

Client information note – Assessment process – OHSAS 18001

Overview

This Client Information Note explains the main stages of our process for OHSAS 18001 Occupational Health & Safety (OHS) Management System assessment and certification. The assessment process normally includes two visits to your site before we can recommend approval. We call these two visits:

- Stage 1 (document review and planning visit), and
- Stage 2 (initial assessment).

Once we have issued your approval certificate, we will carry out surveillance visits to maintain the approval.

At each visit, our assessors will be open and helpful, and will follow a practical approach. In this way we believe that we add value to the assessment process.

Before we visit, we will discuss and agree with you the visit dates, start and finish times, the assessment team members, how long the visit will last, and which parts of your business we will visit. Visits will be carried out and reported in your national language unless otherwise agreed.

Stage 1 - Document review and planning visit

Purpose of the visit

We do this visit to:

- find out whether the management system processes and documents required by the standard are in place and put into practice so that a meaningful stage 2 assessment can take place
- assess the risk identification, assessment and treatment process and the methods required to ensure effective risk management and effective implementation of the applicable controls.
- collect information about your company's organisation, processes and activities so that we can develop a plan for the stage 2 assessment
- confirm the scope, assessment team requirements and timing for the stage 2 assessment
- answer any questions you may have about our service.

Our main focus is on the planning elements. This includes:

- how effective your system is in identifying hazards
- the way you have assessed the associated risks, and
- how you plan the necessary control measures and improvement objectives together with the associated management programmes.

The visit will identify any weaknesses or omissions in your system that may need to be put right before the second stage of the assessment.

Carrying out the visit

The visit (which usually lasts for two days), starts with an opening meeting. The assessor will explain to your management team how we carry out assessments, and you will be able to introduce your company. The assessor will agree a plan for the visit with you.

The assessor will then:

- review the design and documentation of the system against the assessment criteria and the proposed assessment scope
- conduct a site tour, where appropriate

- produce a focused report which describes both positive findings and any issues requiring your attention before the stage 2 visit takes place; for your guidance, the report will identify the potential grading of these issues if they were findings outstanding at the end of the stage 2 visit
- produce a detailed visit plan for the stage 2 initial assessment visit.

The assessor will usually need to review your:

- **Occupational Health and Safety policy**
- **hazard identification, risk assessment and risk control records**
- **access to applicable legislation and regulations**
- **objectives and OHS management programmes**
- **OHS performance measures and reporting**
- **internal audit programme and reports**
- **procedures to manage and control the identified OHS risks**
- **emergency response plans**
- **management of the system** – including corrective and preventive action and management review
- **site activities** - to observe site layout and conditions, and operations and activities in progress; to confirm potential hazards and risks; to identify current control measures and OHS performance measures and indicators; and as familiarisation for the stage 2 assessment.

The visit ends with a closing meeting to present the stage 1 report and agree the next stage of the assessment process, including any health and safety, security and administrative issues.

If your organisation controls significant maintenance activity, involving either your own staff, or contractors and your staff, the Stage 2 visit may be arranged to coincide with a major shutdown for maintenance. This will be based on the assessors' assessment of the hazard content and the complexity of the applied controls likely to be assessable.

The documentation reviewed during the stage 1 visit will be used at future visits as a baseline. However, you should continue to amend system documents as a result of internal improvement activities. At each visit we will need to identify the changes between the latest issue and the baseline.

Stage 2 - Initial assessment

Purpose of the visit

During this visit the assessor will focus on how your management system has been put into practice. The stage 2 visit aims to confirm that:

- your policies, objectives, programmes and procedures are effectively implemented
- there is a planned and systematic approach to improvement
- you are effectively managing the identified OHS risks in the management system
- the management system meets all requirements of the assessment standard.

Carrying out the visit

The assessment, which may have been arranged to coincide with a major shutdown for maintenance, follows the plan prepared during the stage 1 visit. Members of the assessment team will visit areas with guides who can witness the findings and help the audit. The Stage 2 assessment usually includes a meeting with the representative of senior management with overall responsibility for the management system.

The assessment team will report, as a minimum, any findings related to:

- follow-up of findings from the stage 1 visit
- activities, products and services identified in the agreed scope for the assessment
- how effective the management system is at achieving the commitments of the organisation's policy including legal compliance, continual improvement and control of risks to health and safety
- putting into practice the arrangements to manage OHS risks
- progress to achieve objectives through management programmes
- putting into practice the systems needed by the management system and maintaining appropriate records

- putting into practice monitoring and measurement arrangements to assess how the management system performs and whether objectives are achieved
- how involved in, and committed to, the management system the senior management are, and
- how effective the internal audit, corrective and preventive action, and management review processes are.

The assessment team will hold review meetings with you each day to discuss any findings. Appropriate staff should be present to confirm that you accept these findings. Please see below in the 'Reporting' section how we define findings. We finalise the grade of findings at the end of the visit.

The visit ends with a closing meeting to present a summary of the findings, and to agree the next stage of the assessment process. The assessor will give a complete report to your management representative. If we have not reported any Major Nonconformities, and you have informed the assessor of your proposed corrective action for any Minor Nonconformities, the assessor will recommend approval to the assessment standard (although this depends on an independent technical review by our office). However, if any Major Nonconformities have been reported, we will delay approval and carry out a follow up assessment to review corrective actions. Our team leader will agree with you the arrangements for this visit.

Surveillance visits

Purpose of the visit

Once we have certified your management system, we will begin a programme of surveillance visits, (which normally take place every six months). However, if you undertake major periods of shutdown maintenance (either by your own staff or using contractors), and your stage 2 visit did not coincide with such a period, then we may arrange a surveillance visit to correspond with this activity by moving one of the visits from the six-month cycle.

Surveillance visits aim to confirm that your approved management system continues to:

- be maintained
- be in operation, and
- deliver continual improvements.

We also consider the implications of changes to the system. Such changes may have been carried out as a result of changes in your activities, products or services.

We will then consider whether you continue to meet certification requirements.

Carrying out the visit

Themes for surveillance visits will normally have been agreed with you at your previous visit. We will confirm the details with you at an opening meeting.

Themes chosen will allow us to review:

- internal audit and management review processes
- how management programmes are operating and their progress in meeting OHS objectives
- corrective and preventive action processes including customer complaints
- changes to the system and the effectiveness of their implementation
- how you manage changes relating to responsibilities and authorities of main staff.

We will also review any outstanding findings and how you use LRQA and accreditation logos.

If we report any Minor Nonconformities, and the next visit is within six months, we will normally follow them up during our next visit to you, otherwise we will make arrangements with you for the follow up.

If we report a Major Nonconformity during a surveillance visit, we will arrange a special surveillance visit to follow up the necessary corrective action (normally within three months). This is the first phase of our suspension and withdrawal of approval process.

If your next visit is when we renew your certificate, our assessor will review your 'management elements' records with you, including:

- management review

- internal audit
- continual improvement
- internal audit
- corrective action
- preventive action
- our surveillance reports, and
- changes to the documented management system.

The review will cover the current certification period (that is, the last three years), to decide the level of assessment necessary when we carry out the visit to renew your certificate. As a result, it is important for you to maintain suitable records for this purpose.

At the closing meeting, our assessor will report on the current visit and agree with you the theme for the next visit. If any Major Nonconformities have been reported, the assessor will also agree arrangements for follow up of actions you will take.

Reporting

The reporting processes for stage 1, stage 2 and surveillance visits are similar. We fill in visit reports to record assessment findings, progress against the assessment plan, positive comments, and also points of clarification or interpretation. We record assessment findings in an Assessment Findings Log, and identify them as Major Nonconformity, Minor Nonconformity, Requires Correction, Scope for improvement, or xLRQA. We define these findings as follows:

Major Nonconformity: A system failure that:

- is already affecting system effectiveness or deliverables
- puts at risk the capability of the management system
- requires immediate containment
- requires immediate root cause analysis and corrective action.

Our team leader will make arrangements with you for follow up.

Minor Nonconformity: A weakness in an internal facing process or procedure; or a finding where any further deterioration of control could reasonably be considered likely to result in the system becoming ineffective. Requires root cause investigation and corrective action.

If raised at a Stage 2 or Certificate Renewal visit, then the assessor will ask you to indicate the corrective action you will take. This corrective action plan will form part of the independent review by our office before your certificate is issued. If raised at a surveillance visit, although you need to take corrective action within an appropriate time after the visit, you do not normally need to provide us with details of the action until we next visit you.

In both cases, at the next visit the assessor will review the action you have taken and fill in the corrective action review section in the findings log.

Requires correction: A finding that requires correction, but is not indicative of a system failure or weakness and is of insufficient concern or potential impact to merit root cause analysis or corrective action. An isolated error or oversight.

Scope for improvement: Your system is compliant, but the assessor wants to bring to your attention a possible improvement. Typically this could be: public domain information, good industry practice or transfer of good practice from one part of your organisation to another.

xLRQA: An item that may be followed up by the assessor at the next visit.

Please keep copies of all our visit reports for three years. In exceptional circumstances, we may ask you to provide copies of previous reports.

Sampling

It is important to remember that even though a problem may not have been identified in an area of activity, it does not necessarily mean that there are no problems. As assessment work is based on

sampling techniques, statistically there is always a possibility that issues will not be identified during an assessment. Please remember this when you audit your own management system.

Confidentiality

We will not pass on any of the information we gather about your organisation (including the contents of reports), to any other person or organisation without your permission (except as required by the accreditation body).

We have taken care to ensure that the information in this Client Information Note is accurate at the time of issue. However, the requirements that this document is based on can change. If in doubt, please contact your local office to ensure that you have the latest version.