSH management systems are seamlessly integrated into corporate business plans and systems.	

	NONE (1)	POOR (2)	FAIR (3)	GOOD (4)	EXCELLENT (5)	RATING
D	There is no systems documentation that describes the hazards and risks that are present in the organization and its activities.	Very limited OSH documentation exists relating to the hazards and risks that exist in the organization.	Documentation exists that describes some of the hazards and risks that exist within the organization.	Hazards and associated risks are generally well documented, and have mostly been subjected to sound assessment processes.	Hazards and associated risks are thoroughly documented, and have been subjected to rigorous and comprehensive assessment processes.	
E	The process for identifying, eliminating and controlling hazards is not documented.	The process for identifying hazards and risks exists only in an elementary and informal way, and is rarely documented.	Identification of hazards and risks is not always thoroughly documented. A mixture of formal and informal methods is used.	Identification of hazards and risks is thoroughly documented and properly formalized, together with mitigation measures.	A rigorous and comprehensive process exists to document all OSH hazards and risks. Controls and mitigation measures are also formally documented.	
F	There is a lack of documentation of work systems, operating procedures and prescribed task methodologies.	There is very little documentation in place relating to work systems, operating procedures and prescribed task methodologies.	A moderate amount of documentation exists relating to work systems, operating procedures and task methodologies. Some tasks have no formal documentation of procedures.	Well-documented information is maintained on work systems, operating procedures and task methodologies. Standard operating procedures are used for tasks involving significant risks.	Comprehensive and well-documented information exists on systems of work, operating procedures and task methodologies. Standard operating procedures are used for all tasks.	
G	The organization fails to maintain a recording system to track and document injuries, ill health and diseases.	The organization maintains a very basic recording system to track and document injuries, ill health and diseases.	The organization maintains a documented recording system to track and document injuries, ill health and diseases, as required by national OSH laws.	The organization maintains a well-documented recording system to track and document injuries, ill health and diseases, and ensure legal compliance and best practice.	The organization maintains a comprehensive recording system to track and document injuries, ill health, diseases and legal compliance. Data are gathered from both active and reactive monitoring.	

	NONE (1)	POOR (2)	FAIR (3)	GOOD (4)	EXCELLENT (5)	RATING
H	Workers have little access to information relating to OSH matters and OSH performance.	Workers have no formal access to information relating to OSH. OSH information is provided mainly from verbal communications with supervisors.	Workers have little formal access to information relating to OSH. OSH information comes mainly from verbal communications with supervisors, safety and health committee members, and other workers.	Workers have formal access to a comprehensive range of documentation relating to OSH and OSH performance data. In addition, safety and health committee members are given access to all OSH information. Verbal and printed materials are used, and safety meetings are also held.	Workers have formal access to a comprehensive range of documentation relating to OSH and OSH performance data. Information is accessed by written and electronic communication, and is comprehensive. Regular meetings are also held to give information and get feedback.	
I	The OSH management system does not describe any process for OSH performance measurement.	The OSH management system does not provide any documented process of OSH performance measurement.	The OSH management system documents a limited OSH performance measurement system that focuses only on reactive measurements.	The OSH management system describes in some detail a process for OSH performance measurement that involves both active and reactive monitoring.	The OSH management system describes in significant detail a process for OSH performance measurement. This involves both active and reactive monitoring.	
J	The organization has no process in place to control and update OSH systems.	The organization has a very limited and inadequate process in place to control and update OSH systems.	The organization has a basic process to maintain and update OSH system documentation.	The organization has a well-developed process for controlling, maintaining and updating documents relating to the OSH management system.	The organization has a comprehensive and secure process to control and update documents relating to the OSH management system.	
OVERALL SCORE FOR ITEM 3.5 OSH MANAGEMENT SYSTEM DOCUMENTATION (max. score for this item is 50)						

Auditor's feedback

Strengths

Weaknesses

Opportunities

Threats

Guidance notes

OSH management system documentation should be established and maintained according to the size and nature of activity of the organization.

OSH management system documentation should cover the OSH policy and objectives of the organization, and the key OSH management roles and responsibilities necessary for implementation of the OSH management system.

OSH management system documentation should cover the significant OSH hazards and risks arising from the organization's activities, and the arrangements for their prevention and control.

Documentation should cover the arrangements, procedures, instructions or other internal documents used in the framework of the OSH management system.

The OSH management system documentation should be clearly written, and presented in a way that is understood by those who have to use it. It should be periodically reviewed, revised as necessary, communicated and readily accessible to all appropriate or affected members of the organization.

OSH records should be established, managed and maintained locally and according to the needs of the organization. They should be identifiable and traceable, and their retention times should be specified.
Workers should have the right to access records relevant to their working environment and health, while respecting the need for confidentiality.
OSH records may include records arising from implementation of the OSH management system.
OSH records should be kept in compliance with the requirements of national laws and regulations relating to OSH.
OSH records should be maintained for work-related injuries, ill health, diseases and incidents.
OSH records should be kept of worker exposures, surveillance of the working environment, and workers' health.
Records should be kept of audits, assessments, inspections, incident investigations, ergonomic assessments and industrial hygiene monitoring.
Documents should be subject to periodic review and will be reviewed on changes to processes, equipment, procedures or other significant change.
Documents should be maintained relating to OSH training and competence building.
OSH records should be the results of both active and reactive monitoring.
OSH systems documentation should cover emergency arrangements and systems to deal with failure modes.

Organizing

Item 3.6 Communication

	NONE (1)	POOR (2)	FAIR (3)	GOOD (4)	EXCELLENT (5)	RATING
A	The organization has no formal policy for communicating safety and health information throughout the organization.	The organization has some very basic policies for communicating safety and health information throughout the organization.	The organization has a policy regarding the communication of safety and health information, but it is inadequate, and leads to poor communication throughout the organization.	A policy exists for both formal and informal communication of safety and health information and data throughout the organization.	A comprehensive policy exists for both formal and informal communication of safety and health information and data. Effective communication is in place between management and workers.	
B	Management makes very little effort to communicate with workers on safety and health matter, and receives little feedback from workers.	Management makes some effort to communicate informally with workers on safety and health matters, and receives some feedback from workers.	Management makes efforts to communicate formally and informally with workers on safety and health matters, and receives feedback from workers.	Management makes substantial efforts to communicate formally and informally with workers on safety and health matters. It maintains open communication channels, and encourages workers to provide feedback.	Management makes substantial efforts to communicate formally and informally with workers on safety and health matters. It maintains open communication channels, and provides feedback to workers.	
C	Management uses only very occasional informal communications on OSH matters.	Management uses limited informal communications on OSH matters, and very occasional formal communications.	Management uses both formal and informal communications on OSH matters. These communications are infrequent.	Management regularly communicates the importance of OSH by using a wide range of formal and informal communications.	Management uses every opportunity to communicate the importance of OSH by a wide range of formal and informal communications and initiatives.	

	NONE (1)	POOR (2)	FAIR (3)	GOOD (4)	EXCELLENT (5)	RATING
D	The organization has very limited collection of OSH data. There is little communication of the data collected.	The organization has limited collection of OSH information and data. There is infrequent communication of the data collected.	The organization does collect some OSH information and data, but they are inadequate. What is collected is communicated to management, and little feedback is received from workers.	The organization collects substantial OSH information and data, and these are communicated to both management and workers, using two-way formal and informal pathways and channels.	Management clearly demonstrates its strong interest and commitment to OSH through an open process of two-way formal and informal communications. These communications involve the written and spoken word, plus actions that reinforce the messages.	
E	There is no formal process for receiving, documenting and responding appropriately to internal and external communications.	There is an informal process for receiving, documenting and responding to internal and external communications, but the process is prone to error.	There is a simple formal process for receiving, documenting and responding to internal and external communications.	There is an effective and timely formal process for receiving, documenting and responding to internal and external communications.	A comprehensive, effective and timely process exists for receiving, documenting and responding to internal and external communications.	
F	Internal and external communication pathways and channels are very limited, and are rarely used for OSH matters.	Lines of communications exist primarily through supervisors, and there is little direct communication with management.	Internal and external communication pathways and channels exist, but are used infrequently for OSH matters.	Internal and external communication pathways and channels are used on a regular basis for OSH matters. A two-way flow of OSH communications is established.	Internal and external communication pathways and channels are used on a frequent basis for OSH matters. An open and frank two-way flow of OSH communications is established between workers, supervisors and managers.	
G	Internal communication of OSH information and data is kept at a minimum level.	Internal communication of OSH information is limited, and is not circulated to all levels and functions of the organization.	Internal communication of OSH information and data is not generally circulated to all levels and functions of the organization.	Internal communication of OSH information and data are shared by some relevant levels and functions of the organization.	Internal communications of OSH information and data are shared by all the relevant levels and functions of the organization.	

	NONE (1)	POOR (2)	FAIR (3)	GOOD (4)	EXCELLENT (5)	RATING
H	Management rarely responds to internal communication of OSH information and data.	Management rarely responds to internal and external communications of OSH information and data.	The organization has a communication process that ensures some of the concerns, ideas and inputs of workers and their representatives on OSH are received and considered.	The organization has an effective communication process that ensures that the concerns, ideas and inputs of workers and their representatives on OSH matters are received, considered, and responded to.	The organization has a comprehensive and effective communication process that ensures that all the concerns, ideas and inputs of workers and their representatives on OSH matters are received, considered and responded to.	
OVERALL SCORE FOR ITEM 3.6 COMMUNICATION (max. score for this item is 40)						

Auditor's feedback
<i>Strengths</i>
<i>Weaknesses</i>
<i>Opportunities</i>
<i>Threats</i>

Guidance notes

Arrangements and procedures should be established and maintained for receiving, documenting and responding to both internal and external communications related to OSH in a timely manner.

Organizations should ensure that internal communications of OSH information can flow effectively between the relevant levels and functions of the organization.

The organization should make sure that the concerns, ideas and inputs of workers and their representatives on OSH matters are received, considered and responded to in a timely manner. Workers and their representatives should be encouraged to communicate any concerns they have about OSH matters.

Both formal and informal channels and pathways should be established that will provide effective two-way communication and feedback.

Verbal and written communications should be suitable for the intended audience, and should include a feedback loop.

A methodology should be established that allows anonymous reporting or communication where workers might be afraid to communicate OSH issues because of possible consequences.

Communication practices must be in compliance with local and national laws and regulations.

A reliable and effective process needs to be in place to maintain a record of external and internal communications relating to OSH matters.

Where legal requirements require OSH documentation to be maintained for a long period of time, archives may need to be set up to keep the documents safe and secure.

Planning and implementation

Planning and implementation

Item 3.7 Initial review

	NONE (1)	POOR (2)	FAIR (3)	GOOD (4)	EXCELLENT (5)	RATING
A	A formal OSH management system does not currently exist within the organization. There is no systematic management of OSH.	No formal and effective OSH management system is in place at present. Some elements of a management system exist.	An OSH management system is partially in place, but certain key elements are missing. Documentation of the system is missing.	An effective OSH management system is in place, and is fairly well documented.	A comprehensive and effective OSH management system is in place, is operating well, and is well documented.	
B	The organization appears uninterested in OSH, and has not taken any steps to identify or analyse its current OSH processes, procedures and performance.	Management accepts that there are gaps and weaknesses in the management of OSH, but have not yet implemented a process to deal with this.	Management accepts the need to start a process to create an OSH management system.	Management accepts the need to create an effective OSH management system that complies with national and local laws and regulations.	Management accepts the need to create an effective OSH management system that fully complies with national and local laws and regulations, and is in accordance with ILO guidelines.	
C	Currently the organization has taken no action to begin to examine its current performance and identify improvement opportunities.	The organization is preparing to take action to start an assessment process to examine its OSH performance and methods.	The existing OSH management system is currently being viewed by competent personnel, and the first steps are being taken to identify current performance.	The OSH management system has been assessed by competent personnel, and documentation is in the process of being completed.	The OSH management system has been assessed by competent persons, and has been thoroughly documented.	

	NONE (1)	POOR (2)	FAIR (3)	GOOD (4)	EXCELLENT (5)	RATING
D	No review has been undertaken to ensure compliance with national and local laws.	The organization has an intention to carry out a compliance review in the future.	The organization has planned a compliance review as part of the OSH management review that is currently under way.	The organization has had a comprehensive compliance review to ensure that it complies with national and local laws and regulations, guidelines and programmes.	The organization has had a comprehensive compliance review to ensure that it complies with national and local laws and regulations, and with ILO guidelines.	
E	The organization does not have a process in place to identify satisfactorily all the hazards and risks to safety and health.	The organization has in place an informal and inadequate process for identifying hazards and risks to safety and health.	The organization has in place a process to identify, anticipate and assess some of the hazards and risks to safety and health arising from the existing or proposed work environment and work organization.	The organization has in place an effective process to identify, anticipate and assess hazards and risks to safety and health arising from the existing or proposed work environment and work organization.	The organization has in place a comprehensive and effective process to identify, anticipate and assess hazards and risks to safety and health arising from the existing or proposed work environment and work organization.	
F	The organization does not have in place a process to determine whether planned and existing controls and mitigations are adequate to eliminate hazards and control risks.	The organization has an ineffective and inadequate process to determine whether planned and existing controls are adequate to eliminate hazards and control risks.	The organization has an inadequate process that is intended to ensure that planned and existing controls are adequate to eliminate OSH hazards and control OSH risks.	The organization has an efficient process to ensure that planned and existing controls and mitigations are adequate to eliminate hazards, and to control and reduce risks.	The organization has a comprehensive and highly efficient process to ensure that planned and existing controls and mitigations are adequate to eliminate hazards, and to control and reduce risks.	
G	The organization provides no surveillance of workers' health.	Workers' health is not checked on a regular basis, and no records are kept.	Workers' health is monitored for only a small proportion of the workforce, and only where it is mandatory under national or local OSH laws.	Workers' health is monitored through a surveillance process that is compliant with national and local laws. It also follows the <i>ILO-OSH 2001</i> guidelines Section 3.12.	Workers' health is monitored through a surveillance process that is compliant with national and local laws. It also follows ILO guidelines ILO-OSH 2001 Section 3.12. Off-the-job health hazards are also monitored.	

NONE (1)	POOR (2)	FAIR (3)	GOOD (4)	EXCELLENT (5)	RATING
<p>H Workers are not consulted on OSH matters.</p>	<p>Workers are rarely consulted or involved in establishing or reviewing OSH systems, procedures and processes.</p>	<p>Management maintains a limited communication with workers regarding the establishment, review and improvement of OSH systems, procedure and processes.</p>	<p>Workers and their representatives are consulted on the process of reviewing and improving OSH systems, procedures and processes.</p>	<p>Workers and their representatives are consulted and involved in the process of reviewing OSH systems, procedures and processes. They are consulted on all proposed improvements to OSH, including setting performance standards and targets.</p>	
OVERALL SCORE FOR ITEM 3.7 INITIAL REVIEW (max. score for this item is 40)					

Auditor's feedback
<i>Strengths</i>
<i>Weaknesses</i>
<i>Opportunities</i>

Threats

Guidance notes

The organization's existing OSH management system and the relevant arrangements made under this system should be subjected to an initial review to establish a baseline position. This will be used to plan and measure future performance.

Where no OSH management system exists, or the organization is newly established, the initial review should be used to establish an effective OSH management system.

The initial review should be carried out by competent persons, who should consult with workers and/or their representatives.

The review should identify the currently applicable national laws and regulations, national guidelines, tailored guidelines, voluntary programmes and any other requirements to which the organization subscribes.

The initial review should identify, anticipate and assess hazards, and evaluate the risks to safety and health arising from both the existing and the proposed work environment and work organization.

The review should determine whether the planned or existing controls are adequate to eliminate hazards and control risks.

The initial review should analyse the data provided from worker's health surveillance.

The initial review should be comprehensively documented in writing.

The review should become the basis for making decisions regarding the implementation of the OSH management system.

The initial review provides a baseline assessment, which can be used to measure improvements of the organization's OSH management system through the continuous improvement model.

The initial review provides information that is necessary to be able to choose strategies and tactics to bring about improvements, and to plan, implement and review actions and measure results.

Planning and implementation

Item 3.8 System planning, development and implementation

	NONE (1)	POOR (2)	FAIR (3)	GOOD (4)	EXCELLENT (5)	RATING
A	The organization has not taken any steps to identify the current systems, processes and procedures that are in place. No plans have been formulated to address this issue.	No formal and effective OSH management system exists at present. The process to plan, develop and implement one has not yet been started.	Management accepts the need to start the process to create an effective OSH management system. The current system fails to comply with national and local laws.	Management has recognized the need to create an effective OSH management system that fully complies with national and local laws and regulations, and has started an implementation process.	Management recognizes the need to create an effective OSH management system that fully complies with national and local laws and regulations, and is also in alignment with ILO guidelines. Implementation is in progress.	
B	No systems documentation is being maintained that describes existing systems, processes and procedures.	Limited documentation is captured and maintained that describes existing systems, processes and procedures.	The existing OSH management system has been documented in some detail. Information relating to legal compliance with national and local regulations has not been collected or maintained.	Documentation exists that describes the existing OSH management system. The organization collects and maintains up-to-date data regarding legal compliance with both national and local regulations.	Documentation exists that describes the existing OSH management system in detail. The organization collects and maintains up-to-date data regarding legal compliance with both national and local regulations. It also monitors compliance with ILO guidelines.	

	NONE (1)	POOR (2)	FAIR (3)	GOOD (4)	EXCELLENT (5)	RATING
C	<p>Planning is conducted at its most basic level. It is reactive by nature, and focuses on problem solving. It has no focus on creating an effective OSH management system.</p>	<p>Planning is conducted at a basic level. It is mostly reactive by nature, and focuses mainly on problem solving rather than creating an effective OSH management system.</p>	<p>Effective planning is conducted for some elements of the business, but does not focus adequately on creating an effective OSH management system.</p>	<p>The existing OSH management system meets a reasonable standard. The organization is committed to planning in order to improve its existing OSH management system to be totally compliant with national and local regulations.</p>	<p>The existing OSH management system is already well developed, and complies with existing national and local laws and ILO guidelines. A continuous improvement process is in place, and there is also a process in place to ensure that opportunities for improvement are sought.</p>	
D	<p>The organization has no OSH performance measurement system in place.</p>	<p>The organization has a very limited OSH performance measurement system in place. OSH performance is rarely measured. This is rarely used for planning.</p>	<p>The organization has put some performance measurement methods in place. These are used for planning future OSH improvements.</p>	<p>The organization has defined a wide range of OSH performance measures. These are used to set performance objectives for a wide range of OSH activities.</p>	<p>The organization has a comprehensive set of OSH performance measurement measures in place. Performance objectives are consistently used for a wide range of OSH activities.</p>	
E	<p>No planning process exists that allows for adequate and appropriate OSH planning.</p>	<p>Existing planning processes do not allow for adequate or appropriate OSH planning.</p>	<p>Although a planning system is in existence for some elements of the business, it does not provide adequate or appropriate OSH planning for the entire organization.</p>	<p>A planning system is in existence for some elements of the business. It does provide adequate and appropriate OSH planning for these parts of the organization, but not for the entire activities of the organization.</p>	<p>A comprehensive planning system already exists, and this provides adequate and appropriate OSH planning for the entire organization.</p>	

	NONE (1)	POOR (2)	FAIR (3)	GOOD (4)	EXCELLENT (5)	RATING
F	No clear definitions are in place for the organization's OSH objectives.	Very limited definitions of the organization's OSH objectives exist.	Some definitions of the organization's OSH objectives exist. These are insufficient and inadequate, and fail to provide a clear picture that would allow priority setting and quantification.	Most definitions of the organization's OSH objectives exist. These are generally sufficient and adequate to allow priority setting and quantification in most cases.	Comprehensive definitions of the organization's OSH objectives exist. These are sufficient and adequate to allow priority setting and quantification.	
G	No measurement criteria exist that would allow measurement of performance against OSH objectives.	Very few measurement criteria are in operation that would allow any measurement of performance against OSH objectives.	Limited measurement criteria are in operation, and these allow some measurement of OSH performance against OSH objectives.	A wide range of measurement criteria is in operation. These are consistently used to measure OSH performance against OSH objectives.	A comprehensive range of OSH measurement criteria is in use. These are used to measure and quantify OSH performance against OSH objectives.	
H	No technical support, human or financial resources are made available for OSH planning and implementation.	Totally inadequate technical support, human and financial resources are made available for OSH planning and implementation.	Limited technical support, human and financial resources are made available for OSH planning and implementation, but are insufficient.	Technical support, human and financial resources are made available for OSH planning and implementation, and these are generally sufficient.	A very wide range of technical support, human and financial resources are made available for OSH planning and implementation, and these are sufficient to meet the needs.	
I	No OSH performance objectives exist.	A few OSH performance objectives exist, but fail to define responsibilities and clear criteria indicating what is to be done, by whom, by when.	A limited number of OSH performance objectives exist, but in some cases they fail to define responsibilities and clear criteria indicating what is to be done, by whom, by when.	A wide range of OSH performance objectives exist, and they generally define responsibilities and clear criteria indicating what is to be done, by whom, by when.	A comprehensive range of OSH performance objectives exist, and they define responsibilities and clear criteria indicating what is to be done, by whom, by when.	

NONE (1)	POOR (2)	FAIR (3)	GOOD (4)	EXCELLENT (5)	RATING
J OSH planning arrangements are non-existent in this organization.	The OSH planning arrangements in this organization are inadequate, and do not comply with the ILO guidelines.	The OSH planning arrangements in this organization are inadequate, and do not comply with all the elements covered by the ILO guidelines.	The OSH planning arrangements in this organization are generally adequate, and comply with most of the elements covered by the ILO guidelines.	The OSH planning arrangements in this organization are effective and sufficient, and comply with all the elements covered by the ILO guidelines.	
TOTAL SCORE FOR ITEM 3.8 SYSTEM PLANNING, DEVELOPMENT AND IMPLEMENTATION (max. score for this item is 50)					

<p>Auditor's feedback</p> <p><i>Strengths</i></p> <p>.....</p> <p><i>Weaknesses</i></p> <p>.....</p> <p><i>Opportunities</i></p> <p>.....</p> <p><i>Threats</i></p> <p>.....</p>

Guidance notes

Planning should be used to create an OSH management system that ensures compliance with national laws and regulations.

It should also support all the elements of the organization's OSH management system, and the continual improvement of OSH performance.

The results and data from the initial review and subsequent reviews should be used in a planning process that is adequate and appropriate, and provides protection of safety and health at work.

The OSH objectives of the organization should be clearly defined, and priorities should be set and quantified.

In preparing the plan, each performance objective must be considered and clear performance criteria be defined. Responsibilities must be defined, and there must be indicators showing what must be done, by whom, and by when.

Criteria must be established to measure accurately whether OSH performance objectives have been satisfactorily achieved.

The organization must ensure that adequate and appropriate resources are provided, including human and financial resources and technical support.

The OSH planning arrangements of the organization must cover the development and implementation of all the OSH management system elements as described in Chapter 3 of the *ILO-OSH 2001* guidelines.

Planning and implementation

Item 3.9 Occupational safety and health objectives

	NONE (1)	POOR (2)	FAIR (3)	GOOD (4)	EXCELLENT (5)	RATING
A	No OSH objectives have been formulated.	A small number of OSH objectives have been formulated, but these are not aligned with the organization's OSH policy.	A moderate number of OSH objectives have been formulated, but these are not fully aligned with the organization's OSH policy.	A wide range of OSH objectives have been formulated, and they are generally aligned with the organization's OSH policy.	A comprehensive range of OSH objectives have been formulated, and they are totally aligned with the organization's OSH policy.	
B	No OSH objectives have been formulated.	Existing OSH objectives have not been based on the findings of the initial or subsequent reviews.	Existing OSH objectives have been based on the findings of the initial or subsequent reviews. They are not always specific to the organization, or appropriate to its size and the nature of its activity.	Existing OSH objectives have been based on the findings of the initial or subsequent reviews. They are generally specific to the organization, and appropriate to its size and the nature of its activity.	Existing OSH objectives have been accurately based on the findings of the initial or subsequent reviews. They are specific to the organization, and appropriate to its size and the nature of its activity.	
C	No OSH objectives have been formulated.	Existing OSH objectives fail to ensure compliance with all relevant national laws and regulations.	Existing OSH objectives generally ensure compliance with national laws and regulations.	Existing OSH objectives generally ensure compliance with national laws and regulations. They are also consistent with the technical and business obligations of the organization.	Existing OSH objectives consistently ensure compliance with national laws and regulations. They are also consistent with the technical and business obligations of the organization.	
D	No OSH objectives have been formulated.	Existing OSH objectives are not sufficiently focused on the continual improvement of workers' health and safety.	Existing OSH objectives are in some cases focused on the continual improvement of workers' health and safety.	Existing OSH objectives are in most cases focused on the continual improvement of workers' health and safety.	Existing OSH objectives are in every case focused on the continual improvement of workers' health and safety.	

NONE (1)	POOR (2)	FAIR (3)	GOOD (4)	EXCELLENT (5)	RATING
E No OSH objectives have been formulated.	Existing OSH objectives are in many cases unrealistic and unachievable.	Existing OSH objectives are in some cases unrealistic, and therefore unachievable.	Care is taken to ensure that OSH objectives are in most cases realistic, and have a reasonable chance of being achieved.	Considerable care is taken to ensure that OSH objectives are in all cases realistic, and are confidently expected to be achievable.	
F No OSH objectives have been formulated.	Existing OSH objectives are rarely documented.	Existing OSH objectives are generally documented, but are not communicated to all relevant functions or levels of the organization.	Existing OSH objectives are regularly documented, but are not always communicated to all relevant functions or levels of the organization.	Existing OSH objectives are thoroughly and regularly documented, and are communicated to all relevant functions and levels of the organization.	
G No OSH objectives have been formulated.	OSH objectives are not written as performance objectives, and fail to indicate clearly how the required outcomes can be achieved.	OSH objectives are not written as performance objectives that indicate clearly the expected standards or the measures to be used to indicate that the objectives have been achieved.	Most OSH objectives are written as performance objectives that clearly indicate what the organization wants to achieve, and how it intends to measure whether the objectives have been achieved.	All OSH objectives are written as performance objectives that clearly indicate what the organization wants to achieve, and how it intends to measure whether the objectives have been achieved.	
H No OSH objectives have been formulated.	OSH objectives exist, but are rarely reviewed, evaluated or updated.	OSH objectives reviewed, evaluated and updated on a random basis.	OSH objectives are reviewed, evaluated and updated on a regular basis. Some effort is made to seek improvements in OSH protection, and to improve OSH performance.	Considerable effort is made to ensure that all OSH objectives are reviewed, evaluated and updated on a regular basis. Every effort is made to seek improvements in OSH protection, and to improve OSH performance.	
OVERALL SCORE FOR ITEM 3.9 OCCUPATIONAL SAFETY AND HEALTH OBJECTIVES (max. score for this item is 40)					

Auditor's feedback
<i>Strengths</i>
.....
<i>Weaknesses</i>
.....
<i>Opportunities</i>
.....
<i>Threats</i>
.....

Guidance notes
OSH objectives must be consistent with the organization's safety and health policy.
OSH objectives should be based on the initial or subsequent reviews.
OSH objectives should allow easy and reliable measurement to establish whether they have been met.
OSH objectives should be specific to the organization, and should be appropriate to and in accordance with the size and nature of activity of the organization.
OSH objectives should be appropriate to the complexity of the activities undertaken by the organization.
OSH objectives should be consistent with all relevant and applicable national laws and regulations.
OSH objectives should be in alignment with the technical and business obligations of the organization relating to OSH.

OSH objectives should be focused on continuous improvement of workers' OSH protection, and on achieving the best OSH performance.

In setting OSH objectives, it is essential that they are both realistic and achievable.

OSH objectives must be properly documented and communicated to all relevant functions, and through all levels of the organization.

OSH objectives should be periodically evaluated and reviewed, and updated where necessary.

OSH objectives should take the elements of safety and health policy and facilitate their transfer into operational use.

Planning and implementation

Hazard prevention – Item 3.10.1 Prevention and control measures

	NONE (1)	POOR (2)	FAIR (3)	GOOD (4)	EXCELLENT (5)	RATING
A	No system is in place to identify hazards and risks to workers' safety.	An informal system exists that is supposed to identify hazards and evaluate risks relating to health and safety. The system in place is not fit for purpose.	A formal system exists for identifying hazards and evaluating risks relating to workers' safety and health. This system is not totally effective.	A well-developed system for identifying hazards and evaluating risks relating to workers' safety and health is in place. This system is working effectively.	A comprehensive and robust system for identifying hazards and evaluating risks relating to workers' safety and health is in place. This system is operating very effectively.	
B	Very few preventive and protective measures are in operation. Personal protective equipment (PPE) is sometimes issued to workers, but is not always appropriate or does not control the risks properly.	Preventive and protective measures are mostly in operation, but are not dealt with consistently and do not provide effective protection. PPE is sometimes issued to cover risks, and other protective measures are only rarely used.	Preventive and protective measures are in operation, but do not always adhere to the following prescribed hierarchy: <ul style="list-style-type: none"> • Eliminate the hazard. • Control the hazard or risk at source. • Minimize hazards and risks by using safe work systems and administrative controls. Most residual hazards and risks are controlled by appropriate PPE.	Preventive and protective measures are in operation, and generally adhere to the following prescribed hierarchy: <ul style="list-style-type: none"> • Eliminate the hazard. • Control the hazard or risk at source. • Minimize hazards and risks by using safe work systems and administrative controls. All residual hazards and risks are controlled by appropriate PPE.	Preventive and protective measures are in operation, and strictly follow the following hierarchy: <ul style="list-style-type: none"> • Eliminate the hazard. • Control the hazard or risk at source. • Minimize hazards and risks by using safe work systems and administrative controls. All residual hazards and risks are controlled by appropriate PPE.	

NONE (1)	POOR (2)	FAIR (3)	GOOD (4)	EXCELLENT (5)	RATING
C Hazard prevention and control procedures or arrangements have rarely been established. Where they do exist, they are in most cases not adapted to the hazards and risks that exist and are encountered by the organization.	Hazard prevention and control procedures or arrangements have been established, but fail to control all hazards. Where they do exist, they are frequently not adapted to the hazards and risks that exist and are encountered by the organization.	Hazard prevention and control procedures or arrangements have been established for most hazards. These are in some cases adapted to the particular hazards and risks that exist and are encountered by the organization.	Hazard prevention and control procedures or arrangements have been widely established. These are in most cases adapted to the particular hazards and risks that exist and are encountered by the organization.	Hazard prevention and control procedures or arrangements have been comprehensively established. These are adapted to the particular hazards and risks that exist and are encountered by the organization.	
D No review or modification process is in place to ensure that hazards and risks are identified, assessed and controlled.	No formal review or modification process exists to ensure that the measures to identify, assess, and control hazards and risks are updated and improved.	Hazard prevention and control procedures or arrangements are reviewed and modified infrequently.	Hazard prevention and control procedures or arrangements are reviewed and modified as necessary on a regular basis.	Hazard prevention and control procedures or arrangements are reviewed and modified as necessary on a frequent basis.	
E The organization generally fails to follow or comply with good practice or national laws and regulations relating to hazard identification, assessment and control.	The organization at times fails to follow or comply with good practice or national laws and regulations relating to hazard identification, assessment and control.	The organization mostly follows or complies with good practice or national laws and regulations relating to hazard identification, assessment and control.	Hazard prevention and control procedures or arrangements generally comply with national laws and regulations, and reflect good practice.	Hazard prevention and control procedures or arrangements comply fully with national laws and regulations, and reflect good practice.	
F No system is in place to identify hazards and risks to workers' safety. There is no consideration of the current state of knowledge, information and reports from labour inspectorates, or any other appropriate source.	Hazard prevention and control procedures or arrangements are inadequate, and fail to consider the current state of knowledge, information and reports from labour inspectorates, and other appropriate sources.	Hazard prevention and control procedures or arrangements frequently consider the current state of knowledge, information and reports from labour inspectorates, and other appropriate sources.	Hazard prevention and control procedures or arrangements generally consider the current state of knowledge, information and reports from labour inspectorates, OSH service organizations and other appropriate sources.	Hazard prevention and control procedures or arrangements systematically consider the current state of knowledge, information and reports from labour inspectorates, OSH service organizations and other appropriate sources.	
OVERALL SCORE FOR ITEM 3.10.1 PREVENTION AND CONTROL MEASURES (max. score for this item is 30)					

Auditor's feedback
<i>Strengths</i>
<i>Weaknesses</i>
<i>Opportunities</i>
<i>Threats</i>

Guidance notes
<p>Hazards and risks to worker's safety and health should be identified and assessed on an ongoing basis. Preventive and protective measures should be implemented in the following order of priority:</p> <ul style="list-style-type: none"> (a) Eliminate the hazard or risk. (b) Control the hazard or risk at source, through the use of engineering controls. (c) Minimize the hazard or risk by the design of safe work systems, organizational or administrative control measures. (d) Where residual hazards or risks cannot be controlled by collective measures, the employer should provide for appropriate personal protective equipment, including clothing, at no cost, and implement measures to ensure its use and maintenance. <p>Hazard prevention and control procedures or arrangements should be established, and should:</p> <ul style="list-style-type: none"> (a) be adapted to the hazards and risks encountered by the organization; (b) be reviewed and modified, if necessary, on a regular basis; (c) comply with national laws and regulations, and reflect good practice; (d) consider the current state of knowledge, including information or reports from organizations, such as labour inspectorates, OSH services and other appropriate services and sources.

Planning and implementation

Hazard prevention – Item 3.10.2 Management of change

	NONE (1)	POOR (2)	FAIR (3)	GOOD (4)	EXCELLENT (5)	RATING
A	There is no system within the organization to capture internal or external change.	There is no formal system in place that effectively captures internal or external change.	A system exists to capture internal and external changes, but it is not consistently used.	There is a formal system that captures internal and external changes. This is widely used, and is generally effective.	There is a formal system that captures all internal and external changes. This is extensively used throughout the organization, and has proved to be very effective.	
B	Internal changes in respect of staffing, new processes, working procedures or organizational structure, including acquisitions and mergers, are not captured or factored into a management of change programme.	Internal changes in respect of staffing, new processes, working procedures or organizational structure, including acquisitions and mergers, are not systematically captured or factored into a management of change programme.	Internal changes in respect of staffing, new processes, working procedures or organizational structure, including acquisitions and mergers, are captured from time to time, and are then factored into a management of change programme.	An effective system exists that generally captures most internal changes in respect of staffing, new processes, working procedures or organizational structure, including acquisitions and mergers. The changes are then factored into an effective management of change programme.	A highly effective system exists that captures all internal changes in respect of staffing, new processes, working procedures or organizational structure, including acquisitions and mergers. All changes are then factored into an effective management of change programme.	

	NONE (1)	POOR (2)	FAIR (3)	GOOD (4)	EXCELLENT (5)	RATING
C	External changes, including changes to national laws and regulations, or improvements in OSH knowledge and technology, are not evaluated or factored into a management of change programme.	External changes, including changes to national laws and regulations, or improvements in OSH knowledge and technology, are not systematically captured, evaluated or factored into a management of change programme.	Most external changes, including changes to national laws and regulations, or improvements in OSH knowledge and technology, are captured, evaluated and factored into a management of change programme.	An effective system exists that generally captures all external changes, including changes to national laws and regulations, and improvements in OSH knowledge and technology. All changes are factored into an effective management of change programme.	A highly effective system exists that captures all external changes, including changes to national laws and regulations, and improvements in OSH knowledge and technology. Continuous improvement changes are tracked, and all changes are then factored into a highly effective management of change programme.	
D	When internal or external changes are implemented, there is no system in place that demands that a workplace hazard identification and risk assessment be carried out.	When internal or external changes are implemented, there is no effective system in place that demands that a workplace hazard identification and risk assessment be carried out.	When internal or external changes are implemented, there is a system in place that demands that a workplace hazard identification and risk assessment be carried out.	An effective system exists that ensures that internal or external changes are generally subjected to a workplace hazard identification and risk assessment.	A highly effective system exists that ensures that internal or external changes are always subjected to a workplace hazard identification and risk assessment.	
E	There is no system in place to ensure that workers, their representatives, and the safety and health committee are informed or consulted regarding changes.	There is no formal or effective system in place that ensures that workers, their representatives, and the safety and health committee are consistently informed or consulted regarding changes.	There is a system in place that should ensure that workers, their representatives, and the safety and health committee are consistently informed and consulted regarding changes. This is not consistently used.	There is an effective system in place that is used regularly to ensure that workers, their representatives, and the safety and health committee are consistently informed and consulted regarding changes.	There is a robust and highly efficient system in place that ensures that workers, their representatives, and the safety and health committee are consistently informed and consulted regarding changes. This is extensively used, and is also communicated to contractors' personnel.	

NONE (1)	POOR (2)	FAIR (3)	GOOD (4)	EXCELLENT (5)	RATING
<p>F</p> <p>The organization does not have in place an effective system for communicating internal and external changes to everyone who may be affected.</p>	<p>The organization has a system that could allow communication of internal and external changes to everyone affected. This system is very rarely used.</p>	<p>The organization has a system that can communicate all internal and external changes to everyone who may be affected. This system is not frequently used.</p>	<p>The organization has an effective system that can be used to communicate all internal and external changes to everyone who may be affected by the change. This system is used frequently.</p>	<p>The organization has an outstanding system that is used to communicate all internal and external changes effectively to everyone who may be affected by the change. This system is used in respect of all changes.</p>	
OVERALL SCORE FOR ITEM 3.10.2 MANAGEMENT OF CHANGE (max. score for this item is 30)					

Auditor's feedback
<i>Strengths</i>
<i>Weaknesses</i>
<i>Opportunities</i>
<i>Threats</i>

Guidance notes

The impact on OSH caused by internal and external changes should be evaluated, and appropriate steps should be taken before the changes are introduced.

Internal changes are those such as staffing, new processes, working procedures, organizational structures or acquisitions.

External changes are those that are brought about because of changes in national laws or regulations, organizational mergers, or developments and improvements in OSH knowledge and technology.

A workplace hazard identification and risk assessment should be carried out before any modification or introduction of new work methods, materials, processes, tools or machinery.

Such an assessment should be carried out in consultation with and involving workers and their representatives, and the safety and health committee.

Implementation of a “decision to change” should ensure that all affected members of the organization are properly informed and trained.

Changes that could affect external organizations (such as the fire brigade, contractors or suppliers) should be communicated to these bodies as appropriate.

Planning and implementation

Hazard prevention – Item 3.10.3 Emergency prevention, preparedness and response

	NONE (1)	POOR (2)	FAIR (3)	GOOD (4)	EXCELLENT (5)	RATING
A	No emergency prevention, preparedness or response arrangements have been established or maintained.	No formal arrangements for emergency prevention, preparedness or response are in place except for a small number of portable fire extinguishers.	Basic formal arrangements for emergency prevention, preparedness and response are in place, but are not regularly maintained. These minimally identify the potential for accidents and emergencies.	Formal arrangements for emergency prevention, preparedness and response are in place, and these are regularly maintained. An effective system is in place to prevent OSH risks associated with accident and emergency situations. These arrangements are appropriate for the size and type of the business.	Comprehensive and robust arrangements exist for emergency prevention, preparedness and response, and these are regularly maintained. An effective system is in place to prevent OSH risks associated with accident and emergency situations. These arrangements are entirely appropriate to the size and type of the organization's business.	
B	No information, communication or coordination is provided to protect persons in the event of an emergency.	The only information provided is the telephone number of emergency services. Instructions for the operation of the portable fire extinguishers are provided.	Most workers understand the basic things they are required to do in an emergency situation. Evacuation procedures are communicated to all, and reporting of emergency situations to management is also generally understood.	The organization has a formal and effective emergency plan in place that focuses on emergency response. Workers are generally well informed on what they are required to do in the event of an emergency and in the reporting of such events.	The organization has a comprehensive emergency plan in place that focuses on emergency prevention, preparedness and response. All workers are fully informed on their duties and responsibilities in the event of an emergency.	

	NONE (1)	POOR (2)	FAIR (3)	GOOD (4)	EXCELLENT (5)	RATING
C	<p>The only information provided is the telephone number of emergency services (if at all). No emergency lighting or exit signage is in place.</p>	<p>Information is provided on external emergency services, including the local accident and emergency hospital. Fire exit signs and emergency lighting are in place.</p>	<p>The organization provides information and instructions relating to communicating with local emergency response services and the relevant authorities.</p>	<p>A formal emergency plan has been prepared that provides detailed information on contacting local emergency response providers, and this has been communicated to the workers.</p>	<p>Comprehensive emergency plans have been prepared that provide detailed information on contacting local emergency response providers. These arrangements have been communicated to and are understood by the workforce.</p>	
D	<p>No first aid or medical assistance is provided; firefighting equipment is not adequate, and is poorly maintained.</p>	<p>The organization has a small number of workers who are trained first aiders and are capable of providing basic first aid and resuscitation. They are capable only of handling very minor injuries to a few people.</p>	<p>The organization has a good number of workers who are trained first aiders, and are capable of providing basic first aid and cardiopulmonary resuscitation (CPR). A nurse is also available to deal with medical issues. These people are capable only of handling very minor injuries to a few people.</p>	<p>The organization has an adequate number of workers who are trained first aiders, and are capable of providing basic first aid and CPR. They also have a nurse or physician available to deal with injuries and medical issues. The medical help and facilities are adequate for the size and type of the organization's business.</p>	<p>The organization has a doctor and nurse and a medical service clinic to deal with any minor injuries or illness caused through emergency situations. They also have workers trained in first aid and CPR, including the use of automated external defibrillation. The medical help and facilities are more than adequate for the size and type of the organization's business.</p>	
E	<p>No training is provided to workers on emergency prevention, preparedness or response, and no exercises are undertaken to test responses to emergency situations.</p>	<p>Limited basic training on emergency response is provided as part of the induction programme for new workers. No exercises or drills are undertaken, and no refresher training is provided.</p>	<p>Basic training on emergency response is provided at the induction of new workers, and refresher training is provided occasionally. Exercises and drills are undertaken, but only involve occasional evacuation drills.</p>	<p>Extensive training is provided to workers on emergency response; this starts at induction and is then refreshed at regular intervals. Exercises and drills are undertaken at least once per year, and address typical emergency situations.</p>	<p>A wide range of training is provided to workers on response to emergency situations. Exercises and drills are undertaken at least twice per year. Joint training exercises are arranged with local emergency response services.</p>	

	NONE (1)	POOR (2)	FAIR (3)	GOOD (4)	EXCELLENT (5)	RATING
F	The organization has not sought cooperation from external emergency services or other bodies. It is very poorly prepared to deal with any emergency.	The organization has very little cooperation with external emergency services, and is poorly prepared to deal with any serious emergency.	The organization has established some cooperation with the external emergency services and responders. Preparation for emergencies needs to be improved.	The organization cooperates with external emergency services regularly and effectively. Occasional joint emergency planning meetings are held with neighbouring organizations and local external emergency service providers.	The organization has very close cooperation with external emergency services and bodies. Reciprocal emergency response arrangements are in place with neighbouring organizations. Close cooperation is in place with ambulance services and accident and emergency hospitals.	
OVERALL SCORE FOR ITEM 3.10.3 EMERGENCY PREVENTION, PREPAREDNESS AND RESPONSE (max. score for this item is 30)						

Auditor's feedback
<i>Strengths</i>
<i>Weaknesses</i>
<i>Opportunities</i>

Threats

Guidance notes

Emergency prevention, preparedness and response arrangements should be established and maintained. The arrangements should identify the potential for accidents and emergency situations, and address the prevention of OSH risks associated with them. These arrangements should be appropriate to the size and nature of activity of the organization.

The organization should ensure that the necessary information, internal communication and coordination is provided to protect all people in the event of an emergency at the worksite.

The organization should provide information and communication with the relevant competent authorities, the neighbourhood, and emergency response services.

The organization must be able to address first-aid and medical assistance needs, as well as firefighting and evacuation of all people at the worksite.

The organization must provide relevant information and training to all members of the organization, at all levels, including regular exercises in emergency prevention, preparedness and response procedures.

Emergency prevention, preparedness and response arrangements should be established in cooperation with external emergency services and other bodies where applicable.

Planning and implementation

Hazard prevention – Item 3.10.4 Procurement

	NONE (1)	POOR (2)	FAIR (3)	GOOD (4)	EXCELLENT (5)	RATING
A	Procurement is not subject to any formal procedures or controls.	Procurement does not consistently follow procedures to ensure that OSH is considered in procurement decisions.	Formal procurement procedures are in place, but are not consistently followed. This sometimes means that OSH is not considered in procurement decisions.	An effective procurement policy is in place, and this lays down procedures that require that OSH be considered. These procedures are generally followed.	A comprehensive procurement policy is in place, and this lays down procedures that must be followed. These procedures are followed at all times, and ensure that OSH is considered in procurement decisions.	
B	OSH requirements for the organization have not been identified, evaluated or incorporated into purchasing and leasing specifications.	In most instances, OSH requirements for the organization have not been identified, evaluated or incorporated into purchasing and leasing specifications.	OSH requirements for the organization have generally been identified, evaluated and incorporated into purchasing and leasing specifications.	An effective procedure is in place to ensure that OSH requirements for the organization have generally been identified, evaluated and incorporated into purchasing and leasing specifications.	A comprehensive procedure is in place to ensure that OSH requirements for the organization have been identified, evaluated and incorporated into purchasing and leasing specifications.	
C	The organization totally fails to consider national laws and regulations, or its own OSH requirements, prior to the procurement of goods and services.	The organization regularly fails to consider national laws and regulations, or its own OSH requirements, prior to the procurement of goods and services.	The organization generally considers national laws and regulations, and its own OSH requirements, prior to the procurement of goods and services but this is not done consistently.	The organization has an effective process that requires that national laws and regulations and its own OSH requirements be considered prior to the procurement of any goods and services.	The organization has a highly effective process in place that ensures that national laws and regulations and its own OSH requirements are considered prior to the procurement of goods and services.	

	NONE (1)	POOR (2)	FAIR (3)	GOOD (4)	EXCELLENT (5)	RATING
D	There is no system in place to check that items procured are safe or comply with the OSH requirements for their use.	There is not a consistent and effective system in place to check that items procured are safe or comply with the OSH requirements for their use.	The organization has a system in place to check that items procured are safe and comply with the OSH requirements for their use. However, this does not always happen before they are put into use.	The organization has an effective process in place to ensure that all goods and services procured conform to OSH requirements and standards before they are used.	The organization has a robust and highly effective process in place to ensure that all goods and services procured conform to OSH requirements and standards before they are used.	
E	There is no system in place to update procurement requirements resulting from changes or improvements in OSH specifications, standards, or the organization's own OSH requirements.	There is no system in place to regularly update procurement requirements resulting from changes or improvements in OSH specifications, standards, or the organization's own OSH requirements.	There is a system in place to update procurement requirements resulting from changes or improvements in OSH specifications, standards, and the organization's own OSH requirements. This is only occasionally used, however.	An effective system is in place to update procurement requirements, and to ensure compliance with OSH specifications, standards, and the organization's own OSH requirements. This is generally used.	A highly effective system is in place to update procurement requirements, and to ensure compliance with OSH specifications, standards, and the organization's own OSH requirements. This is consistently used.	
OVERALL SCORE FOR ITEM 3.10.4 PROCUREMENT (max. score for this item is 25)						

Auditor's feedback
<i>Strengths</i>
<i>Weaknesses</i>

Opportunities

Threats

Guidance notes

Procedures should be established and maintained to ensure that OSH requirements for the organization are identified, evaluated, and incorporated into purchasing and leasing specifications.

An effective process needs to ensure compliance with OSH requirements, and purchasing and leasing specifications.

The organization should have in place a process to ensure that the requirements of national laws and regulations, and its own OSH requirements, are identified prior to the procurement of goods and services.

Effective arrangements should be made to ensure that items procured are in conformance with OSH requirements before they are used.

Planning and implementation

Hazard prevention – Item 3.10.5 Contracting

	NONE (1)	POOR (2)	FAIR (3)	GOOD (4)	EXCELLENT (5)	RATING
A	The organization has no arrangements to ensure that its own OSH requirements or equivalent are applied to contractors or their workers.	No formal arrangements exist to ensure that the organization's own OSH requirements or equivalent are applied to contractors or their workers.	Arrangements do exist to ensure that the organization's own OSH requirements or equivalent are applied to contractors and their workers. These are not always followed.	Arrangements do exist to ensure that the organization's own OSH requirements or equivalent are applied to contractors and their workers. These are generally closely followed.	Comprehensive arrangements exist to ensure that the organization's own OSH requirements or equivalent are applied to contractors and their workers. These are diligently followed.	
B	No selection and evaluation process is in place to ensure that contractors chosen to perform work are competent, or will comply with the organization's OSH requirements.	No formal selection and evaluation process is in place to ensure that contractors chosen to perform work are competent, or will comply with the organization's OSH requirements.	A very basic selection and evaluation process exists to ensure that contractors chosen to perform work are competent, and will comply with the organization's OSH requirements.	An effective formal selection and evaluation process exists to ensure that contractors chosen to perform work are competent, and will comply with the organization's OSH requirements.	A robust and highly effective system exists to select and evaluate contractors. This ensures that contractors chosen to perform work are competent, and will comply with the organization's OSH requirements.	
C	There is no effective ongoing communication or coordination between appropriate levels of the organization and the contractor before work commences.	There is infrequent and limited ongoing communication and coordination between appropriate levels of the organization and the contractor before the work commences.	There is some regular, ongoing communication and coordination between appropriate levels of the organization and the contractor before work commences.	Regular ongoing communication and coordination between appropriate levels of the organization and the contractor occur before work commences. This includes problem solving and reinforcement of OSH requirements.	Extensive ongoing communication and coordination exists between appropriate levels of the organization and the contractor before work commences. This includes establishing cardinal OSH rules and reinforcing OSH requirements.	

	NONE (1)	POOR (2)	FAIR (3)	GOOD (4)	EXCELLENT (5)	RATING
D	Hazards and the measures to prevent and control them are not communicated to contractors before work commences.	Hazards and the measures to prevent and control them are poorly and ineffectively communicated to contractors before work commences.	Hazards and the measures to prevent and control them are not fully or effectively communicated to contractors before work commences.	Hazards and the measures to prevent and control them are generally effectively communicated to contractors before work commences.	Hazards and the measures to prevent and control them are fully and very effectively communicated to contractors before work commences.	
E	No arrangements exist for the reporting of work-related injuries, ill health, diseases or incidents among contractors' workers while performing work for the organization.	Informal arrangements exist for the reporting of work-related injuries, ill health, diseases and incidents among contractors' workers while performing work for the organization.	Formal arrangements exist for the reporting of work-related injuries, ill health, diseases and incidents among contractors' workers while performing work for the organization, and are generally complied with.	Effective formal arrangements exist for the reporting of work-related injuries, ill health, diseases and incidents among contractors' workers while performing work for the organization. These are closely monitored to ensure compliance.	Comprehensive formal arrangements exist for the reporting of work-related injuries, ill health, diseases, incidents and near-misses among contractors' workers.	
F	The organization does not provide any relevant workplace safety and health hazard awareness and training to contractors or their workers before work commences, or as it progresses.	The organization does not provide sufficient relevant workplace safety and health hazard awareness and training to contractors or their workers before work commences, or as it progresses.	The organization does provide some relevant workplace safety and health hazard awareness and training to contractors and their workers before work commences, and as it progresses.	The organization does generally provide relevant workplace safety and health hazard awareness and training to contractors and their workers before work commences, and as it progresses.	The organization provides excellent relevant workplace safety and health hazard awareness and training to contractors and their workers before work commences, and as it progresses.	
G	There is no effective monitoring of contractors' OSH performance or activities on site. Contractors work without any supervision or control.	There is little and ineffective monitoring of contractor's OSH performance on site, and contractors work with little supervision or control.	There is limited effective monitoring of contractor's OSH performance and activities on site. Some supervision and control of contractors exists.	There is effective monitoring and control of contractors' OSH performance and activities on site. Corrective actions are taken when OSH procedures are not followed.	A robust programme exists to monitor and control contractors' OSH performance. Contractors are regularly observed and evaluated. Deviations are not tolerated.	
OVERALL SCORE FOR ITEM 3.10.5 CONTRACTING (max. score for this item is 35)						

Auditor's feedback
<i>Strengths</i>
<i>Weaknesses</i>
<i>Opportunities</i>
<i>Threats</i>

Guidance notes
<p>Arrangements should be established and maintained for ensuring that the organization's safety and health requirements, or at least the equivalent, are applied to contractors and their workers.</p> <p>Arrangements should be established for contractors working on site, and should include OSH criteria in the procedures for evaluating and selecting contractors, and to allow competence and capability to be established before the contract is awarded.</p> <p>There should be effective, ongoing communication and coordination between appropriate levels of the organization and the contractor before they commence work. This should include provisions for communicating hazards, and the measures to prevent and control them.</p> <p>Arrangements should be established for reporting work-related injuries, ill health, diseases and incidents among the contractors' workers while performing work for the organization.</p> <p>Relevant workplace safety and health hazard awareness and training for contractors or contractors' workers should be provided before work commences and as it progresses, as necessary.</p> <p>The OSH performance of contractors' activities on site must be regularly monitored to ensure that they follow site OSH procedures and arrangements.</p> <p>If a contractor is allowed to subcontract work, then exactly the same OSH requirements must be met by the subcontractor as those imposed by the organization on the contractor.</p>

Evaluation

Evaluation

Item 3.11 Performance monitoring and measurement

	NONE (1)	POOR (2)	FAIR (3)	GOOD (4)	EXCELLENT (5)	RATING
A	No procedures exist to monitor, measure or record OSH performance.	Very basic procedures exist to monitor, measure and record OSH performance, but these are inadequate, and are not regularly used.	Procedures exist to monitor, measure and record OSH performance, but these are outdated, and have not been reviewed for some time.	A range of procedures exist to monitor, measure and record OSH performance on a regular basis. A process exists to develop, establish and review many of the measurements to be taken.	A wide range of procedures exist to monitor, measure and record OSH performance on a regular basis. A formal process exists to develop, establish and review all the measurements to be taken.	
B	No one has been made responsible, accountable, or has the authority for monitoring OSH performance.	No one has been made responsible or accountable for monitoring OSH performance.	The responsibility for monitoring, measuring and recording OSH performance is not allocated to all levels in the management structure.	An effective process exists for monitoring, measuring and recording OSH performance. Responsibility, accountability and authority have been allocated for this at different levels of management.	A comprehensive process exists for monitoring, measuring and recording OSH performance. Responsibility, accountability and authority for this have been allocated at every level of the management structure.	
C	No performance indicators have been developed.	A very limited number of performance indicators have been developed. These are not entirely appropriate to the size and type of business.	A modest number of performance indicators have been developed, and are in use. They fail to measure all aspects of OSH performance, and are not all appropriate to the size and type of business.	A wide number of OSH performance indicators have been developed, and are in use. They measure most aspects of OSH performance, and are appropriate to the size and type of the organization's business.	A comprehensive OSH performance measurement system exists that measures all aspects of OSH performance. The performance indicators are totally appropriate to the size and nature of the organization's business.	

	NONE (1)	POOR (2)	FAIR (3)	GOOD (4)	EXCELLENT (5)	RATING
D	No performance indicators have been developed or are in use.	Existing performance indicators are mostly qualitative in nature, and generally are not based on the organization's identified hazards and risks.	Existing performance indicators are generally qualitative in nature, and are not sufficiently based on the organization's identified hazards and risks.	Existing performance indicators are varied, and are a mixture of qualitative and quantitative measures that are generally based on the organization's identified hazards and risks.	A thorough set of qualitative and quantitative OSH performance indicators are in place that cover all aspects of OSH performance, and focus strongly on the identified hazards and risks of the organization.	
E	No performance indicators have been developed or are in use.	Existing performance indicators fail to measure all the commitments made in the OSH policy and objectives.	Existing performance indicators measure only a few of the commitments made in the OSH policy and objectives.	Existing performance indicators generally measure most of the commitments made in the OSH policy and objectives.	Existing performance indicators measure all the commitments made in the OSH policy and objectives.	
F	No performance indicators have been developed or are in use.	Performance monitoring and measurement are focused on reactive monitoring, and fail to look for active or preventive solutions.	Performance monitoring and measurement are focused on reactive monitoring and historic data, and fail to look for active or preventive solutions.	Performance monitoring and measurement exist using both active and reactive monitoring. Detailed records are kept, and data are analysed to establish trends and preventive solutions.	A comprehensive range of performance monitoring and measurement is used for both active and reactive monitoring. Detailed records are kept, and data are analysed to find solutions to improve future performance.	
G	No performance indicators have been developed or are in use.	Performance monitoring provides only limited feedback on OSH performance, since not enough appropriate measurements are made.	Existing performance monitoring provides some feedback on OSH performance. The monitoring often fails to determine whether arrangements for hazard identification, risk assessment and control are working effectively.	Existing performance monitoring provides useful feedback on OSH performance. The monitoring shows whether arrangements for hazard identification, risk assessment and control are working effectively.	Existing performance monitoring provides complete and very useful feedback on OSH performance. The monitoring shows clearly whether arrangements for hazard identification, risk assessment and control are working effectively.	

	NONE (1)	POOR (2)	FAIR (3)	GOOD (4)	EXCELLENT (5)	RATING
H	No performance indicators have been developed or are in use.	Active monitoring is rarely used to track achievement of specific plans, performance criteria or objectives.	Active monitoring is used occasionally to check progress in achieving specific plans and performance criteria and objectives.	Active monitoring is generally used to track achievement of specific plans, performance criteria and objectives.	Active monitoring is constantly used to track achievement of specific plans, performance criteria and objectives.	
I	No systematic process exists to actively monitor the working environment.	Surveillance of the working environment and inspection of work systems, premises, plant and equipment are done occasionally, but are not done systematically.	Surveillance of the working environment and inspection of work systems, premises, plant and equipment are done systematically, but are not done with sufficient frequency.	Surveillance of the working environment and inspection of work systems, premises, plant and equipment are done frequently and systematically.	Extensive surveillance of the working environment and inspection of work systems, premises, plant and equipment is done very frequently and systematically.	
J	There is no active monitoring of workers' health, and no process is regularly used to prevent or control health hazards.	Rudimentary active surveillance of workers' health is carried out only for those exposed to high hazards.	Active surveillance of workers' health is regularly carried out for those exposed to high hazards. No screening is provided for any other workers.	An effective system for the active surveillance of workers' health is applied in a regular and systematic way for most workers.	A comprehensive system for the active surveillance of workers' health is applied in a regular and systematic way for all workers.	
K	The organization fails to comply with national laws and regulations or good OSH practices relating to collecting OSH performance data.	The organization generally complies with most national laws and regulations. A practice of minimal compliance is in place, and only basic data are collected.	The organization is generally compliant with all national laws and regulations relating to the collection of OSH performance data.	The organization complies with and in some ways exceeds the requirements of national laws and regulations relating to OSH performance measurement.	The organization fully complies with and exceeds the requirements of national laws and regulations relating to OSH performance measurement.	

NONE (1)	POOR (2)	FAIR (3)	GOOD (4)	EXCELLENT (5)	RATING
<p>L Reactive monitoring is used at times to capture work-related injuries, ill health, disease and incidents. This is not systematically maintained, and the data collected are unreliable.</p>	<p>Reactive monitoring is used generally to capture work-related injuries, ill health, disease and incidents. These data are not systematically maintained, and are incomplete, since only high-severity events are captured.</p>	<p>The organization has a basic system for monitoring OSH performance. However, only high-severity injuries are tracked. Damage and incidents are rarely reported.</p>	<p>The organization has an effective system that monitors incidents, injuries, ill health and sickness, damage and losses. Monitoring is systematically carried out, and the data collected are generally used to investigate OSH failures and seek improvements.</p>	<p>The organization has a very comprehensive system that monitors incidents, injuries, ill health and sickness, damage and losses. Monitoring is systematically carried out, and the data collected are used to investigate OSH failures. The monitoring is used to find remedial measures, and is a key element of continuous improvements.</p>	
ITEM 3.11 PERFORMANCE MONITORING AND MEASUREMENT (max. score for this item is 60)					

<p>Auditor's feedback</p> <p><i>Strengths</i></p>
<p><i>Weaknesses</i></p>
<p><i>Opportunities</i></p>

Threats

Guidance notes

Procedures to monitor, measure and record OSH performance on a regular basis should be developed, established, implemented, and periodically reviewed. Responsibilities, accountabilities and authorities for monitoring should be allocated at different levels in the management structure.

The selection of performance indicators should take into account the size and nature of activity of the organization, and the OSH objectives.

Both qualitative and quantitative measures appropriate to the needs of the organization should be considered. These should:

- (a) be based on the organization's identified hazards and risks, the commitments in its OSH policy and its OSH objectives;
- (b) support the organization's evaluation processes including the management review.

Performance monitoring and measurement should:

- (a) be used as a means of determining the extent to which OSH policy and objectives are being implemented and risks are controlled;
- (b) include both active and reactive monitoring, and not be based only upon work-related injury, ill health, disease and incident statistics;
- (c) be recorded.

Monitoring should provide:

- (a) feedback on OSH performance;
- (b) information to determine whether the day-to-day arrangements for hazard and risk identification, prevention and control are in place, and are operating effectively;
- (c) the basis for decisions about improvement in hazard identification and risk control, and the OSH management system.

Active monitoring should contain the elements necessary to have a proactive system, and should include:

- (a) monitoring the achievement of specific plans, established performance criteria and objectives;
- (b) the systematic inspection of work systems, premises, plant and equipment;
- (c) surveillance of the working environment, including work organization;
- (d) workers' health surveillance, where appropriate, through suitable medical monitoring or follow-up of workers for early detection of signs and symptoms of harm to health, to determine the effectiveness of prevention and control measures;
- (e) compliance with applicable national laws and regulations, collective agreements and commitments on OSH that the organization has subscribed to.

Reactive monitoring should include the identification, reporting and investigation of:

- (a) work-related injuries, ill health (including monitoring of aggregate sickness absence records), diseases and incidents;
- (b) other losses, such as damage to property;
- (c) deficient safety and health performance, and OSH management system failures;
- (d) worker rehabilitation and health restoration programmes.

Evaluation

Item 3.12 Investigation of work-related injuries, ill health, diseases and incidents, and their impact on safety and health performance

	NONE (1)	POOR (2)	FAIR (3)	GOOD (4)	EXCELLENT (5)	RATING
A	Investigations are conducted only for work-related serious injury cases. These investigations focus on the apportioning of blame.	Only incidents involving lost time, injury or significant damage are subjected to a very elementary form of investigation.	Incidents involving lost time, injury or damage are investigated.	All incidents involving injury or damage, or near-miss events, are subject to investigation, and are closely studied to identify root causes.	All incidents are investigated, and are subjected to a very thorough and systematic examination to identify root causes.	
B	There is no process in place that captures or investigates ill health or diseases to determine whether these are work related.	There is no effective system in place to identify ill health and diseases, or to determine whether these are work related.	Cases of ill health and diseases are supposed to be reported and investigated. However, a significant proportion of such cases are not reported, and therefore are not investigated.	Ill health and diseases are generally reported, and are also investigated to establish whether they are caused by work-related issues.	Ill health and diseases are consistently reported, and are thoroughly investigated to establish whether they are caused by work-related issues.	
C	There is no system in place to examine incidents to establish whether the OSH management system has failed or has been inadequate in these circumstances.	There is no effective system to examine reported incidents to establish whether the OSH management system has failed or has been inadequate in these circumstances.	The system in place for the reporting and investigation of incidents frequently fails to seriously examine whether the OSH management system failed or was inadequate.	An effective system exists that does investigate all types of incident, and it does try to establish whether a failure or inadequacy in the OSH management system was a main or contributing factor.	A very thorough and comprehensive system exists that does investigate all types of incidents. It explores the root causes in detail, and looks closely to establish whether a failure or inadequacy in the OSH management system was a main or contributing factor.	

	NONE (1)	POOR (2)	FAIR (3)	GOOD (4)	EXCELLENT (5)	RATING
D	The organization does not have competent persons to carry out incident investigations.	The organization does have a competent person to carry out incident investigations relating to workplace injuries, but does not have competent persons relating to disease or ill-health issues.	The organization does have competent persons to carry out incident investigations relating to workplace injuries. It has access to external providers for disease and ill-health issues, but these are very rarely used.	The organization has competent persons to carry out incident investigations relating to workplace injuries. They also use competent health professionals and industrial hygienists to identify and investigate disease and ill-health issues.	The organization has competent persons to carry out incident investigations relating to workplace injuries. It also has a comprehensive team of competent health professionals and industrial hygienists to identify and investigate disease and ill-health issues.	
E	The organization does not publish or communicate the results of any investigations into workplace injuries, ill health or disease. There is no worker participation in this process.	The organization communicates the results of any investigations into very serious workplace injuries, ill health or disease to the safety and health committee. There is little worker participation in this process.	The organization does not consult with the safety and health committee on the results of investigations into workplace injuries, ill health or disease. It does communicate the final results of its investigations. Worker participation is limited.	The organization consults with the safety and health committee to find solutions that would prevent a recurrence of the issues being investigated. It also communicates the final results of the investigations, and encourages worker participation.	The organization consults widely with the safety and health committee and workers to find solutions which that would prevent a recurrence of the issues being investigated. It also communicates the final results of the investigations, and ensures that corrective actions are identified.	
F	Corrective actions are rarely taken, since root causes are rarely identified.	Corrective actions are rarely taken, since root causes are frequently not identified.	Corrective actions are generally taken where root causes have been established. However, root causes are very rarely established for very minor and near-miss incidents.	Corrective actions that have been agreed with the safety and health committee and workers' representatives are generally taken quickly, to ensure that events do not recur.	Corrective actions that have been discussed and agreed with the safety and health committee and workers' representatives are implemented quickly, to ensure that events do not recur. A follow-up process checks that the corrective actions have been implemented and are working.	

	NONE (1)	POOR (2)	FAIR (3)	GOOD (4)	EXCELLENT (5)	RATING
G	Reports from external investigative agencies, including inspectorates and social security institutions, are given some attention only if they involve breaches of OSH laws or financial penalties.	Reports received from external investigative agencies, including inspectorates and social security institutions, are given attention if they involve breaches of OSH laws.	Reports received from external investigative agencies, including inspectorates and social security institutions, are given less attention than internal investigations unless there are breaches of OSH laws.	Reports received from external investigative agencies, including inspectorates, social security institutions, insurers, certification bodies and professional advisers are generally acted on in the same way as internal investigations.	Reports received from external investigative agencies, including inspectorates, social security institutions, insurers, certification bodies and professional advisers, are always acted on with rigor equal to that of internal investigations.	
OVERALL SCORE FOR ITEM 3.12 INVESTIGATION OF WORK-RELATED INJURIES, ILL HEALTH AND DISEASES (max. score for this item is 35)						

Auditor's feedback
Strengths
Weaknesses
Opportunities

Threats

Guidance notes

Investigation of the origin and underlying causes of work-related injuries, ill health, diseases and incidents should identify any failures in the OSH management system, and should be documented.

Such investigations should be carried out by competent persons, with the appropriate participation of workers and their representatives.

The results of such investigations should be communicated to the safety and health committee, where it exists, and the committee should make appropriate recommendations.

The results of investigations, in addition to any recommendations from the safety and health committee, should be communicated to appropriate persons for corrective action, included in the management review, and considered for continual improvement activities.

The corrective action resulting from such investigations should be implemented in order to avoid repetition of work-related injuries, ill health, diseases and incidents.

Reports produced by external investigative agencies, such as inspectorates and social insurance institutions, should be acted upon in the same manner as internal investigations, taking issues of confidentiality into account.

Evaluation

Item 3.13 Audit

	NONE (1)	POOR (2)	FAIR (3)	GOOD (4)	EXCELLENT (5)	RATING
A	No internal or external audits are carried out on a periodic basis.	Occasional internal audits are carried out infrequently on a random basis, and fail to cover all parts of the organization. These internal audits focus on the physical state of the workplace, and fail to measure the OSH management system.	Internal audits are carried out on a periodic basis covering some parts of the organization. These audits are generally not subject to an effective planning and scheduling process.	Internal and external audits covering the entire organization are carried out on a periodic basis. These audits are scheduled in the audit-planning process to ensure that each part of the organization is audited at least every three years.	A comprehensive process of internal and external audits covering the entire organization is carried out on a regular basis. These audits are scheduled in the audit-planning process to ensure that every part of the organization is audited at least every two years.	
B	No audit policy or programme exists in the organization.	No formal internal audit policy or programme exists in the organization.	An internal audit policy and programme is in effect, but fails to ensure auditor competences. The audit scope, audit methodology, scheduling and reporting are not clearly defined.	An effective audit policy and programme is in effect that ensures auditor competences. The audit scope, audit methodology, scheduling and reporting are defined.	A very effective and efficient audit policy and programme is in effect that ensures auditor competences. The audit scope and methodology are regularly reviewed. Scheduling and reporting are clearly defined and documented.	

	NONE (1)	POOR (2)	FAIR (3)	GOOD (4)	EXCELLENT (5)	RATING
C	No internal or external audits are carried out to ensure compliance with any of the elements of the OSH management system.	Internal audits fail to measure compliance with the OSH management system elements.	The audit methodology in use fails to measure performance accurately against many of the elements of the ILO-OSH management system guidelines.	The audit methodology in use is generally effective in measuring performance against most of the elements of the ILO-OSH management system guidelines, or an appropriate subset of these elements.	The audit methodology in use is highly effective in measuring performance against all elements of the OSH management system as described in the ILO-OSH management guidelines.	
D	No audits are carried out.	There is no external validation of measurement of the audits.	External audits are carried out at least every 5 years to ensure that the measurement criteria used for internal audits of some elements of the OSH management system are consistent with those used by other organizations in the same industry.	External audits are carried out at least every 5 years to ensure that the measurement criteria used for internal audits of all elements of the OSH management system are consistent with those used by other organizations in the same industry.	External audits are carried out at least every 3 years to ensure that the measurement criteria used for internal audits of all elements of the OSH management system are consistent with those used by other organizations in the same industry.	
E	No measurements are taken that would establish whether the organization is meeting its OSH policy or objectives.	The measurements taken from both internal and external audits, and the conclusions drawn from these audits, are rarely used to establish or confirm that the organization is meeting its OSH policy and objectives.	The measurements taken from both internal and external audits, and the conclusions drawn from these audits, are sometimes used to establish and confirm that the organization is meeting its OSH policy and objectives.	The measurements taken from both internal and external audits, and the conclusions drawn from these audits, are generally used to establish and confirm that the organization is meeting its OSH policy and objectives.	The measurements taken from both internal and external audits, and the conclusions drawn from these audits, are used widely and consistently to establish and confirm that the organization is meeting its OSH policy and objectives.	

	NONE (1)	POOR (2)	FAIR (3)	GOOD (4)	EXCELLENT (5)	RATING
F	No measurements are taken and no information is provided to workers to gain worker participation in OSH.	The information provided from internal and external audits is rarely communicated to workers.	The information provided from internal and external audits is sometimes communicated to workers, but is rarely used to gain worker participation in OSH.	The information provided from internal and external audits is generally communicated to workers, and is used to gain full worker participation in OSH.	The information provided from internal and external audits is always communicated to workers, and is used to gain full worker participation in OSH.	
G	No audits are carried out and no process exists to identify compliance with national laws and regulations relating to OSH.	The audits that are occasionally undertaken are rarely used to confirm that the organization complies fully with national laws and regulations relating to OSH.	The audits undertaken are sometimes used to confirm that the organization complies fully with national laws and regulations relating to OSH.	The audits undertaken are generally used to confirm that the organization complies fully with national laws and regulations relating to OSH.	The audits undertaken are consistently used to confirm that the organization complies fully with national laws and regulations relating to OSH and also OSH best practices.	
H	No audits are carried out, and no process exists to identify and correct weaknesses or make improvements.	Audits are only occasionally used to identify opportunities for improvement.	Audits are sometimes used to identify opportunities for improvements, and to drive continual improvement.	Audits are generally used to identify opportunities for improvement, and to drive continual improvement.	Audits are systematically used to identify opportunities for improvement, and to drive continual improvement and best practice.	
I	No audits are carried out and no process exists to identify and correct weaknesses or make improvements.	The correction of identified weaknesses is not given sufficient attention or implemented quickly enough. There is very little focus on improvements.	Improvements and the correction of identified weaknesses are not sufficiently monitored and generally not taken quickly enough. No effective follow-up system exists.	Improvements and the correction of identified weaknesses are generally monitored, and corrective actions are mostly taken within a reasonable time. These are subject to a follow-up process to ensure completion.	Improvements and the correction of identified weaknesses are monitored, and corrective actions are taken in a timely manner. These are subject to a systematic follow-up process to ensure completion.	

NONE (1)	POOR (2)	FAIR (3)	GOOD (4)	EXCELLENT (5)	RATING
<p>J</p> <p>The organization does not have any competent auditors, or utilize external competent auditors.</p>	<p>Only internal auditors are used, and these have not received audit training. They lack the competences needed to conduct audits.</p>	<p>Auditors are selected from time to time, but their competences are not sufficiently assessed.</p>	<p>Auditors are generally carefully selected to ensure their competence, and are mostly independent of the activity being audited.</p>	<p>Auditors are rigorously selected to ensure competence, and also that they are independent of the activity being audited.</p>	
<p>OVERALL SCORE FOR ITEM 3.1.3 AUDIT (max. score for this item is 50)</p>					

Auditor's feedback

Strengths

Weaknesses

Opportunities

Threats

Guidance notes

Arrangements to conduct periodic audits should be established to determine whether the OSH management system and its elements are in place, adequate, and effective in protecting the safety and health of workers and preventing incidents.

An audit policy and programme should be developed that includes a designation of auditor competence, audit scope, the frequency of audits, audit methodology and reporting.

The audit includes an evaluation of the organization's OSH management system elements or a subset thereof, as described in the <i>ILO-OSH 2001</i> guidelines:	<ul style="list-style-type: none"> 3.1 OSH policy 3.2 Worker participation 3.3 Responsibility and accountability 3.4 Competence and training 3.5 OSH management system documentation 3.6 Communication 3.7 Systems planning, development, and implementation 3.8 Prevention and control measures 3.9 Occupational safety and health objectives 3.10 Hazard prevention 3.10.1 Prevention and control measures 3.10.2 Management of change 3.10.3 Emergency prevention, preparedness, and response 3.10.4 Procurement 3.10.5 Contracting 3.11 Performance monitoring and measurement 3.12 Investigation of work-related injuries, ill health, diseases and incidents and their impact on OSH performance 3.13 Audit 3.14 Management review 3.15 Preventive and corrective actions 3.16 Continual improvement
The audit should also consider any other audit criteria or elements that may be appropriate.	
The audit should identify whether the OSH functions are integrated into the overall business functions and management of the organization.	
The audit should identify where conflicting goal and objectives exist within the organization.	
The audit conclusions should determine whether the implemented OSH management system, elements or a subset thereof:	<ul style="list-style-type: none"> (a) are effective in meeting the organization's OSH policy and objectives; (b) are effective in promoting full worker participation; (c) respond to the results of OSH performance evaluation and previous audits; (d) enable the organization to achieve compliance with relevant national laws and regulations; (e) fulfil the goals of continual improvement and best OSH practice.
Audits should be conducted by competent persons, internal or external to the organization, who are independent of the activity being audited.	
Audit results and conclusions should be communicated to those responsible for corrective actions.	
Consultation on all stages of the workplace audit, including the selection of auditors and the analysis of results, should be subject to worker participation.	

Evaluation

Item 3.14 Management review

	NONE (1)	POOR (2)	FAIR (3)	GOOD (4)	EXCELLENT (5)	RATING
A	No management reviews are made of OSH performance, and no performance objectives are set.	Management reviews are made of OSH performance very rarely. There is no planning or clear definition of OSH performance objectives.	Management reviews of OSH performance are made infrequently to evaluate OSH strategy and performance. Performance objectives for OSH lack detail and planning.	Management reviews of OSH performance and OSH strategy are made at least annually. Performance objectives for OSH are set in reasonable detail, and are used to plan OSH activities.	Comprehensive management reviews of OSH performance and OSH strategy are made at least quarterly. Performance objectives for OSH are set in detail, and are used to plan OSH activities.	
B	No effort is made to evaluate or identify the need for changes or to correct deficiencies in the OSH management system.	Little effort is made to evaluate or identify the need for changes or to correct deficiencies in the OSH management system.	Some effort is made to evaluate and identify the need for changes or to correct deficiencies in the OSH management system, OSH policy and objectives.	Significant effort is made in evaluating and identifying the need for changes or to correct deficiencies in the OSH management system, OSH policy and objectives.	Major attention is given to evaluating and identifying the need for changes or to correct deficiencies in the OSH management system, OSH policy and objectives.	
C	No management reviews are undertaken, and there is no follow-up process on corrective actions.	Management reviews are carried out very occasionally by junior managers and supervisors. Senior managers are not involved in this process.	Management reviews are rarely undertaken, and are generally carried out by junior managers. Senior managers are occasionally involved in this process.	Systematic and effective management reviews are regularly carried out, and are usually done by middle management and occasionally by senior management.	Comprehensive management reviews are planned and carried out regularly by senior managers.	

	NONE (1)	POOR (2)	FAIR (3)	GOOD (4)	EXCELLENT (5)	RATING
D	Management provides no feedback direction, and fails to determine OSH priorities. They fail to plan or set continual improvement objectives, or take performance measurements.	Management provides little feedback direction, and fails to determine OSH priorities properly. There is a lack of planning, and a failure to set continual improvement objectives.	Management provides some feedback direction, but fails to determine OSH priorities properly. There is a lack of planning, and a failure to set continual improvement objectives.	Management provides regular feedback direction, and generally determines OSH priorities properly. There is a planning process to set continual improvement objectives.	Management provides comprehensive feedback direction, and determines OSH priorities properly. There is an effective planning process that sets continual improvement objectives.	
E	No management reviews are undertaken that would allow management to monitor OSH performance.	Management reviews are rarely conducted by management. They fail to fully consider leading and lagging OSH performance indicators.	Management reviews are conducted infrequently by management, and consider OSH performance indicators such as incidents, injuries, ill health, audit findings and incident investigations.	Management reviews are generally conducted by management, and consider OSH performance indicators such as incidents, injuries, ill health, audit findings and incident investigations.	Management reviews are systematically and regularly conducted by senior management, and consider OSH performance indicators such as incidents, injuries, ill health, audit findings and incident investigations.	
F	No management reviews are undertaken, and there is no communication regarding OSH performance to the safety and health committee, workers, or those responsible for the relevant element of the OSH management system.	There is little communication of the findings of the management review to the safety and health committee, workers, or those responsible for the relevant element of the OSH management system.	The management review findings are sometimes communicated to the safety and health committee, workers, and those responsible for the relevant element of the OSH management system.	Management review findings are generally communicated to the safety and health committee, workers, and those responsible for the relevant element of the OSH management system.	Management review findings are systematically communicated to the safety and health committee, workers, and those responsible for the relevant element of the OSH management system. Supervisors and managers are told to discuss the findings with their workers.	

NONE (1)	POOR (2)	FAIR (3)	GOOD (4)	EXCELLENT (5)	RATING
<p>G No management reviews are undertaken or documented.</p>	<p>Management reviews are rarely documented, and are communicated only on a need-to-know basis.</p>	<p>Management reviews are generally formally documented, but are communicated only on a need-to-know basis.</p>	<p>Management reviews are usually formally documented, and are communicated to all those concerned.</p>	<p>Management reviews are always comprehensively documented, and are communicated formally to all those concerned. The review is subject to quarterly review until all issues have been resolved.</p>	
OVERALL SCORE FOR ITEM 3.14 MANAGEMENT REVIEW (max. score for this item is 35)					

Auditor's feedback
<i>Strengths</i>
<i>Weaknesses</i>
<i>Opportunities</i>
<i>Threats</i>

Guidance notes

Management reviews should:

- (a) evaluate the overall strategy of the OSH management system, to determine whether it meets planned performance objectives;
- (b) evaluate the OSH management system's ability to meet the overall needs of the organization and its stakeholders, including its workers and the regulating authorities;
- (c) evaluate the need for changes to the OSH management system, including OSH policy and objectives;
- (d) identify what action is necessary to remedy any deficiencies in a timely manner, including adaptations of other aspects of the organization's management structure and performance measurement;
- (e) provide the feedback direction, including the determination of priorities, for meaningful planning and continual improvement;
- (f) evaluate progress towards the organization's OSH objectives and corrective action activities;
- (g) evaluate the effectiveness of follow-up actions from earlier management reviews.

The frequency and scope of periodic reviews by the employer or the most senior accountable person of the OSH management system of the organization should be defined according to its needs and conditions.

The management review should consider:

- (a) the results of work-related injury, ill health, disease and incident investigations, performance monitoring and measurement, and audit activities;
- (b) the additional internal and external inputs as well as changes, including organizational changes, that could affect the OSH management system.

The findings of the management review should be recorded and formally communicated to:

- (a) the persons responsible for the relevant element(s) of the OSH management system so that they may take appropriate action;
- (b) the safety and health committee, workers and their representatives.

Action for improvement

Action for improvement

Item 3.15 Preventive and corrective action

	NONE (1)	POOR (2)	FAIR (3)	GOOD (4)	EXCELLENT (5)	RATING
A	No system exists to implement preventive or corrective actions required as a result of OSH management system audits, management reviews and other forms of OSH performance monitoring.	No effective system is in place to implement preventive or corrective actions required as a result of OSH management system audits, management reviews and other forms of OSH performance monitoring.	A very basic system is in place to implement preventive and corrective actions required as a result of OSH management system audits, management reviews and other forms of OSH performance monitoring.	An effective system is in place to implement preventive and corrective actions required as a result of OSH management system audits, management reviews and other forms of OSH performance monitoring.	A comprehensive system is in place and implementing preventive and corrective actions required as a result of OSH management system audits, management reviews and other forms of OSH performance monitoring.	
B	No process exists to identify and analyse the root causes of non-conformity with OSH regulations or OSH management system requirements.	No adequate process exists to identify and analyse the root causes of non-conformity with OSH regulations or OSH management system requirements.	A very basic process exists to identify and analyse the root causes of non-conformity with OSH regulations and OSH management system requirements.	An effective process exists to identify and analyse the root causes of non-conformity with OSH regulations and OSH management system requirements.	A comprehensive and highly effective process exists to identify and analyse the root causes of non-conformity with OSH regulations and OSH management system requirements.	
C	No process is in place for initiating, planning, implementing or checking the effectiveness of corrective and preventive actions.	An inadequate process is in place for initiating, planning, implementing and checking the effectiveness of corrective and preventive actions.	A very simple process is in place for initiating, planning, implementing and checking the effectiveness of corrective and preventive actions. It is not fully effective, and needs improvement.	A generally effective process is in place for initiating, planning, implementing and checking the effectiveness of corrective and preventive actions.	A highly effective and reliable process is in place for initiating, planning, implementing and checking the effectiveness of corrective and preventive actions.	

	NONE (1)	POOR (2)	FAIR (3)	GOOD (4)	EXCELLENT (5)	RATING
D	No proper methods exist for documenting any corrective or preventive actions, or changes to the OSH management system.	Although some documenting of corrective or preventive actions takes place, it is not systematic, reliable, or adequate for purpose.	A number of methods are used from time to time to document any corrective or preventive actions or changes to the OSH management system.	An effective and generally reliable process exists to document most corrective or preventive actions or changes to the OSH management system.	A highly reliable and effective process is in place to systematically document any corrective or preventive actions or changes to the OSH management system.	
E	Preventive and protective measures to eliminate or reduce hazards and risks are totally inadequate.	A few preventive and protective measures exist to eliminate or reduce hazards and risks, but are in need of substantial improvement.	Some preventive and protective measures exist to eliminate or reduce hazards and risks, but need to be improved.	A substantial range of preventive and protective measures exist to eliminate or reduce hazards and risks.	A comprehensive range of preventive and protective measures are in place exist to ensure the elimination or reduction of hazards and risks.	
F	Preventive and protective measures fail to follow the correct hierarchy of prevention and correction measures, and rely overly on personal protective equipment (PPE).	The correct hierarchy of prevention and correction measures is rarely followed. PPE is frequently used where a more appropriate hierarchy measure could be used.	The correct hierarchy of prevention and correction measures is sometimes not followed. PPE is frequently used where more appropriate hierarchy measures could be used.	The correct hierarchy of prevention and correction measures is generally followed. Occasionally PPE is used where more appropriate hierarchy measures could be used.	The correct hierarchy of prevention and correction measures is always followed. PPE is used only as a last resort, and where more appropriate hierarchy measures cannot be used.	
OVERALL SCORE FOR ITEM 3.1.5 PREVENTIVE AND CORRECTIVE ACTION (max. score for this item is 30)						

Auditor's feedback

Strengths

Weaknesses

Opportunities

Threats

Guidance notes

Arrangements should be established and maintained for corrective and preventive actions resulting from OSH management system performance monitoring and measurement, OSH management system audits, and management reviews.

These arrangements should include:

- (a) identifying and analysing the root causes of any non-conformities with relevant OSH regulations and/or OSH management systems arrangements;
- (b) initiating, planning, implementing, checking the effectiveness of and documenting corrective and preventive actions, including changes to the OSH management system itself.

When evaluation of the OSH management system or other sources shows that the preventive and protective measures for hazards and risks are inadequate, or are likely to become inadequate, they should be addressed according to the recognized hierarchy of prevention and control measures and be completed and documented, as appropriate, and in a timely manner.

Action for improvement

Item 3.16. Continual improvement

	NONE (1)	POOR (2)	FAIR (3)	GOOD (4)	EXCELLENT (5)	RATING
A	The organization shows no interest or commitment to the continual improvement of OSH performance.	The organization shows only minimal interest or commitment to the continual improvement of OSH performance.	The organization shows modest interest or commitment to the continual improvement of OSH performance.	The organization shows interest and a visible commitment to the continual improvement of OSH performance.	The organization is extremely interested and very highly committed to the continual improvement of OSH performance.	
B	No baseline assessment has been conducted to show current performance, and no improvement plans have been established.	A baseline assessment has been conducted, but is very much out of date, and fails to cover all aspects of current performance. Improvement plans have not been established.	A baseline assessment has been conducted to show current performance, and this has been updated occasionally. Improvement plans have been established for some aspects of performance.	A baseline assessment has been conducted to show current performance, and this is updated regularly. Improvement plans have been established for most aspects of performance, and revised objectives are formulated.	A comprehensive system of assessments is conducted to show baseline positions, intermediate waypoints and also OSH objectives and targeted outcomes. These are used to develop and implement improvement plans.	
C	Opportunities to identify improvements that could be made to OSH management systems and OSH performance are ignored.	Little attention is paid to the opportunities for improvements that could be made to OSH management systems and OSH performance.	Opportunities for improvements that could be made to OSH management systems and OSH performance are only rarely given sufficient attention and priority.	There exists a significant commitment to finding opportunities for improvements to the OSH management system and OSH performance. Improvements are generally quickly implemented.	There is a very high level of commitment to identifying and quickly implementing improvements to the OSH management system and OSH performance.	

	NONE (1)	POOR (2)	FAIR (3)	GOOD (4)	EXCELLENT (5)	RATING
D	Existing weaknesses that have been identified in the OSH management system and OSH performance are ignored, and improvement plans are not formulated.	Weaknesses that have been identified in the OSH management system and OSH performance are given little attention, and are rarely quickly improved.	Weaknesses that have been identified in the OSH management system and OSH performance get attention, but are rarely quickly improved.	Weaknesses that have been identified in the OSH management system and in OSH performance are, in general, quickly rectified and improved.	Any weaknesses in the OSH management system or OSH performance are subject to detailed review and improvement plans. These improvements are implemented very quickly and effectively.	
E	No OSH performance improvement objectives are formulated.	OSH performance improvement objectives are occasionally formulated, but are rarely included in the organization's plans or objectives.	OSH performance improvement objectives are only infrequently included in the organization's plans and objectives.	OSH performance improvement objectives are generally included in the organization's plans and objectives.	OSH performance improvement objectives are always included in the organization's plans and objectives.	
F	Feedback and complaints received from workers and their representatives are ignored, and improvements have not been implemented.	Feedback and complaints received from workers and their representatives are generally ignored, and improvements are rarely implemented.	Feedback and complaints received from workers and their representatives are generally considered, but improvements are not always implemented.	Feedback and complaints received from workers and their representatives are generally considered quickly. Improvements are normally taken to correct the issues raised.	Feedback and complaints received from workers and their representatives are always given immediate consideration. Improvements are implemented quickly to deal with the issues raised.	
G	No benchmarking process exists that would allow comparisons of OSH performance and methods with those of external organizations.	No effective system of benchmarking exists. The only benchmark of OSH performance and methods is against published statistics, and is restricted to lost-time incidents.	A rudimentary system of benchmarking exists that measures only historic internal data and published external statistics.	An effective system of benchmarking exists that measures performance against comparable external organizations and any inter-organization operations.	A comprehensive system of benchmarking exists that measures OSH performance against comparable external organizations and any inter-organization operations. Measurements are made of both leading and lagging performance indicators.	

NONE (1)	POOR (2)	FAIR (3)	GOOD (4)	EXCELLENT (5)	RATING
<p>H</p> <p>No effort is made to adopt even basic levels of OSH management. Very poor OSH performance is common, and shows no improvement.</p>	<p>Little effort is made to ensure the quality of the OSH management system. No awareness of best practice exists, and OSH results are low and show little improvement.</p>	<p>A modest effort is made to ensure that the OSH management system is aligned with best practice, and that satisfactory and improving OSH results are achieved.</p>	<p>Substantial effort is made to ensure that the OSH management system is in line with best global practice, and that good OSH results are achieved. Progressive improvements are expected and planned each year.</p>	<p>Every effort is made to ensure that the OSH management system is in line with global practice, and that outstanding OSH performance is achieved. Substantial improvements are expected and targeted each year.</p>	
OVERALL SCORE FOR ITEM 3.16 CONTINUAL IMPROVEMENT (max. score for this item is 40)					

Auditor's feedback
<i>Strengths</i>
<i>Weaknesses</i>
<i>Opportunities</i>
<i>Threats</i>

Guidance notes

Arrangements should be established and maintained for continual improvement of the relevant elements of the OSH management system, and of the system as a whole.

These arrangements should take into account:

- (a) the OSH objectives of the organization;
- (b) the results of hazard and risk identifications and assessments;
- (c) the results of performance monitoring and measurements;
- (d) work-related injury, diseases, ill health and incident investigations, and the results and recommendations of audits;
- (e) the outcomes of the management review;
- (f) recommendations for improvement from all members of the organization, including the safety and health committee, where it exists;
- (g) changes in national laws and regulations, voluntary programmes and collective agreements;
- (h) new relevant information;
- (i) the results of health protection and promotion programmes.

The safety and health processes and performance of the organization should be compared with those of others, to improve safety and health performance.

Appendices

Appendix 1

Item 3.2 Worker participation – First worked example

	NONE (1)	POOR (2)	FAIR (3)	GOOD (4)	EXCELLENT (5)	RATING
A	There is no clear evidence within the organization of management encouraging or seeking to involve or get workers to participate in OSH matters.	Participation is limited to following OSH rules, procedures, and instructions. There is little input by workers in OSH matters.	Participation is encouraged by management, but is limited to dealing with specific OSH problems within the organization. Management does not get involved in planning or hazard recognition activities.	Management has clearly defined the roles and responsibilities of individual workers, and of the safety and health committee.	The management policy and systems documentation describes the importance of worker participation and involvement in creating a safe and healthy workplace.	3
B	OSH communication with workers is infrequent, and tends to involve mainly small numbers of workers and be focused on supervisors.	Management has minimum communication with workers on OSH matters.	Management maintains a limited amount of communication with workers. This communication is generally a top-down process, and little evidence exists that management knows what their workers' concerns are.	There is regular and frequent dialogue with workers, and the workers' views are regarded as being very important.	The documentation describes specific worker participation goals, and the benefits that are gained for the organization and its workers. It makes safety and health communications to be vital to ensure that every person in the organization understands their roles and responsibilities.	3

	NONE (1)	POOR (2)	FAIR (3)	GOOD (4)	EXCELLENT (5)	RATING
C	Workers' safety and health representatives have been appointed but rarely meet. Their role has not been defined, and they have little involvement in planning, evaluating or seeking improvement and solutions to OSH problems.	A safety and health committee has been formed, but has no clear role, and meets very infrequently. Safety and health representatives have little involvement in planning.	The organization has established a safety and health committee that conforms and complies with the requirements of national laws and regulations, and practice. The committee's role has been defined, and includes working with management in evaluating, planning and implementing solutions and improvements.	The organization has established a safety and health committee that conforms and complies with the requirements of national laws and regulations, and practice. The role of the committee has been defined, and includes hazard recognition and OSH communications. The committee also has an active role in evaluating OSH changes, and in building worker competences in OSH.	The organization ensures that all changes to the work environment and procedures are discussed with workers and their representatives. The benefits are communicated so that workers can properly understand why changes are being made, and how these changes will be beneficial. The safety and health committee is highly involved in all OSH matters, and ensures that workers' concerns are dealt with in a timely manner.	2
D	Workers and their representatives are rarely consulted on changes to processes and procedures.	There is only minimal consultation with workers regarding OSH matters, and changes to processes and procedures.	There is only limited consultation with workers regarding OSH matters, and changes to processes and procedures.	There is a positive approach to involving workers in OSH matters, and this includes consultation on changes to processes and procedures.	The organization ensures that workers and their representatives are consulted, informed and trained on all aspects of OSH that impact on their work and safety.	3
E	The organization makes no time available for workers or their representatives to have meetings inside their normal working hours.	The organization makes little time available for workers or their representatives to have meetings. These are very infrequent; they focus mainly on issues raised by management, and only rarely on issues raised by workers.	The organization does have meetings on a regular basis, but these tend to occur only once per quarter, and the agenda items for discussion tend to not include issues raised by workers or their representatives.	The organization makes time and resources available to allow regular meetings to discuss OSH issues. Workers have the opportunity to put issues on the agenda for discussion.	The organization makes time and resources available to allow workers and their safety and health representatives to actively participate in evaluating, organizing, planning and implementation of actions to improve the OSH management system.	2

	NONE (1)	POOR (2)	FAIR (3)	GOOD (4)	EXCELLENT (5)	RATING
F	The OSH culture within the organization is that safety and health is an extra expense, and causes extra work to be done.	The OSH culture within the organization fails to properly see the value of good OSH procedure and practices. This negative attitude is transmitted to workers.	The OSH culture in the organization is indifferent to OSH, and takes no really positive initiatives to promote worker participation or involvement in OSH matters.	The OSH culture in the organization is positive, and this has encouraged good levels of worker involvement and participation.	The OSH culture is extremely positive, and is valued by both management and workers. Workers are fully engaged and participate widely on OSH matters.	3
G	Workers feel little responsibility for OSH performance. They regard it as the responsibility of the management or the OSH professional. Job descriptions do not detail OSH performance.	Workers accept some responsibility for OSH performance, but are not given the opportunity to participate fully in OSH matters. OSH is not detailed in job descriptions.	Workers see OSH as part of their role and responsibility, and OSH is an element in their job descriptions. Workers do not receive feedback or recognition for OSH performance.	Workers see OSH as part of their responsibilities, which is stated in their job description. They are encouraged to make suggestions that will improve OSH performance. Workers receive feedback on OSH performance, but no formal award or recognition process exists.	Workers take ownership of OSH programmes; they apply them diligently, and take pride in promoting them. OSH performance is subject to a rigorous appraisal process by supervisors and managers. A reward and recognition process is in place.	2
H	Workers have received very little information or training on OSH issues. They are unable to state the major hazards in their work environment, or the measures to be taken to minimize risks.	Workers received basic OSH information and training at the time of their induction. They have received no refresher or OSH competence-building training, and have limited understanding of OSH.	Workers have received basic OSH training, and some additional training regarding OSH laws, regulation and rules. They are able to identify hazards in their workplace, and state the risks that exist and the measures to be taken to minimize these risks.	Workers have received basic OSH training and refresher training. They can state the hazards in their workplace. They are capable of undertaking task analysis to identify hazards, and are able to evaluate potential solutions.	The organization has developed and use competence-building tools which ensure that all workers have a thorough understanding of OSH concepts and the site-specific risks that they may encounter. Workers are capable of undertaking hazard identification and risk assessment, and are able to conduct safety behaviour observations.	3
OVERALL SCORE FOR ITEM 3.2 WORKER PARTICIPATION: 21 (max. score for this item is 40)						

Auditor's feedback	
<i>Strengths</i>	<p>The organization is generally compliant with national OSH laws relating to worker consultation and participation.</p> <p>Workers do receive basic OSH training, and are trained to understand OSH laws, regulations and rules.</p> <p>Management does encourage worker participation in dealing with specific OSH issues and concerns.</p>
<i>Weaknesses</i>	<p>The OSH culture within the organization fails to inspire workers to take positive initiatives to promote and encourage OSH in the workplace.</p> <p>Participation by the workforce is very limited, and encouragement by management is generally lacking.</p> <p>There is not enough time allocated for safety meetings, which are generally held infrequently, and fail to focus on workers' OSH concerns and issues.</p>
<i>Opportunities</i>	<p>Management could create a more positive safety culture, which would encourage the full engagement of the workforce in OSH matters and issues.</p> <p>A safety and health committee exists, but fails to fulfil its purpose and potential, and is failing to engage with the total workforce.</p> <p>Major benefits would be gained by getting workers actively involved in OSH through task analysis and safety assessments, etc.</p>
<i>Threats</i>	<p>There is a concern that OSH hazards may not be identified because workers are not engaged or may feel that they have no responsibility to identify hazards.</p> <p>The failure to clearly assign roles and responsibilities may result in a lacking of OSH planning, and that no clear process exists for hazard identification.</p> <p>Failure to develop OSH competences of the workforce is likely to be a major block to the continuous improvement of OSH within the organization.</p>

Appendix 2

Item 3.2 Worker participation – Second worked example

	NONE (1)	POOR (2)	FAIR (3)	GOOD (4)	EXCELLENT (5)	RATING
A	There is no clear evidence within the organization of management encouraging or seeking to involve or get workers to participate in OSH matters.	Participation is limited to following OSH rules, procedures, and instructions. There is little input by workers in OSH matters.	Participation is encouraged by management, but is limited to dealing with specific OSH problems within the organization. It does not get involved in planning or hazard recognition activities.	Management has clearly defined the roles and responsibilities of individual workers, and of the safety and health committee.	The management policy and systems documentation describes the importance of worker participation and involvement in creating a safe and healthy workplace.	4
B	OSH communication with workers is infrequent, and tends to involve mainly small numbers of workers and be focused on supervisors.	Management has minimum communication with workers on OSH matters.	Management maintains a limited amount of communication with workers. This communication is generally a top-down process, and little evidence exists that management knows what their workers' concerns are.	There is regular and frequent dialogue with workers, and the workers' views are regarded as being very important.	The documentation describes specific worker participation goals, and the benefits that are gained for the organization and its workers. It makes safety and health communications to be vital to ensure that every person in the organization understands their roles and responsibilities.	5

	NONE (1)	POOR (2)	FAIR (3)	GOOD (4)	EXCELLENT (5)	RATING
C	Workers' safety and health representatives have been appointed but rarely meet. Their role has not been defined, and they have little involvement in planning, evaluating or seeking improvement and solutions to OSH problems.	A safety and health committee has been formed, but has no clear role, and meets very infrequently. Safety and health representatives have little involvement in planning.	The organization has established a safety and health committee that conforms and complies with the requirements of national laws and regulations, and practice. The committee's role has been defined, and includes working with management in evaluating, planning and implementing solutions and improvements.	The organization has established a safety and health committee that conforms and complies with the requirements of national laws and regulations, and practice. The role of the committee has been defined, and includes hazard recognition and OSH communications. The committee also has an active role in evaluating OSH changes, and in building worker competences in OSH.	The organization ensures that all changes to the work environment and procedures are discussed with workers and their representatives. The benefits are communicated so that workers can properly understand why changes are being made, and how these changes will be beneficial. The safety and health committee is highly involved in all OSH matters, and ensures that workers' concerns are dealt with in a timely manner.	4
D	Workers and their representatives are rarely consulted on changes to processes and procedures.	There is only minimal consultation with workers regarding OSH matters, and changes to processes and procedures.	There is only limited consultation with workers regarding OSH matters, and changes to processes and procedures.	There is a positive approach to involving workers in OSH matters, and this includes consultation on changes to processes and procedures.	The organization ensures that workers and their representatives are consulted, informed and trained on all aspects of OSH that impact on their work and safety.	5
E	The organization makes no time available for workers or their representatives to have meetings inside their normal working hours.	The organization makes little time available for workers or their representatives to have meetings. These are very infrequent; they focus mainly on issues raised by management, and only rarely on issues raised by workers.	The organization does have meetings on a regular basis, but these tend to occur only once per quarter, and the agenda items for discussion tend to not include issues raised by workers or their representatives.	The organization makes time and resources available to allow regular meetings to discuss OSH issues. Workers have the opportunity to put issues on the agenda for discussion.	The organization makes time and resources available to allow workers and their safety and health representatives to actively participate in evaluating, organizing, planning and implementation of actions to improve the OSH management system.	3

	NONE (1)	POOR (2)	FAIR (3)	GOOD (4)	EXCELLENT (5)	RATING
F	The OSH culture within the organization is that safety and health is an extra expense, and causes extra work to be done.	The OSH culture within the organization fails to properly see the value of good OSH procedure and practices. This negative attitude is transmitted to workers.	The OSH culture in the organization is indifferent to OSH, and takes no really positive initiatives to promote worker participation or involvement in OSH matters.	The OSH culture in the organization is positive, and this has encouraged good levels of worker involvement and participation.	The OSH culture is extremely positive, and is valued by both management and workers. Workers are fully engaged and participate widely on OSH matters.	4
G	Workers feel little responsibility for OSH performance. They regard it as the responsibility of the management or the OSH professional. Job descriptions do not detail OSH performance.	Workers accept some responsibility for OSH performance, but are not given the opportunity to participate fully in OSH matters. OSH is not detailed in job descriptions.	Workers see OSH as part of their role and responsibility, and OSH is an element in their job descriptions. Workers do not receive feedback or recognition for OSH performance.	Workers see OSH as part of their responsibilities, which is stated in their job description. They are encouraged to make suggestions that will improve OSH performance. Workers receive feedback on OSH performance, but no formal award or recognition process exists.	Workers take ownership of OSH programmes; they apply them diligently, and take pride in promoting them. OSH performance is subject to a rigorous appraisal process by supervisors and managers. A reward and recognition process is in place.	3
H	Workers have received very little information or training on OSH issues. They are unable to state the major hazards in their work environment, or the measures to be taken to minimize risks.	Workers received basic OSH information and training at the time of their induction. They have received no refresher or OSH competence-building training, and have limited understanding of OSH.	Workers have received basic OSH training, and some additional training regarding OSH laws, regulation and rules. They are able to identify hazards in their workplace, and state the risks that exist and the measures to be taken to minimize these risks.	Workers have received basic OSH training and refresher training. They can state the hazards in their workplace. They are capable of undertaking task analysis to identify hazards, and are able to evaluate potential solutions.	The organization has developed and use competence-building tools which ensure that all workers have a thorough understanding of OSH concepts and the site-specific risks that they may encounter. Workers are capable of undertaking hazard identification and risk assessment, and are able to conduct safety behaviour observations.	3
OVERALL SCORE FOR ITEM 3.2 WORKER PARTICIPATION: 31 (max. score for this item is 40)						

Auditor's feedback	
<i>Strengths</i>	<p>The organization makes extensive efforts to encourage worker participation, with clearly written goals and expectations.</p> <p>Workers and their representatives are consulted, informed and trained on OSH and the OSH issues that impact on their work and workplace.</p> <p>The OSH culture within the organization is very positive, and is highly valued by both workers and the management.</p>
<i>Weaknesses</i>	<p>There is not enough time allocated for safety meetings, which need to be held more frequently and allow time to discuss workers' OSH concerns and issues.</p> <p>OSH performance could be improved if workers were to take a higher level of ownership of the OSH process.</p> <p>The development of OSH competences needs to be given higher priority and be widened.</p>
<i>Opportunities</i>	<p>A positive OSH culture exists within the organization, shared by workers and management, and this allows OSH improvement opportunities to be taken.</p> <p>There exists the opportunity to get workers to take greater ownership of the OSH process and programme.</p> <p>Insufficient attention is currently placed on developing the OSH competences of the workforce.</p>
<i>Threats</i>	<p>Failure to develop the OSH competences of the workforce is likely to be a major block to the continuous improvement of OSH within the organization.</p> <p>Failure to allow sufficient time for regular and necessary OSH meetings may result in a deterioration of the OSH culture of the organization.</p> <p>Continuous improvement of OSH will not be possible unless attention is given to developing workers OSH competences.</p>

Appendix 3 Sample audit summary

Scored items	Title	Maximum possible score	Actual score	Traffic light
3.1	Occupational safety and health policy	45	45	100%
3.2	Worker participation	40	28	70%
3.3	Responsibility and accountability	45	30	66%
3.4	Competence and training	45	15	33%
3.5	Occupational safety and health management system documentation	50	42	84%
3.6	Communication	40	20	50%
3.7	Initial review	40	30	75%
3.8	System planning, development and implementation	50	42	84%
3.9	Occupational safety and health objectives	40	38	95%
3.10.1	Hazard prevention: Prevention and control measures	30	20	66%
3.10.2	Hazard prevention: Management of change	30	15	50%
3.10.3	Hazard prevention: Emergency prevention, preparedness and response	30	23	77%
3.10.4	Hazard prevention: Procurement	25	20	80%
3.10.5	Hazard prevention: Contracting	35	16	46%
3.11	Performance monitoring and measurement	60	48	80%

Scored items	Title	Maximum possible score	Actual score	Traffic light
3.12	Investigation of work-related injuries, ill health disease and incidents, and their impact on safety and health performance	35	20	57%
3.13	Audit	50	20	40%
3.14	Management review	35	20	57%
3.15	Preventive and corrective action	30	27	90%
3.16	Continual improvement	40	34	85%
Total score		795	553	69%

Key

- 0% to 49%: **RED**
- 50% to 69%: **ORANGE**
- 70% and over: **GREEN**

Appendix 4

Pre-audit planning

Assessment item	Documentation review	Interviews/Questions	Observations	Test
3.1 OSH policy				
3.2 Worker participation				
3.3 Responsibility / accountability				
3.4 Competence and training				

Assessment item	Documentation review	Interviews/Questions	Observations	Test
3.5 OSH Management system documentation				
3.6 Communication				
3.7 Initial review				
3.8 System planning, development and Implementation				
3.9 OSH objectives				

Assessment item	Documentation review	Interviews/Questions	Observations	Test
3.10.1 Prevention and control				
3.10.2 Management of change				
3.10.3 Emergency prevention, preparedness and response				
3.10.4 Procurement				
3.10.5 Contracting				

Assessment item	Documentation review	Interviews/Questions	Observations	Test
3.11 Performance monitoring and measurement				
3.12 Investigation of work-related injuries, ill health, diseases and incidents. Impacts on OSH performance				
3.13 Audit				
3.14 Management review				
3.15 Preventive and corrective action				
3.16 Continual improvement				

**Programme on Safety and Health at Work
and the Environment (SafeWork)**

International Labour Organization
Route des Morillons 4
CH-1211 Geneva 22
Switzerland

TEL. +41 22 7996715

FAX +41 22 7996878

E-mail: safework@ilo.org

www.ilo.org/safework

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