Occupational health and safety management systems — Guidelines for the implementation of OHSAS 18001:2007
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Acknowledgement

The following organizations are included in this listing either to recognize their assistance in the development of this edition of OHSAS 18002, or to recognize their general support of the OHSAS standards.

AFAQ EAQA
American Industrial Hygiene Association (AIHA)
American Society of Safety Engineers (ASSE)
Asociación Española de Normalización y Certificación (AENOR)
Association of British Certification Bodies (ABCБ)
British Standards Institution (BSI)
Bureau Veritas Certification
Český normalizační institute (CNI)
Comisión Federal de Electricidad (CFE), (Gerencia de la seguridad industrial)
Czech Accreditation Institute (CAI)
Det Norske Veritas (DNV)
DS Certification A/S
EEF the manufacturers' organisation
ENLAR Compliance Services, Inc.
Estonian Centre for Standardisation (EVS)
Health and Safety Executive¹)
Hong Kong Quality Assurance Agency (HKQAA)
iMS Risk Solutions
Institute for Standardization of Serbia (ISS)
Institution of Occupational Safety and Health (IOSH)
Instituto Argentino de Normalización y Certificación (IRAM)
Instituto Colombiano de Normas Técnicas y Certificación (ICONTEC)
Instituto de Normas Técnicas de Costa Rica (INTECO)
Instituto Mexicano de Normalización y Certificación, A.C. (IMNC, A.C.)
Instituto Uruguayo de Normas Técnicas (UNIT)
ITS Consultants
Japan Industrial Safety and Health Association (JISHA)
Japanese Standards Association (JSA)
Korea Gas Safety Corporation (ISO Certificate Division)
Lloyds Register Quality Assurance (LRQA)
Management Systems Certification Limited

¹) As the regulatory authority responsible for health and safety in Great Britain, the Health and Safety Executive would wish to make it clear that reliance on the OHSAS Standard by organizations will not absolve them from compliance with any of their legal health and safety obligations under the laws of England and Wales, and Scotland.
We would also like to recognize the invaluable contribution made by those many organizations who took the time to review the working drafts of OHSAS 18002, and who submitted comments for consideration. This helped us greatly in improving the standard, and is much appreciated.
Foreword

This Occupational Health and Safety Assessment Series (OHSAS) guideline, and OHSAS 18001:2007, Occupational health and safety management systems — Requirements, have been developed in response to customer demand for a recognizable occupational health and safety management system standard against which their management systems can be assessed and certified, and for guidance on the implementation of such a standard.

OHSAS 18001 is compatible with the ISO 9001:2008 (Quality) and ISO 14001:2004 (Environmental) management systems standards, in order to facilitate the integration of quality, environmental and occupational health and safety management systems by organizations, should they wish to do so.

OHSAS 18002 quotes the specific requirements from OHSAS 18001 and follows with relevant guidance. The clause numbering of OHSAS 18002 is aligned with that of OHSAS 18001. Text given with an outlined box is an exact duplication of text from OHSAS 18001.

OHSAS 18002 will be reviewed and amended or revised when considered appropriate. Reviews will be conducted when new editions of OHSAS 18001 are published (expected when revised editions of either ISO 9001 or ISO 14001 are published).

This OHSAS Standard will be withdrawn on publication of its contents in, or as, an International Standard.

This OHSAS Standard has been drafted in accordance with the rules given in the ISO/IEC Directives, Part 2.

This second edition cancels and replaces the first edition (OHSAS 18002:2000), which has been technically revised.

The principal changes with respect to the previous edition are as follows:

1) in relation to the revised text of OHSAS 18001:
   - The importance of “health” has now been given greater emphasis.
   - OHSAS 18001 now refers to itself as a standard, not a specification, or document, as in the earlier edition. This reflects the increasing adoption of OHSAS 18001 as the basis for national standards on occupational health and safety management systems.
   - The “Plan-Do-Check-Act” model diagram is only given in the Introduction, in its entirety, and not also as sectional diagrams at the start of each major clause.
   - Reference publications in Clause 2 have been limited to purely international documents.
   - New definitions have been added, and existing definitions revised.
   - The term “tolerable risk” has been replaced by the term “acceptable risk” (see 3.1).
— The term “accident” is now included in the term “incident” (see 3.9).

— The definition of the term “hazard” no longer refers to “damage to property or damage to the workplace environment” (see 3.6).

It is now considered that such “damage” is not directly related to occupational health and safety management, which is the purpose of this OHSAS Standard, and that it is included in the field of asset management. Instead, the risk of such “damage” having an effect on occupational health and safety should be identified through the organization’s risk assessment process, and be controlled through the application of appropriate risk controls.

— Sub-clauses 4.3.3 and 4.3.4 have been merged, in line with ISO 14001:2004.

— A new requirement has been introduced for the consideration of the hierarchy of controls as part of OH&S planning (see 4.3.1).

— Management of change is now more explicitly addressed (see 4.3.1 and 4.4.6).

— A new clause on the “Evaluation of compliance” (see 4.5.2) has been introduced.

— New requirements have been introduced for participation and consultation (see 4.4.3.2).

— New requirements have been introduced for the investigation of incidents (see 4.5.3.1).

2) in relation to changes that are specific to OHSAS 18002:

— OHSAS 18002:2000 included a presentation format where firstly the relevant OHSAS 18001 clause was given followed by:
  a) a description of the intent of the clause;
  b) typical inputs needed for meeting the requirements of the clause;
  c) a description of processes that an organization could use to meet the requirements;
  d) typical outputs expected from meeting the requirements.

This format was found to be difficult to apply, so has not been followed in this edition (in fact, the format had not been applied consistently in the 2000 edition). Instead, this edition of OHSAS 18002 is now presented in a more logical format, in which items in a) to d) have been followed during the drafting of the guidance, but have not been given overtly, as previously.

— New sub-clauses, as per OHSAS 18001 (and from ISO 14001), e.g.:
  • for OHSAS 18001:2007, 4.4.3 Communication, participation and consultation (including new sub-clauses on participation/consultation), and 4.5.3.1 Incident investigation.
  • from ISO 14001:2004, 4.3.3 Objectives and programme(s) (through the merging of the former sub-clauses 4.3.3 and 4.3.4), and 4.5.2 Evaluation of compliance.
- New sub-clauses in alignment with the ILO-OSH:2001 Guidelines, e.g. 4.1.2 Initial review, and 4.3.1.5 Management of change

- Additional new sub-clauses and annexes, e.g. 4.4.2.4 Awareness, Annex C - Examples of items for inclusion in a hazard identification checklist and Annex D - Comparisons of some examples of risk assessment tools and methodologies

- Expanded guidance given in many sub-clauses, e.g. for 4.3.1 Hazard identification, risk assessment and determination of controls, 4.3.2 Legal and other requirements, 4.3.3 Objectives and programme(s), 4.4.6 Operational control, 4.4.7 Emergency preparedness and response, 4.5.5 Internal audit

This publication does not purport to include all the necessary provisions of a contract. Users are responsible for its correct application.

Compliance with this Occupational Health and Safety Assessment Series (OHSAS) Standard cannot confer immunity from legal obligations.
Introduction

Organizations of all kinds are increasingly concerned with achieving and demonstrating sound occupational health and safety (OH&S) performance by controlling their OH&S risks, consistent with their OH&S policy and objectives. They do so in the context of increasingly stringent legislation, the development of economic policies and other measures that foster good OH&S practices, and of increased concern expressed by interested parties about OH&S issues.

Many organizations have undertaken OH&S “reviews” or “audits” to assess their OH&S performance. On their own, however, these “reviews” and “audits” may not be sufficient to provide an organization with the assurance that its performance not only meets, but will continue to meet, its legal and policy requirements. To be effective, they need to be conducted within a structured management system that is integrated within the organization.

The OHSAS Standards covering OH&S management are intended to provide organizations with the elements of an effective OH&S management system that can be integrated with other management requirements and help organizations achieve OH&S and economic objectives. These standards, like other International Standards, are not intended to be used to create non-tariff trade barriers or to increase or change an organization’s legal obligations.

OHSAS 18001 specifies requirements for an OH&S management system to enable an organization to develop and implement a policy and objectives which take into account legal requirements and information about OH&S risks. It is intended to apply to all types and sizes of organizations and to accommodate diverse geographical, cultural and social conditions. The basis of the approach is shown in Figure 1. The success of the system depends on commitment from all levels and functions of the organization, and especially from top management. A system of this kind enables an organization to develop an OH&S policy, establish objectives and processes to achieve the policy commitments, take action as needed to improve its performance, and demonstrate the conformity of the system to the requirements of OHSAS 18001. The overall aim of OHSAS 18001 is to support and promote good OH&S practices, including self regulation, in balance with socio-economic needs. It should be noted that many of the requirements can be addressed concurrently or revisited at any time.

The development of OHSAS 18001:2007 focused on improving the standard by:

— improving alignment with ISO 14001 and ISO 9001;
— seeking opportunities for alignment with other OH&S management system standards, e.g. the ILO-OSH:2001 Guidelines;
— reflecting developments in OH&S practices;
— clarifying the original text from the OHSAS 18001:1999 requirements based on experience of its use.

There is an important distinction between OHSAS 18001, which describes the requirements for an organization’s OH&S management system and can be used for certification/registration and/or self-declaration of an organization’s OH&S management system, and
a non-certifiable guideline, such as OHSAS 18002, intended to provide generic assistance to an organization for establishing, implementing or improving an OH&S management system. OH&S management encompasses a full range of issues, including those with strategic and competitive implications. Demonstration of successful implementation of OHSAS 18001 can be used by an organization to assure interested parties that an appropriate OH&S management system is in place.

Any reference to other International Standards is for information only.

Figure 1  OH&S management system model for this OHSAS Standard

NOTE  This OHSAS Standard is based on the methodology known as Plan-Do-Check-Act (PDCA). PDCA can be briefly described as follows.

— Plan: establish the objectives and processes necessary to deliver results in accordance with the organization’s OH&S policy.
— Do: implement the processes.
— Check: monitor and measure processes against OH&S policy, objectives, legal and other requirements, and report the results.
— Act: take actions to continually improve OH&S performance.
Many organizations manage their operations via the application of a system of processes and their interactions, which can be referred to as the “process approach”. ISO 9001 promotes the use of the process approach. Since PDCA can be applied to all processes, the two methodologies are considered to be compatible.

OHSAS 18001 contains requirements that can be objectively audited; however, it does not establish absolute requirements for OH&S performance beyond the commitments, in the OH&S policy, to comply with applicable legal requirements and with other requirements to which the organization subscribes, to the prevention of injury and ill health and to continual improvement. Thus, two organizations carrying out similar operations but having different OH&S performance can both conform to its requirements.

OHSAS 18001 does not include requirements specific to other management systems, such as those for quality, environmental, security, or financial management, though its elements can be aligned or integrated with those of other management systems. It is possible for an organization to adapt its existing management system(s) in order to establish an OH&S management system that conforms to the requirements of OHSAS 18001. It is pointed out, however, that the application of various elements of the management system might differ depending on the intended purpose and the interested parties involved.

The level of detail and complexity of the OH&S management system, the extent of documentation and the resources devoted to it depend on a number of factors, such as the scope of the system, the size of an organization and the nature of its activities, products and services, and the organizational culture. This may be the case in particular for small and medium-sized enterprises.

NOTE 1 As all of the requirements of OHSAS 18001:2007 are included within OHSAS 18002:2008, organizations can choose to retain a copy of OHSAS 18002 alone, for certification purposes.

NOTE 2 There are some small variations in text between the Introduction given in OHSAS 18001 and this Introduction to account for the differences in the two OHSAS standards.
1 Scope

This Occupational Health and Safety Assessment Series (OHSAS) guideline provides generic advice on the application of OHSAS 18001:2007.

It explains the underlying principles of OHSAS 18001 and describes the intent, typical inputs, processes and typical outputs, against each requirement of OHSAS 18001. This is to aid the understanding and implementation of OHSAS 18001.

OHSAS 18002 does not create additional requirements to those specified in OHSAS 18001 nor does it prescribe mandatory approaches to the implementation of OHSAS 18001.

OHSAS 18001 text

This Occupational Health and Safety Assessment Series (OHSAS) Standard specifies requirements for an occupational health and safety (OH&S) management system, to enable an organization to control its OH&S risks and improve its OH&S performance. It does not state specific OH&S performance criteria, nor does it give detailed specifications for the design of a management system.

This OHSAS Standard is applicable to any organization that wishes to:

a) establish an OH&S management system to eliminate or minimize risks to personnel and other interested parties who could be exposed to OH&S hazards associated with its activities;

b) implement, maintain and continually improve an OH&S management system;

c) assure itself of its conformity with its stated OH&S policy;

d) demonstrate conformity with this OHSAS Standard by:

1) making a self-determination and self-declaration, or

2) seeking confirmation of its conformance by parties having an interest in the organization, such as customers, or

3) seeking confirmation of its self-declaration by a party external to the organization, or

4) seeking certification/registration of its OH&S management system by an external organization.

All the requirements in this OHSAS Standard are intended to be incorporated into any OH&S management system. The extent of the application will depend on such factors as the OH&S policy of the organization, the nature of its activities and the risks and complexity of its operations.
This OHSAS Standard is intended to address occupational health and safety, and is not intended to address other health and safety areas such as employee wellbeing/wellness programs, product safety, property damage or environmental impacts.

2 Reference publications

Other publications that provide information or guidance are listed in the Bibliography. It is advisable that the latest editions of such publications be consulted. Specifically, reference should be made to the following publications.

OHSAS 18001:2007, Occupational health and safety management systems — Requirements


ISO 19011:2002, Guidelines for quality and/or environmental management systems auditing

NOTE A project was approved by the International Organization for Standardization (ISO) in March 2008 to revise ISO 19011 and to expand its scope to cover the auditing of additional fields of management systems, including OH&S management systems. Reference should be made to the revised version when it is available.

3 Terms and definitions

For the purposes of this document, the terms and definitions given in OHSAS 18001 apply.

OHSAS 18001 text

3.1 acceptable risk
risk that has been reduced to a level that can be tolerated by the organization having regard to its legal obligations and its own OH&S policy (3.16)

3.2 audit
systematic, independent and documented process for obtaining “audit evidence” and evaluating it objectively to determine the extent to which “audit criteria” are fulfilled

[ISO 9000:2005, 3.9.1]

NOTE 1 Independent does not necessarily mean external to the organization. In many cases, particularly in smaller organizations, independence can be demonstrated by the freedom from responsibility for the activity being audited.

NOTE 2 For further guidance on “audit evidence” and “audit criteria”, see ISO 19011.
3.3 continual improvement
recurring process of enhancing the OH&S management system (3.13)
in order to achieve improvements in overall OH&S performance
(3.15) consistent with the organization’s (3.17) OH&S policy (3.16)

NOTE 1 The process need not take place in all areas of activity
simultaneously.

NOTE 2 Adapted from ISO 14001:2004, 3.2.

3.4 corrective action
action to eliminate the cause of a detected nonconformity (3.11)
or other undesirable situation

NOTE 1 There can be more than one cause for a nonconformity.

NOTE 2 Corrective action is taken to prevent recurrence whereas
preventive action (3.18) is taken to prevent occurrence.

[ISO 9000:2005, 3.6.5]

3.5 document
information and its supporting medium

NOTE The medium can be paper, magnetic, electronic or optical
computer disc, photograph or master sample, or a combination
thereof.

[ISO 14001:2004, 3.4]

3.6 hazard
source, situation, or act with a potential for harm in terms of
human injury or ill health (3.8), or a combination of these

3.7 hazard identification
process of recognizing that a hazard (3.6) exists and defining its
characteristics

3.8 ill health
identifiable, adverse physical or mental condition arising from and/
or made worse by a work activity and/or work-related situation

3.9 incident
work-related event(s) in which an injury or ill health (3.8)
(regardless of severity) or fatality occurred, or could have occurred

NOTE 1 An accident is an incident which has given rise to injury, ill
health or fatality.

NOTE 2 An incident where no injury, ill health, or fatality occurs
may also be referred to as a “near-miss”, “near-hit”, “close call” or
“dangerous occurrence”.

NOTE 3 An emergency situation (see 4.4.7) is a particular type of
incident.
3.10 interested party
person or group, inside or outside the workplace (3.23), concerned with or affected by the OH&S performance (3.15) of an organization (3.17)

3.11 nonconformity
non-fulfilment of a requirement

[ISO 9000:2005, 3.6.2; ISO 14001, 3.15]
NOTE A nonconformity can be any deviation from:
— relevant work standards, practices, procedures, legal requirements, etc.
— OH&S management system (3.13) requirements.

3.12 occupational health and safety (OH&S)
conditions and factors that affect, or could affect, the health and safety of employees or other workers (including temporary workers and contractor personnel), visitors, or any other person in the workplace (3.23)
NOTE Organizations can be subject to legal requirements for the health and safety of persons beyond the immediate workplace, or who are exposed to the workplace activities.

3.13 OH&S management system
part of an organization’s (3.17) management system used to develop and implement its OH&S policy (3.16) and manage its OH&S risks (3.21)
NOTE 1 A management system is a set of interrelated elements used to establish policy and objectives and to achieve those objectives.
NOTE 2 A management system includes organizational structure, planning activities (including, for example, risk assessment and the setting of objectives), responsibilities, practices, procedures (3.19), processes and resources.
NOTE 3 Adapted from ISO 14001:2004, 3.8.

3.14 OH&S objective
OH&S goal, in terms of OH&S performance (3.15), that an organization (3.17) sets itself to achieve
NOTE 1 Objectives should be quantified wherever practicable.
NOTE 2 4.3.3 requires that OH&S objectives are consistent with the OH&S policy (3.16).

3.15 OH&S performance
measurable results of an organization’s (3.17) management of its OH&S risks (3.21)
NOTE 1 OH&S performance measurement includes measuring the effectiveness of the organization’s controls.
NOTE 2  In the context of OH&S management systems (3.13), results can also be measured against the organization’s (3.17) OH&S policy (3.16), OH&S objectives (3.14), and other OH&S performance requirements.

3.16
OH&S policy
overall intentions and direction of an organization (3.17) related to its OH&S performance (3.15) as formally expressed by top management

NOTE 1 The OH&S policy provides a framework for action and for the setting of OH&S objectives (3.14)

NOTE 2 Adapted from ISO 14001:2004, 3.11.

3.17
organization
company, corporation, firm, enterprise, authority or institution, or part or combination thereof, whether incorporated or not, public or private, that has its own functions and administration

NOTE For organizations with more than one operating unit, a single operating unit may be defined as an organization.

ISO 14001:2004, 3.16

3.18
preventive action
action to eliminate the cause of a potential nonconformity (3.11) or other undesirable potential situation

NOTE 1 There can be more than one cause for a potential nonconformity.

NOTE 2 Preventive action is taken to prevent occurrence whereas corrective action (3.4) is taken to prevent recurrence.

ISO 9000:2005, 3.6.4

3.19
procedure
specified way to carry out an activity or a process

NOTE Procedures can be documented or not.

ISO 9000:2005, 3.4.5

3.20
record
document (3.5) stating results achieved or providing evidence of activities performed

ISO 14001:2004, 3.20

3.21
risk
combination of the likelihood of an occurrence of a hazardous event or exposure(s) and the severity of injury or ill health (3.8) that can be caused by the event or exposure(s)

3.22
risk assessment
process of evaluating the risk(s) (3.21) arising from a hazard(s), taking into account the adequacy of any existing controls, and deciding whether or not the risk(s) is acceptable
3.23

**workplace**

any physical location in which work related activities are performed under the control of the organization

**NOTE** When giving consideration to what constitutes a workplace, the organization (3.17) should take into account the OH&S effects on personnel who are, for example, travelling or in transit (e.g. driving, flying, on boats or trains), working at the premises of a client or customer, or working at home.

4 **OH&S management system requirements**

4.1 **General requirements**

**OHSAS 18001 text**

The organization shall establish, document, implement, maintain and continually improve an OH&S management system in accordance with the requirements of this OHSAS Standard and determine how it will fulfil these requirements.

The organization shall define and document the scope of its OH&S management system.

4.1.1 **OH&S management system**

This OHSAS 18001 requirement is a general statement concerning the establishment and maintenance of an OH&S management system within an organization

“Establish” implies a level of permanency and the system should not be considered established until all its elements have been demonstrably implemented. “Maintain” implies that, once established, the system continues to operate. This requires active effort on the part of the organization. Many systems start well but deteriorate due to lack of maintenance. Many of the elements of OHSAS 18001 (such as checking and corrective action and management review) are designed to ensure active maintenance of the system.

An organization seeking to establish an OH&S management system that conforms to OHSAS 18001 should determine its current position with regard to its OH&S risks by means of an initial review (see 4.1.2 for further details on initial review). In determining how it will fulfil the requirements of OHSAS 18001 the organization should consider the conditions and factors that affect, or could affect, the health and safety of persons, what OH&S policies it needs, and how it will manage its OH&S risks.

The level of detail and complexity of the OH&S management system, the extent of documentation and the resources devoted to it are dependent on the nature (size, structure, complexity) of an organization and its activities.
4.1.2 Initial review

An initial review should compare the organization's current management of OH&S against the OHSAS 18001 requirements (including those for applicable legal or other requirements), in order to determine the extent to which these requirements are being met.

The initial review will provide information which an organization can use in formulating plans for implementing and prioritizing improvements to the OH&S management system.

The aim of an initial review should be to consider all OH&S risks faced by the organization, as a basis for establishing the OH&S management system. An organization should consider, but not limit itself to, the following items within its initial review:

- legal and other requirements (see the examples in 4.3.2);
- identification of the OH&S hazards and evaluation of risks faced by the organization;
- OH&S assessments;
- an examination of existing systems, practices, processes and procedures;
- evaluations of OH&S improvement initiatives;
- an evaluation of feedback from the investigation of previous incidents, work related ill health, accidents and emergencies;
- relevant management systems and available resources.

A suitable approach to the initial review can include the use of:

- checklists, interviews, direct inspection and measurement;
- the results of previous management system audits or other reviews, depending on the nature of the organization's activities;
- the results of consultations with workers, contractors or other relevant external interested parties.

Where hazard identification and risk assessment processes already exist, they should be reviewed for adequacy against the requirements of OHSAS 18001.

It is emphasized that an initial review is not a substitute for the implementation of the structured systematic approach to hazard identification, risk assessment and determining controls given in 4.3.1. However an initial review can provide additional inputs into planning these processes.

4.1.3 Scope of the OH&S management system

An organization can choose to implement an OH&S management system with respect to the entire organization, or to a subdivision of the organization, provided this is consistent with its definition of its workplace (see 3.23). However, once the workplace is defined, all the work related activities and services of the organization, or subdivision, within that workplace need to be included in the OH&S management system.

Care should be taken in defining and documenting the scope of the OH&S management system, to determine who, what and where, are to be covered. The scope should not be limited so as to exclude an
operation or activity that can impact on the OH&S (see 3.12) of an organization’s employees and other persons under its control in the workplace.

NOTE The ILO-OSH:2001 Guidelines recommend that employees are consulted when defining the scope, or when changes to the scope are considered.

### 4.2 OH&S policy

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<th>OHSAS 18001 text</th>
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<tr>
<td>Top management shall define and authorize the organization’s OH&amp;S policy and ensure that within the defined scope of its OH&amp;S management system it:</td>
</tr>
<tr>
<td>a) is appropriate to the nature and scale of the organization’s OH&amp;S risks;</td>
</tr>
<tr>
<td>b) includes a commitment to prevention of injury and ill health and continual improvement in OH&amp;S management and OH&amp;S performance;</td>
</tr>
<tr>
<td>c) includes a commitment to at least comply with applicable legal requirements and with other requirements to which the organization subscribes that relate to its OH&amp;S hazards;</td>
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<tr>
<td>d) provides the framework for setting and reviewing OH&amp;S objectives;</td>
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<tr>
<td>e) is documented, implemented and maintained;</td>
</tr>
<tr>
<td>f) is communicated to all persons working under the control of the organization with the intent that they are made aware of their individual OH&amp;S obligations;</td>
</tr>
<tr>
<td>g) is available to interested parties; and</td>
</tr>
<tr>
<td>h) is reviewed periodically to ensure that it remains relevant and appropriate to the organization.</td>
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Top management should demonstrate the leadership and commitment necessary for the OH&S management system to be successful and to achieve improved OH&S performance.

An OH&S policy establishes an overall sense of direction and is the driver for implementing and improving an organization’s OH&S management system so that it can maintain and potentially improve its OH&S performance.

It should enable persons under the control of the organization to understand the overall commitment of the organization and how this can affect their individual responsibilities.

The responsibility for defining and authorizing an OH&S policy rests with the organization’s top management. The ongoing and proactive involvement of top management in developing and implementing an OH&S policy is crucial.

The organization’s OH&S policy should be appropriate to the nature and scale of its identified risks and should guide the setting of objectives. In order to be appropriate, the OH&S policy should:
— be consistent with a vision of the organization’s future, and
— be realistic, neither overstating the nature of the risks the organization faces, nor trivializing them.

In developing its OH&S policy, an organization should consider:
— its mission, vision, core values and beliefs,
— coordination with other policies (corporate, integrated, etc.),
— the needs of persons working under the control of the organization,
— the OH&S hazards of the organization,
— legal and other requirements to which the organization subscribes that relate to its OH&S hazards,
— historical and current OH&S performance by the organization,
— opportunities and needs for continual improvement and the prevention of injury and ill health,
— the views of interested parties,
— what is needed to establish realistic and achievable objectives.

The policy is, as a minimum, required to include statements about the commitment of an organization to:
— the prevention of injury and ill health,
— continual improvement in OH&S management,
— continual improvement in OH&S performance,
— compliance with applicable legal requirements, and
— compliance with other requirements to which the organization subscribes.

The OH&S policy can be linked with other policy documents of the organization and should be consistent with the organization’s overall business policies and with its policies for other management disciplines, e.g. quality management or environmental management.

The communication of the policy should assist in:
— demonstrating the commitment of top management and the organization to OH&S,
— increasing awareness of the commitments made in the policy statement,
— explaining why the OH&S system is established and is maintained,
— guiding individuals in understanding their OH&S responsibilities and accountabilities (see 4.4.2).

In communicating the policy, consideration should be given to how to create and maintain awareness in both new and existing persons under the control of the organization. The policy can be communicated in alternative forms to the policy statement itself, such as through the use of rules, directives and procedures, wallet cards, posters, etc. In communicating the policy, account should be taken of issues such as diversity in the workplace, literacy levels, language skills, etc.

It is for the organization to determine how it wishes to make the policy available to its interested parties, e.g. through publication on a web site, or by providing printed copies on request.
The OH&S policy should be reviewed periodically (see 4.6) to ensure that it remains relevant and appropriate to the organization. Change is inevitable, as legislation and societal expectations evolve; consequently, the organization’s OH&S policy and OH&S management system need to be reviewed regularly to ensure their continuing suitability and effectiveness. If changes are made to the policy, the revised policy should be communicated to all persons working under the control of the organization.

NOTE “OH&S management” is equivalent to “the management of OH&S” and is the coordinated activities to direct and control an organization with regard to OH&S.

4.3 Planning

4.3.1 Hazard identification, risk assessment and determining controls

OHSAS 18001 text

The organization shall establish, implement and maintain a procedure(s) for the ongoing hazard identification, risk assessment, and determination of necessary controls.

The procedure(s) for hazard identification and risk assessment shall take into account:

a) routine and non-routine activities;

b) activities of all persons having access to the workplace (including contractors and visitors);

c) human behaviour, capabilities and other human factors;

d) identified hazards originating outside the workplace capable of adversely affecting the health and safety of persons under the control of the organization within the workplace;

e) hazards created in the vicinity of the workplace by work-related activities under the control of the organization;

NOTE 1 It may be more appropriate for such hazards to be assessed as an environmental aspect.

f) infrastructure, equipment and materials at the workplace, whether provided by the organization or others;

g) changes or proposed changes in the organization, its activities, or materials;

h) modifications to the OH&S management system, including temporary changes, and their impacts on operations, processes, and activities;

i) any applicable legal obligations relating to risk assessment and implementation of necessary controls (see also the NOTE to 3.12);

j) the design of work areas, processes, installations, machinery/equipment, operating procedures and work organization, including their adaptation to human capabilities.
The organization’s methodology for hazard identification and risk assessment shall:

a) be defined with respect to its scope, nature and timing to ensure it is proactive rather than reactive; and

b) provide for the identification, prioritization and documentation of risks, and the application of controls, as appropriate.

For the management of change, the organization shall identify the OH&S hazards and OH&S risks associated with changes in the organization, the OH&S management system, or its activities, prior to the introduction of such changes.

The organization shall ensure that the results of these assessments are considered when determining controls.

When determining controls, or considering changes to existing controls, consideration shall be given to reducing the risks according to the following hierarchy:

a) elimination;

b) substitution;

c) engineering controls;

d) signage/warnings and/or administrative controls;

e) personal protective equipment.

The organization shall document and keep the results of identification of hazards, risk assessments and determined controls up-to-date.

The organization shall ensure that the OH&S risks and determined controls are taken into account when establishing, implementing and maintaining its OH&S management system.

4.3.1.1 General

Hazards have the potential to cause human injury or ill health. Hazards therefore need to be identified before the risks associated with these hazards can be assessed and, if no controls exist or existing controls are inadequate, effective controls should be implemented according to the hierarchy of controls (see bullets a) to e) in OHSAS 18001:2007, 4.3.1).

An organization will need to apply the process of hazard identification (see 3.7) and risk assessment (see 3.22) to determine the controls that are necessary to reduce the risks of incidents (see 3.9). The overall purpose of the risk assessment process is to recognize and understand the hazards (see 3.6) that might arise in the course of the organization’s activities and ensure that the risks (see 3.21) to people arising from these hazards are assessed, prioritized and controlled to a level that is acceptable (see 3.1).

This is achieved by:

- developing a methodology for hazard identification and risk assessment,

- identifying hazards,
— estimating the associated risks, taking into account the adequacy of any existing controls (it could be necessary to obtain additional data and perform further analysis in order to achieve a reasonable estimation of the risks),
— determining whether these risks are acceptable, and
— determining the appropriate risk controls, where these are found to be necessary (workplace hazards and the way they are to be controlled are often defined in regulations, codes of practice, guidance published by regulators, and industry guidance documents).

The results of risk assessments enable the organization to compare risk reduction options and prioritize resources for effective risk management.

The outputs from the hazard identification, risk assessment and determining control processes should also be used throughout the development and implementation of the OH&S management system.

Figure 2 provides an overview of the risk assessment process.

Figure 2  Overview of the hazard identification and risk assessment process

NOTE  The development of the methodology can itself be subject to change or improvement.

4.3.1.2  Developing a methodology and procedures for hazard identification and risk assessment

Hazard identification and risk assessment methodologies vary greatly across industries, ranging from simple assessments to complex quantitative analyses with extensive documentation. Individual hazards can require that different methods be used, e.g. an assessment of long term exposure to chemicals can need a different method than that taken for equipment safety or for assessing an
office workstation. Each organization should choose approaches that are appropriate to its scope, nature and size, and which meet its needs in terms of detail, complexity, time, cost and availability of reliable data. In combination, the chosen approaches should result in an inclusive methodology for the ongoing evaluation of all the organization’s OH&S risks.

The management of change (see 4.3.1.5) needs to be considered for changes in assessed risks, determination of controls, or the implementation of controls. Management review should be used to determine whether changes to the methodology are needed overall.

To be effective, the organization’s procedures for hazard identification and risk assessment should take account of the following:

- hazards,
- risks,
- controls,
- management of change,
- documentation,
- ongoing review.

To ensure consistency of application, it is recommended that these procedure(s) be documented.

OHSAS 18001:2007, 4.3.1, identifies in bullets a) to j) what should be taken into account in developing the procedure(s). Guidance on these can be found in sub-clauses 4.3.1.3 to 4.3.1.8.

### 4.3.1.3 Hazard Identification

Hazard identification should aim to determine proactively all sources, situations or acts (or a combination of these), arising from an organization’s activities, with a potential for harm in terms of human injury or ill health (see the definition of “hazard” in 3.6). Examples include:

- sources (e.g. moving machinery, radiation or energy sources),
- situations (e.g. working at heights), or
- acts (e.g. manual lifting).

Hazard identification should consider the different types of hazards in the workplace, including physical, chemical, biological and psychosocial (see Annex C for examples of hazards).

The organization should establish specific hazard identification tools and techniques that are relevant to the scope of its OH&S management system.

The following sources of information or inputs should be considered during the hazard identification process:

- OH&S legal and other requirements (see 4.3.2), e.g. those that prescribe how hazards should be identified,
- OH&S policy (see 4.2),
- monitoring data (see 4.5.1),
- occupational exposure and health assessments,
- records of incidents (see 3.9),
— reports from previous audits, assessments or reviews,
— input from employees and other interested parties (see 4.4.3),
— information from other management systems (e.g. for quality management or environmental management),
— information from employee OH&S consultations,
— process review and improvement activities in the workplace,
— information on best practice and/or typical hazards in similar organizations,
— reports of incidents that have occurred in similar organizations,
— information on the facilities, processes and activities of the organization, including the following:
  • workplace design, traffic plans (e.g. pedestrian walkways, vehicle routing), site plan(s),
  • process flowcharts and operations manuals,
  • inventories of hazardous materials (raw materials, chemicals, wastes, products, sub-products),
  • equipment specifications,
  • product specifications, material safety data sheets, toxicology and other OH&S data.

Hazard identification processes should be applied to both routine and to non-routine (e.g. periodic, occasional, or emergency) activities and situations.

Examples of non-routine activities and situations that should be considered during the hazard identification process include:
— facilities or equipment cleaning,
— temporary process modifications,
— non-scheduled maintenance,
— plant or equipment start-ups/shut-downs,
— off-site visits (e.g. field trips, customer supplier visits, prospecting, excursions),
— refurbishment,
— extreme weather conditions,
— utility (e.g. power, water, gas, etc.) disruptions,
— temporary arrangements,
— emergency situations.

Hazard identification should consider all persons having access to the workplace (e.g. customers, visitors, service contractors, delivery personnel, as well as employees) and:
— the hazards and risks arising from their activities,
— the hazards arising from the use of products or services supplied to the organization by them,
— their degree of familiarity with the workplace, and
— their behaviour.
Human factors, such as capabilities, behaviours and limitations, have to be taken into account [see bullet c) of OHSAS 18001:2007, 4.3.1] when evaluating the hazards and risks of processes, equipment and work environments. Human factors should be considered whenever there is a human interface and take into account issues such as ease of use, potential for operational errors, operator stress and user fatigue.

In considering human factors, the organization’s hazard identification process should consider the following, and their interactions:

- the nature of the job (workplace layout, operator information, work load, physical work, work patterns),
- the environment (heat, lighting, noise, air quality),
- human behaviour (temperament, habits, attitude),
- psychological capabilities (cognition, attention),
- physiological capabilities (biomechanical, anthropometrics/physical variation of people).

In some instances, there can be hazards which occur or originate outside the workplace that can have an impact on individuals within the workplace (e.g. releases of toxic materials from neighbouring operations). Where such hazards are foreseeable, these should be addressed.

The organization could be obliged to give consideration to hazards created beyond the boundary of the workplace, particularly where there is a legal obligation or duty of care concerning such hazards. In some legal jurisdictions such hazards are instead addressed through the organization’s environmental management system.

For the hazard identification to be effective the organization should use an approach that includes information from a variety of sources, especially inputs from people who have knowledge of its processes, tasks or systems, e.g.:

- observations of behaviour and work practices and analyses of the underlying causes of unsafe behaviour,
- benchmarking,
- interviews and surveys,
- safety tours and inspections,
- incident reviews and subsequent analyses,
- monitoring and assessment of hazardous exposures (chemical and physical agents),
- workflow and process analysis, including their potential for creating unsafe behaviour.

Hazard identification should be conducted by a person(s) with competence in relevant hazard identification methodologies and techniques (see 4.4.2) and appropriate knowledge of the work activity.

Checklists can be used as a reminder of what types of potential hazards to consider and to record the initial hazard identification; however, care should be taken to avoid over reliance on the use of checklists (see Annex C). Checklists should be specific to the work area, process or equipment being evaluated.
4.3.1.4 Risk assessment

4.3.1.4.1 General

Risk is the combination of the likelihood of an occurrence of a hazardous event or exposure(s) and the severity of injury or ill health (3.8) that can be caused by the event or exposure(s) (see 3.21).

Risk assessment is a process of evaluating the risk(s) arising from a hazard(s), taking into account the adequacy of any existing controls, and deciding whether the risk(s) is acceptable (see 3.22).

An acceptable risk (see 3.1) is a risk that has been reduced to a level that the organization is willing to assume with respect to its legal obligation, its OH&S policy and its OH&S objectives.

NOTE Some reference documents use the term “risk assessment” to encompass the entire process of hazard identification, risk assessment and determining controls; OHSAS 18001 and OHSAS 18002 refer to the individual elements of this process separately and use the term “risk assessment” to refer explicitly to the second stage of this process.

4.3.1.4.2 Risk assessment inputs

Inputs to the risk assessment processes can include, but are not be limited to, information or data on the following:

- details of location(s) where work is carried out,
- the proximity and scope for hazardous interaction between activities in the workplace,
- security arrangements,
- the human capabilities, behaviour, competence, training and experience of those who normally and/or occasionally carry out hazardous tasks,
- toxicological data, epidemiological data and other health related information,
- the proximity of other personnel (e.g. cleaners, visitors, contractors, the public) who might be affected by hazardous work,
- details of any work instructions, systems of work and/or permit-to-work procedures, prepared for hazardous tasks,
- manufacturers’ or suppliers’ instructions for operation and maintenance of equipment and facilities,
- the availability and use of control measures [e.g. for ventilation, guarding, personal protective equipment (PPE), etc.],
- abnormal conditions (e.g. the potential interruption of utility services such as electricity and water, or other process failures),
- environmental conditions affecting the workplace,
- the potential for failure of plant and machinery components and safety devices or for their degradation from exposure to the elements or process materials,
- details of access to, and adequacy/condition of emergency procedures, emergency escape plans, emergency equipment, emergency escape routes (including signage), emergency communication facilities, and external emergency support, etc.,
— monitoring data related to incidents associated with specific work activities,
— the findings of any existing assessments relating to hazardous work activity,
— details of previous unsafe acts either by the individuals performing the activity or by others (e.g. adjacent personnel, visitors, contractors, etc.),
— the potential for a failure to induce associated failures or disabling of control measures,
— the duration and frequency at which tasks are carried out,
— the accuracy and reliability of the data available for the risk assessment,
— any legal and other requirements (see 4.3.2) which prescribe how the risk assessment has to be performed or what constitutes an acceptable risk, e.g. sampling methods to determine exposure, use of specific risk assessment methods, or permissible exposure levels.

Risk assessment should be conducted by a person(s) with competence in relevant risk assessment methodologies and techniques (see 4.4.2) and appropriate knowledge of the work activity.

4.3.1.4.3 Risk assessment methodologies

An organization can use different risk assessment methods as part of an overall strategy for addressing different areas or activities. When seeking to establish the likelihood of harm, the adequacy of existing control measures should be taken into account. A risk assessment should be detailed enough to determine appropriate control measures.

Some risk assessment methods are complex and appropriate to special or particularly hazardous activities. For example, risk assessment of a chemical process plant might require complex mathematical calculations of the probabilities of events that could lead to a release of agents that might affect individuals in the workplace or the public. In many countries, sector-specific legislation specifies where this degree of complexity is required.

In many circumstances, OH&S risk can be addressed using simpler methods and can be qualitative. These approaches typically involve a greater degree of judgment, since they place less reliance on quantifiable data. In some cases, these methods will serve as initial screening tools, to determine where a more detailed assessment is needed.

The risk assessment should involve consultation with, and appropriate participation by, workers and take into account legal and other requirements. Regulatory guidance should be taken into account where applicable.

The organization should consider limitations in the quality and accuracy of the data used in the risk assessments and the possible effect this could have on the resulting calculation of risk. The higher the level of uncertainty in the data, the greater is the need for caution in determining whether the risk is acceptable.

NOTE See Annex D for a comparison of risk assessment tools and methodologies.
4.3.1.4 Other considerations for risk assessment

Some organizations develop generic risk assessments for typical activities that can occur in several different sites or locations. Such generic assessments can be useful as a starting point for more specific assessments, but could need to be customized to be appropriate to the particular situation. This approach can improve the speed and efficiency of the risk assessment process and improve the consistency of risk assessments for similar tasks.

When the organization's risk assessment method uses descriptive categories for assessing severity or likelihood of harm, they should be clearly defined, e.g. clear definitions of terms such as “likely” and “unlikely” are needed to ensure that different individuals interpret them consistently.

The organization should consider risks to sensitive populations (e.g. pregnant workers) and vulnerable groups (e.g. inexperienced workers), as well as any particular susceptibilities of the individuals involved in performing particular tasks (e.g. the ability of an individual who is colour-blind to read instructions).

The organization should evaluate how the risk assessment will take into account the number of persons that might be exposed to a particular hazard. Hazards that could cause harm to large numbers of persons should be given careful consideration even when it is less likely for such severe consequences to occur.

Risk assessments to evaluate the harm from exposure to chemical, biological and physical agents might require measurement of exposure concentrations with appropriate instruments and sampling methods. Comparison of these concentrations should be made to applicable occupational exposure limits or standards. The organization should ensure that the risk assessment considers both the short-term and long-term consequences of exposure and the additive effects of multiple agents and exposures.

In some cases risk assessments are performed using sampling to cover a variety of situations and locations. Care should be taken to ensure that the samples used are sufficient and adequately represent all the situations and locations being assessed.

4.3.1.5 Management of change

The organization should manage and control any changes that can affect or impact its OH&S hazards and risks. This includes changes to the organization's structure, personnel, management system, processes, activities, use of materials, etc. Such changes should be evaluated through hazard identification and risk assessment prior to their introduction.

The organization should consider hazards and potential risks associated with new processes or operations at the design stage as well as changes in the organization, existing operations, products, services or suppliers. The following are examples of conditions that should initiate a management of change process:

- new or modified technology (including software), equipment, facilities, or work environment,

- new or revised procedures, work practices, designs, specifications or standards,
— different types or grades of raw materials,
— significant changes to the site’s organizational structure and staffing, including the use of contractors,
— modifications of health and safety devices and equipment or controls.

The management of change process should include consideration of the following questions to ensure that any new or changed risks are acceptable:

— have new hazards been created (see 4.3.1.4)?
— what are the risks associated with the new hazards?
— have the risks from other hazards changed?
— could the changes adversely affect existing risk controls?
— have the most appropriate controls been chosen, bearing in mind usability, acceptability and both the immediate and long-term costs?

4.3.1.6 Determining the need for controls

Having completed a risk assessment and having taken account of existing controls, the organization should be able to determine whether existing controls are adequate or need improving, or if new controls are required.

If new or improved controls are required, their selection should be determined by the principle of the hierarchy of controls, i.e. the elimination of hazards where practicable, followed in turn by risk reduction (either by reducing the likelihood of occurrence or potential severity of injury or harm), with the adoption of personal protective equipment (PPE) as a last resort.

The following provides examples of implementing the hierarchy of controls:

a) Elimination – modify a design to eliminate the hazard, e.g. introduce mechanical lifting devices to eliminate the manual handling hazard;

b) Substitution – substitute a less hazardous material or reduce the system energy (e.g. lower the force, amperage, pressure, temperature, etc.);

c) Engineering controls – install ventilation systems, machine guarding, interlocks, sound enclosures, etc.;

d) Signage, warnings, and/or administrative controls - safety signs, hazardous area marking, photo-luminescent signs, markings for pedestrian walkways, warning sirens/lights, alarms, safety procedures, equipment inspections, access controls, safe systems of working, tagging and work permits, etc.;

e) Personal protective equipment (PPE) - safety glasses, hearing protection, face shields, safety harnesses and lanyards, respirators and gloves.

In applying the hierarchy consideration should be given to the relative costs, risk reduction benefits, and reliability of the available options.
An organization should take into account:

- the need for a combination of controls, combining elements from the above hierarchy (e.g. engineering and administrative controls),
- established good practice in the control of the particular hazard under consideration,
- adapting work to the individual (e.g. to take account of individual mental and physical capabilities),
- taking advantage of technical progress to improve controls,
- using measures that protect everyone (e.g. by selecting engineering controls that protect everyone in the vicinity of a hazard in preference to personal protective equipment (PPE)),
- human behaviour and whether a particular control measure will be accepted and can be effectively implemented,
- typical basic types of human failure (e.g. simple failure of a frequently repeated action, lapses of memory or attention, lack of understanding or error of judgement, and breach of rules or procedures) and ways of preventing them,
- the need to introduce planned maintenance of, for example, machinery safeguards,
- the possible need for emergency/contingency arrangements where risk controls fail,
- the potential lack of familiarity with the workplace and existing controls of those not in the direct employment of the organization, e.g. visitors, contractor personnel.

Once the controls have been determined the organization can prioritize its actions to implement them. In the prioritization of actions the organization should take into account the potential for risk reduction of the planned controls. It is preferable that actions addressing a high risk activity or offering a substantial reduction of risk take priority over actions that have only limited risk reduction benefit.

In some cases, it is necessary to modify work activities until risk controls are in place or apply temporary risk controls until more effective actions are completed. For example, the use of hearing protection as an interim measure until the source of noise can be eliminated, or the work activity segregated to reduce the noise exposure. Temporary controls should not be regarded as a long-term substitute for more effective risk control measures.

Legal requirements, voluntary standards and codes of practice can specify appropriate controls for specific hazards. In some cases, controls will need to be capable of attaining “as low as reasonably practicable” (ALARP) levels of risk.

The organization should conduct ongoing monitoring to ensure that the adequacy of the controls is being maintained (see 4.5.1).

NOTE The term “residual risk” is often used to describe the risk that remains after controls have been implemented.
4.3.1.7 Recording and documenting the results

The organization should document and keep the results of hazard identification, risk assessments and determined controls.

The following types of information should be recorded:

- identification of hazards,
- determination of the risks associated with the identified hazards,
- indication of the levels of the risks related to the hazards,
- description of, or reference to, the measures to be taken to control the risks,
- determination of the competency requirements for implementing the controls (see 4.4.2).

When existing or intended controls are used in determining OH&S risks, these measures should be clearly documented so that the basis of the assessment will be clear when it is reviewed at a later date.

The description of measures to monitor and control risks can be included within operational control procedures (see 4.4.6). The determination of competency requirements can be included within training procedures (see 4.4.2).

4.3.1.8 Ongoing review

It is a requirement that hazard identification and risk assessment be ongoing. This requires the organization to consider the timing and frequency of such reviews, as affected by the following types of issues:

- the need to determine whether existing risk controls are effective and adequate,
- the need to respond to new hazards,
- the need to respond to changes that the organization itself has made (see 4.3.1.5),
- the need to respond to feedback from monitoring activities, incident investigation (see 4.5.3), emergency situations or the results of testing of emergency procedures (see 4.4.7),
- changes in legislation,
- external factors, e.g. emerging occupational health issues,
- advances in control technologies,
- changing diversity in the workforce, including contractors,
- changes proposed by corrective and preventive action (see 4.5.3).

Periodic reviews can help ensure consistency across risk assessments carried out by different people at different times. Where conditions have changed and/or better risk management technologies have become available, improvements should be made as necessary.

It is not necessary to perform new risk assessments when a review can show that the existing or planned controls remain valid.

Internal audits (see 4.5.5) can provide an opportunity to check that hazard identifications, risk assessments and controls, are in place and up-to-date. Internal audits can also be a useful opportunity to check whether the assessment reflects actual workplace conditions and practice.
4.3.2 **Legal and other requirements**

**OHSAS 18001 text**

The organization shall establish, implement and maintain a procedure(s) for identifying and accessing the legal and other OH&S requirements that are applicable to it.

The organization shall ensure that these applicable legal requirements and other requirements to which the organization subscribes are taken into account in establishing, implementing and maintaining its OH&S management system.

The organization shall keep this information up-to-date.

The organization shall communicate relevant information on legal and other requirements to persons working under the control of the organization, and other relevant interested parties.

The organization should have made a policy commitment to compliance with applicable legal and other OH&S requirements that relates to its OH&S hazards (see 4.2).

These legal requirements can take many forms, such as:

- legislation, including statutes, regulations and codes of practice,
- decrees and directives,
- orders issued by regulators,
- permits, licences or other forms of authorization,
- judgements of courts or administrative tribunals,
- treaties, conventions, protocols.

Examples of “other requirements” can include:

- contractual conditions,
- agreements with employees,
- agreements with interested parties,
- agreements with health authorities,
- non-regulatory guidelines,
- voluntary principles, best practices or codes of practice, charters,
- public commitments of the organization or its parent organization, and
- corporate/company requirements.

Some of these commitments or agreements can address a range of issues in addition to OH&S matters. The OH&S management system need only address such commitments or agreements to the extent that they relate to the organization’s OH&S hazards.

To meet its policy commitments, the organization should have a structured approach to ensure that the legal and other requirements can be identified, evaluated for applicability, accessed, communicated and be kept up-to-date.

Depending on the nature of its OH&S hazards, operations, equipment, materials, etc., an organization should seek out relevant applicable OH&S legislative or other requirements. This can be achieved through
the use of knowledge within the organization and/or through the use of external sources such as:

- the internet,
- libraries,
- trade associations,
- regulators,
- legal services,
- OH&S institutes,
- OH&S consultants,
- equipment manufacturers,
- materials suppliers,
- contractors,
- customers.

From the results of the initial review, the organization should consider the legal and other requirements that are applicable to:

- its sector,
- its activities,
- its products, processes, facilities, equipment, materials, personnel,
- its location.

External resources, such as those previously listed, can be helpful in locating and evaluating these requirements.

Having identified what is applicable, the organization’s procedure needs to include information on how it can access the legal and other requirements. There is no requirement to maintain a library; it is sufficient that the organization be able to access the information when needed.

The organization’s procedure should ensure that it can determine any changes that affect the applicability of legal and other requirements relevant to its OH&S hazards.

The organization’s procedure needs to identify who should receive information on legal and other requirements, and ensure that relevant information is communicated to them (see 4.4.3)

Further guidance on how legal requirements should be taken into account in an organization’s OH&S management system can be found throughout this OHSAS standard.

4.3.3 Objectives and programme(s)

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<th>OHSAS 18001 text</th>
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<tr>
<td>The organization shall establish, implement and maintain documented OH&amp;S objectives, at relevant functions and levels within the organization.</td>
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<td>The objectives shall be measurable, where practicable, and consistent with the OH&amp;S policy, including the commitments to the prevention of injury and ill health, to compliance with applicable legal requirements and with other requirements to which the organization subscribes, and to continual improvement.</td>
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When establishing and reviewing its objectives, an organization shall take into account the legal requirements and other requirements to which the organization subscribes, and its OH&S risks. It shall also consider its technological options, its financial, operational and business requirements, and the views of relevant interested parties.

The organization shall establish, implement and maintain a programme(s) for achieving its objectives. Programme(s) shall include as a minimum:

a) designation of responsibility and authority for achieving objectives at relevant functions and levels of the organization; and

b) the means and time-frame by which the objectives are to be achieved.

The programme(s) shall be reviewed at regular and planned intervals, and adjusted as necessary, to ensure that the objectives are achieved.

4.3.3.1 Setting objectives

Setting objectives is an integral part of the planning of an OH&S management system. An organization should set objectives to fulfil the commitments established in its OH&S policy, including its commitments to the prevention of injury and ill health.

The process of setting and reviewing objectives, and implementing programmes to achieve them, provides a mechanism for the organization to continually improve its OH&S management system and to improve its OH&S performance.

When setting OH&S objectives the organization needs to take into account the legal and other requirements and its OH&S risks that it has identified (see 4.3.1 and 4.3.2). The organization should make use of the other information obtained from the planning process (e.g. a prioritized list of OH&S risks) to determine whether it needs to set specific objectives in relation to any of its legal and other requirements, or its OH&S risks. However, the organization is not required to establish OH&S objectives for each legal and other requirement or OH&S risk identified.

The organization should also determine what other issues and factors it needs to consider, such as:

— technological options, financial, operational and business requirements,

— policy and objectives relevant to the organization's business as a whole,

— results of hazard identification, risk assessment and existing controls,

— evaluations of the effectiveness of the OH&S management system (e.g. from internal audits),

— views of workers (e.g. from employee perception or satisfaction surveys),
information from employee OH&S consultations, reviews and improvement activities in the workplace (these activities can be either reactive or proactive in nature),

— analysis of performance against previously established OH&S objectives,

— past records of OH&S nonconformities and incidents,

— the results of the management review (see 4.6),

— the need for and availability of resources.

Objectives that are specific, measurable, achievable, relevant, and timely can enable progress against the attainment of the objectives to be measured more readily by the organization (sometimes such objectives are referred to as being “SMART”).

It is also advisable that the organization records the background and reasons for setting the objectives, in order to facilitate their future review.

Examples of types of objectives can include:

— objectives to increase or reduce something that specify a numerical figure (e.g. to reduce handling incidents by 20%),

— objectives to introduce controls or eliminate hazards (e.g. for noise reduction in a workshop),

— objectives to introduce less hazardous materials in specific products,

— objectives to increase worker satisfaction in relation to OH&S (e.g. for a reduction of workplace stress),

— objectives to reduce exposures to hazardous substances, equipment or processes (e.g. the introduction of access controls, or guarding),

— objectives to increase awareness or competence in performing work tasks safely,

— objectives that are put in place to meet impending legal requirements prior to their enactment.

During the establishment of OH&S objectives, particular regard should be given to information or data from those people most likely to be affected by individual OH&S objectives, as this can assist in ensuring that the objectives are reasonable and more widely accepted. It is also useful to consider information or data from sources external to the organization, e.g. from contractors or other interested parties.

The OH&S objectives should address both broad corporate OH&S issues and OH&S issues that are specific to individual functions and levels within the organization.

OH&S objectives can be broken down into tasks, depending on the size of the organization, the complexity of the OH&S objective and its time-scale. There should be clear links between the various levels of tasks and the OH&S objectives.

Specific OH&S objectives can be established by different functions and at different levels within the organization. Certain OH&S objectives, applicable to the organization as a whole, can be established by top management. Other OH&S objectives can be established by, or for,
relevant individual departments or functions. Not all functions and departments are required to have specific OH&S objectives.

NOTE Objectives are sometimes given associated “targets”. For the purpose of the OHSAS standards “targets” are viewed as being a sub-set of objectives.

4.3.3.2 Programme(s)

In order to achieve the objectives a programme(s) should be established. A programme is an action plan for achieving all the OH&S objectives, or individual OH&S objectives. For complex issues more formal project plans can also need to be developed as part of the programme(s).

In considering the means necessary to establish the programme(s) the organization should examine the resources required (financial, human, infrastructure) and the tasks to be performed. Depending on the complexity of the programme established to achieve a particular objective, the organization should assign responsibility, authority, and completion dates for individual tasks to ensure that the OH&S objective can be accomplished within the overall timeframe.

The OH&S objectives and programme(s) should be communicated (e.g. via training and/or group briefing sessions, etc.) to relevant personnel.

Reviews of programme(s) need to be conducted regularly, and the programme(s) adjusted or modified where necessary. This can be as part of management review, or more frequently.

4.4 Implementation and operation

4.4.1 Resources, roles, responsibility, accountability and authority

OHSAS 18001 text

Top management shall take ultimate responsibility for OH&S and the OH&S management system.

Top management shall demonstrate its commitment by:

a) ensuring the availability of resources essential to establish, implement, maintain and improve the OH&S management system;

   NOTE 1 Resources include human resources and specialized skills, organizational infrastructure, technology and financial resources.

b) defining roles, allocating responsibilities and accountabilities, and delegating authorities, to facilitate effective OH&S management; roles, responsibilities, accountabilities, and authorities shall be documented and communicated.

The organization shall appoint a member(s) of top management with specific responsibility for OH&S, irrespective of other responsibilities, and with defined roles and authority for:

a) ensuring that the OH&S management system is established, implemented and maintained in accordance with this OHSAS Standard;
b) ensuring that reports on the performance of the OH&S management system are presented to top management for review and used as a basis for improvement of the OH&S management system.

NOTE 2 The top management appointee (e.g. in a large organization, a Board or executive committee member) may delegate some of their duties to a subordinate management representative(s) while still retaining accountability.

The identity of the top management appointee shall be made available to all persons working under the control of the organization.

All those with management responsibility shall demonstrate their commitment to the continual improvement of OH&S performance.

The organization shall ensure that persons in the workplace take responsibility for aspects of OH&S over which they have control, including adherence to the organization’s applicable OH&S requirements.

NOTE “Accountability” means ultimate “responsibility”, and relates to the person who is held to account if something is not done, does not work, or fails to achieve its objective.

The successful implementation of an OH&S management system calls for a commitment from all persons working under the control of the organization. This commitment should begin at the highest levels of management.

Top management should:

— determine and make available, in a timely and efficient manner, all the resources needed to prevent injuries and ill health in the workplace,

— identify who needs to do what with respect to the management of OH&S and make sure they are aware of their responsibilities and what they are accountable for,

— ensure that those members of the organization’s management with OH&S responsibilities have the necessary authority to fulfil their roles,

— ensure there is clarity of responsibilities at the interfaces between different functions (e.g. between departments, between different levels of management, between workers, between the organization and contractors, between the organization and its neighbours),

— appoint one of its members as the person responsible for the OH&S system and reporting on its performance.

When determining the resources needed to establish, implement and maintain the OH&S system, an organization should consider:

— the financial, human and other resources specific to its operations,

— the technologies specific to its operations,

— infrastructure and equipment,
— information systems, and
— the need for expertise and training.

Resources and their allocation should be reviewed periodically, via management review, to ensure they are sufficient to carry out OH&S programmes and activities, including performance measurement and monitoring. For organizations with established OH&S management systems, the adequacy of resources can be at least partially evaluated by comparing the planned achievement of OH&S objectives with actual results. In evaluating adequacy of resources, consideration should also be given to planned changes and/or new projects or operations.

OHSAS 18001 requires that the responsibilities and authority of all persons who perform duties that are part of the OH&S management system have to be documented. These can be described and included in:

— OH&S management system procedures,
— operational procedures or work station procedures,
— project and/or task descriptions,
— job descriptions,
— induction training packages.

However, the organization is free to choose whatever format(s) best suits its needs.

Such documentation can, among others, be required for the following people:

— the top management appointee for OH&S,
— management at all levels in the organization, including top management,
— safety committee/safety teams,
— process operators and the general workforce,
— those managing the OH&S of contractors,
— those responsible for OH&S training,
— those responsible for equipment that is critical for OH&S,
— those responsible for managing facilities used as a workplace,
— employees with OH&S qualifications, or other OH&S specialists, within the organization,
— employee OH&S representatives on participative/consultative forums.

OHSAS 18001 requires that the OH&S management appointee has to be a member of top management. The OH&S management appointee can be supported by other personnel who have delegated responsibilities for monitoring the overall operation of the OH&S function. However, the management appointee should be regularly informed of the performance of the system, and should retain active involvement in periodic reviews and the setting of OH&S objectives. It should be ensured that any other duties or functions assigned to the top management appointee do not conflict with the fulfilment of their OH&S responsibilities.

The role and responsibilities of any specialist OH&S function within the organization should be appropriately defined to avoid ambiguity.
with those of management at all levels (as managers would usually be expected to have responsibility for ensuring that OH&S is managed effectively in their area of control). This should include arrangements to resolve any conflict between OH&S issues and operational considerations including, where appropriate, escalation to a higher level of management.

All managers should provide visible demonstration of their commitment to continual improvement of OH&S performance. Means of demonstration can include visiting and inspecting sites, participating in incident investigation, and providing resources in the context of corrective action, attendance and active involvement at OH&S meetings, communicating the status of safety activities, and acknowledging good OH&S performance.

The organization should communicate and promote that OH&S is the responsibility of everyone in the organization, not just the responsibility of those with defined OH&S management system responsibilities. In taking responsibility for aspects of OH&S over which they have control, all persons in the workplace need to consider not only their own safety but also the safety of others.

4.4.2 Competence, training and awareness

OHSAS 18001 text

The organization shall ensure that any person(s) under its control performing tasks that can impact on OH&S is (are) competent on the basis of appropriate education, training or experience, and shall retain associated records.

The organization shall identify training needs associated with its OH&S risks and its OH&S management system. It shall provide training or take other action to meet these needs, evaluate the effectiveness of the training or action taken, and retain associated records.

The organization shall establish, implement and maintain a procedure(s) to make persons working under its control aware of:

a) the OH&S consequences, actual or potential, of their work activities, their behaviour, and the OH&S benefits of improved personal performance;

b) their roles and responsibilities and importance in achieving conformity to the OH&S policy and procedures and to the requirements of the OH&S management system, including emergency preparedness and response requirements (see 4.4.7);

c) the potential consequences of departure from specified procedures.

Training procedures shall take into account differing levels of:

a) responsibility, ability, language skills and literacy; and

b) risk.
4.4.2.1 General

To enable persons under the organization's control to work and/or act safely, the organization should ensure that they:

- are aware of its OH&S risks,
- are aware of their roles and responsibilities,
- have the necessary competence to perform tasks that can impact on OH&S,
- are, where necessary, trained to achieve the required awareness/competence.

The organization should require that contractors are able to demonstrate that their employees have the competence and/or appropriate training to work safely.

NOTE Competence and awareness do not mean the same thing. Awareness is to be conscious of something, e.g. OH&S risks and hazards. Competence is the demonstrated ability to apply knowledge and skills.

4.4.2.2 Competence

In determining what activities or tasks could impact on OH&S the organization should consider those which:

- the organization's risk assessment has determined, creates an OH&S risk in the workplace,
- are intended to control OH&S risks,
- are specific to the implementation of the OH&S management system.

Management should determine the competence requirements for individual tasks. The organization can seek external advice in defining competence requirements.

When determining the competence required for a task, the following factors should be considered:

- roles and responsibilities in the workplace (including the nature of the tasks to be performed, and their associated OH&S risks),
- the complexity and requirements of operating procedures and instructions,
- the results from incident investigations,
- legal and other requirements,
- individual capability (e.g. literacy, language skills, etc.).

The organization should give specific consideration to the competency requirements for those person(s) who will be:

- the top management appointee (see 4.4.1),
- performing risk assessments (4.3.1),
- performing exposure assessments (4.5.1),
- performing audits (4.5.5),
- performing behavioural observations (4.5.1.1),
— performing incident investigations (4.5.3),
— performing tasks identified by risk assessment that can introduce hazards.

The organization should ensure that all personnel, including top management, are competent prior to permitting them to perform tasks that can impact on OH&S.

An organization should determine and assess any differences between the competence needed to perform an activity and that possessed by the individual required to perform the activity. These differences should be addressed through training or other actions, e.g. additional education and skills development, etc., taking into account the existing capabilities of the individual.

OH&S competence requirements should be considered prior to recruiting new personnel, and/or the reassignment of those already working under the control of the organization.

Records used by the organization for ensuring that personnel are competent should be maintained (4.5.4).

4.4.2.3 Training

The organization should consider the roles, responsibilities and authorities, in relation to its OH&S risks and the OH&S management system, in determining its training or other actions needed for those persons working under its control (including contractors, temporary staff, etc.)

The training or other actions should focus on both competency requirements and the need to enhance awareness.

Training programmes and procedures should take account of OH&S risks and individual capabilities, such as literacy and language skills. For example it could be preferable to use pictures and diagrams or symbols that can be easily understood. The organization should determine if the training materials are needed in multiple languages or if the use of translators is necessary.

The organization should evaluate the effectiveness of the training or actions taken. This can be done in several ways, e.g. by written or oral examination, practical demonstration, observation of behavioural changes over time, or other means that demonstrate competency and awareness.

Training records should be maintained (4.5.4).

NOTE The ILO-OSH:2001 guidelines in clause 3.4.4 recommend that “Training should be provided to all participants at no cost and should take place during working hours if possible”.

4.4.2.4 Awareness

To ensure they work or act safely, the organization should make persons working under its control sufficiently knowledgeable of:
— emergency procedures,
— the consequences of their actions and behaviour in relation to OH&S risks,
— the benefits of improved OH&S performance,
— the potential consequences of departing from procedures,
— the need to conform to OH&S policies and procedures,
— any other aspects that might impact on OH&S.

Awareness programmes should be provided for contractors, temporary workers and visitors, etc., according to the OH&S risks to which they are exposed.

4.4.3 Communication, participation and consultation

OHSAS 18001 text

4.4.3.1 Communication

With regard to its OH&S hazards and OH&S management system, the organization shall establish, implement and maintain a procedure(s) for:

a) internal communication among the various levels and functions of the organization;

b) communication with contractors and other visitors to the workplace;

c) receiving, documenting and responding to relevant communications from external interested parties.

4.4.3.2 Participation and consultation

The organization shall establish, implement and maintain a procedure(s) for:

a) the participation of workers by their:
   — appropriate involvement in hazard identification, risk assessments and determination of controls;
   — appropriate involvement in incident investigation;
   — involvement in the development and review of OH&S policies and objectives;
   — consultation where there are any changes that affect their OH&S;
   — representation on OH&S matters.

   Workers shall be informed about their participation arrangements, including who is their representative(s) on OH&S matters.

b) consultation with contractors where there are changes that affect their OH&S.

The organization shall ensure that, when appropriate, relevant external interested parties are consulted about pertinent OH&S matters.

4.4.3.1 General

The organization, through the processes of communication and consultation, should encourage participation in good OH&S practices and support for its OH&S policy and OH&S objectives from those affected by its activities or interested in its OH&S management system.
The organization's communication processes should provide for the flow of information upwards, downwards and across the organization. It should provide for both the gathering and the dissemination of information. It should ensure that OH&S information is provided, received and understood by all relevant persons.

Consultation is the process by which management and other persons, or their representatives, jointly consider and discuss issues of mutual concern. It involves seeking acceptable solutions to problems through the general exchange of views and information.

Examples of those who could be interested in or affected by an organization's OH&S management system include employees at all levels of the organization, employee representatives, temporary workers, contractors, visitors, neighbours, volunteers, emergency services (see 4.4.7), insurers and government or regulatory inspectors.

4.4.3.2 Communication

4.4.3.2.1 Procedures for internal and external communication

The organization should develop procedures for internal communication among various functions and levels of the organization and for external communication with interested parties.

The organization should effectively communicate information concerning its OH&S hazards and its OH&S management system to those involved in or affected by the management system, in order for them to actively participate in, or support, the prevention of injury and ill health, as applicable.

When developing procedures for communication, the organization should consider the following:

— the target audience and their information needs,
— appropriate methods and media,
— local culture, preferred styles and available technologies,
— organizational complexity, structure and size,
— barriers to effective communication in the workplace such as illiteracy or language,
— legal and other requirements,
— the effectiveness of the various modes and flows of communication across all functions and levels of the organization,
— evaluation of the effectiveness of the communication.

OH&S issues can be communicated to employees, visitors and contractors via means such as:

— OH&S briefings and meetings, induction/orientation talks, etc.,
— newsletters, posters, emails, suggestion boxes/schemes, websites and notice boards containing information on OH&S issues.

4.4.3.2.2 Internal communication

It is important to effectively communicate information about OH&S risks and the OH&S management system at various levels and between various functions of the organization.
This should include information:

- relating to management’s commitment to the OH&S management system (e.g. programmes undertaken and resources committed to improving OH&S performance),
- concerning the identification of hazards and risks (e.g. information on process flows, materials in use, equipment specifications and observation of work practices),
- about OH&S objectives and other continual improvement activities,
- relating to incident investigation (e.g. the type of incidents that are taking place, factors that can contribute to the occurrence of incidents, results of incident investigations),
- relating to progress in eliminating OH&S hazards and risks (e.g. status reports showing progress of projects that have been completed or are underway),
- relating to changes that can impact on the OH&S management system.

4.4.3.2.3 Communication with contractors and other visitors

It is important to develop and maintain procedures for communicating with contractors and other visitors to the workplace. The extent of this communication should be related to the OH&S risks faced by these parties.

The organization should have arrangements in place to clearly communicate its OH&S requirements to contractors. The procedure(s) should be appropriate to the OH&S hazards and risks associated with the work to be performed. In addition to communicating performance requirements, the organization should communicate the consequences associated with nonconformity with OH&S requirements.

Contracts are often used to communicate OH&S performance requirements. There can be a need to supplement contracts with other on-site arrangements (e.g. pre-project OH&S planning meetings) to ensure that appropriate controls are implemented to protect individuals at the workplace.

The communication should include information about any operational controls (see 4.4.6) related to the specific tasks to be performed or the area where the work is to be done. This information should be communicated before the contractor comes on-site and then supplemented with additional or other information (e.g. a site tour), as appropriate, when the work starts. The organization should also have procedures in place for consultation with contractors when there are changes that affect their OH&S (see 4.4.3.4).

In addition to the specific OH&S requirements for activities carried out on-site the following could also be relevant to the organization when developing its procedure(s) for communications with contractors:

- information about individual contractors’ OH&S management systems (e.g. their established policies and procedures to address pertinent OH&S hazards),
- legal and other requirements that impact on the method or extent of communication,
— previous OH&S experience (e.g. OH&S performance data),
— the existence of multiple contractors at the worksite,
— staffing for accomplishing OH&S activities (e.g. exposure monitoring, equipment inspections),
— emergency response,
— the need for alignment of the contractor's OH&S policies and practices with those of the organization and other contractors at the worksite,
— the need for additional consultation and/or contractual provisions for high-risk tasks,
— requirements for the assessment of conformance with agreed OH&S performance criteria,
— processes for incident investigation, reporting of nonconformities and corrective action,
— arrangements for day-to-day communications.

For visitors (including delivery people, customers, members of the public, service providers, etc.), communication can include warning signs and security barriers, as well as verbal or written communication. Information that should be communicated includes:
— OH&S requirements relevant to their visit,
— evacuation procedures and responses to alarms,
— traffic controls,
— access controls and escort requirements,
— any personal protective equipment (PPE) that needs to be worn (e.g. safety glasses).

4.4.3.2.4 Communication with external interested parties

The organization needs to have a procedure(s) in place for receiving, documenting and responding to relevant communications from external interested parties.

The organization should provide appropriate and consistent information about its OH&S hazards and its OH&S management system in accordance with its OH&S policy and applicable legal and other requirements. This can include information concerning its normal operations or potential emergency situations.

External communication procedures often include the identification of designated contact individuals. This allows for appropriate information to be communicated in a consistent manner. This can be especially important in emergency situations where regular updates are requested and/or a wide range of questions need to be answered (see 4.4.7).

4.4.3.3 Procedures for worker participation

The organization's procedure(s) should address the need for the active and ongoing participation of workers in the development and review of OH&S practices and, where appropriate, the development of the OH&S management system. The participation arrangements should take account of any legal and other requirements.
Workers should be informed about the arrangements that have been made for their participation and the individual who represents them on OH&S matters. OH&S representatives should have defined roles.

In addition to the requirements in OHSAS 18001:2007, 4.4.3.2, the organization’s procedure(s) for the involvement of workers could include:

- consultation in the selection of appropriate controls, including discussion of the benefits or adverse outcomes of alternative options for controlling specific hazards or preventing unsafe behaviour,
- involvement in recommending improvements to OH&S performance,
- consultation concerning changes that affect OH&S, particularly before the introduction of new or unfamiliar hazards, e.g.:
  - the introduction of new or modified equipment,
  - the construction, modification or change of use of buildings and facilities,
  - the use of new chemicals or materials,
  - reorganization, new processes, procedures or work patterns.

In developing its procedure(s) for worker participation, the organization should consider potential incentives and barriers to participation (e.g. language and literacy issues, the fear of reprisal), confidentiality and privacy issues.

NOTE 1 The ILO-OSH:2001 guidelines in clause 3.2.3 recommend that “The employer should make arrangements for workers and their safety and health representatives to have the time and resources to participate actively in the processes of organizing, planning and implementation, evaluation and action for improvement of the OSH management system.”

NOTE 2 “Workers” can include employees, voluntary workers, temporary workers, contracted personnel.

4.4.3.4 Procedures for consultation with contractors and external interested parties

The organization should have a procedure(s) for consulting with contractors and other external interested parties, where appropriate. There can be a need for the organization to consult with regulators concerning certain OH&S matters (e.g. applicability and interpretation of OH&S legal requirements), or with emergency services (see 4.4.7).

In considering the need for consultation with contractors on changes that can affect their OH&S, the organization should take account of the following:

- new or unfamiliar hazards (including those that can be introduced by the contractor),
- reorganization,
- new or amended controls,
- changes in materials, equipment, exposures, etc.,
- changes in emergency arrangements,
- changes in legal or other requirements.
For consultation with external parties, the organization should give consideration to factors such as:

- changes in emergency arrangements,
- hazards that can impact neighbours, or hazards from neighbours,
- changes in legal or other requirements.

4.4.4 Documentation

The OH&S management system documentation shall include:

a) the OH&S policy and objectives;

b) description of the scope of the OH&S management system;

c) description of the main elements of the OH&S management system and their interaction, and reference to related documents;

d) documents, including records, required by this OHSAS Standard; and

e) documents, including records, determined by the organization to be necessary to ensure the effective planning, operation and control of processes that relate to the management of its OH&S risks.

NOTE It is important that documentation is proportional to the level of complexity, hazards and risks concerned and is kept to the minimum required for effectiveness and efficiency.

The organization should maintain up-to-date documentation that is sufficient to ensure that its OH&S management system can be adequately understood and effectively and efficiently operated.

Typical inputs include the following items:

- details of the documentation and information systems the organization develops to support its OH&S management system and OH&S activities, and to fulfil the requirements of OHSAS 18001,

- details of responsibilities and authorities,

- information on the local environments in which documentation or information is used, and constraints that this can put on the physical nature of documentation, or the use of electronic or other media.

The organization should review its documentation and information needs for the OH&S management system, before developing the documentation necessary to support its OH&S processes.

In deciding what documentation is required the organization should determine where there is any risk that a task, through lack of written procedures or instructions, will not be performed in the required manner.

There is no requirement to develop documentation in a particular format in order to conform to OHSAS 18001, nor is it necessary to
replace existing documentation such as manuals, procedures, or work instructions where these adequately describe required arrangements. If the organization already has an established, documented OH&S management system, it can prove more convenient and effective for it to develop, for example, an overview document describing the inter-relation between its existing procedures and the requirements of OHSAS 18001.

Account should be taken of the following:

- the responsibilities and authorities of the users of the documentation and information, as this should lead to consideration of the degree of security and accessibility that needs to be imposed (particularly with electronic media) and change controls (see 4.4.5),

- the manner in which physical documentation is used, and the environment in which it is used, as this can require consideration of the format in which it is presented (e.g. an instruction could be incorporated into a sign rather than a paper document). Similar consideration should be given concerning the environment for the use of electronic equipment for information systems.

Records are a particular type of document (see 4.5.4).

### 4.4.5 Control of documents

**OHSAS 18001 text**

Documents required by the OH&S management system and by this OHSAS Standard shall be controlled. Records are a special type of document and shall be controlled in accordance with the requirements given in 4.5.4.

The organization shall establish, implement and maintain a procedure(s) to:

a) approve documents for adequacy prior to issue;

b) review and update as necessary and re-approve documents;

c) ensure that changes and the current revision status of documents are identified;

d) ensure that relevant versions of applicable documents are available at points of use;

e) ensure that documents remain legible and readily identifiable;

f) ensure that documents of external origin determined by the organization to be necessary for the planning and operation of the OH&S management system are identified and their distribution controlled; and

g) prevent the unintended use of obsolete documents and apply suitable identification to them if they are retained for any purpose.

All documents and data containing information required for the operation of the OH&S management system and the performance of the organization's OH&S activities should be identified and controlled.
The organization should give consideration to items such as the following:

- the details of the document and data systems that support its OH&S management system and OH&S activities, and which enable it to fulfil the requirements of OHSAS 18001,
- the OH&S details of its assigned responsibilities and authorities.

Written procedures should define the controls for the identification, approval, issue and removal of OH&S documentation, together with the control of OH&S data (in accordance with the requirements of OHSAS 18001:2007, 4.4.5, above). These procedures should clearly define the categories of documents and data to which they apply.

Documents and data should be available and accessible when required, under routine and non-routine conditions, including emergencies. This could include ensuring that up-to-date plant engineering drawings, hazardous material data sheets, procedures and instructions, etc., are available to those persons who require them in an emergency.

The organization should establish procedures for identifying any documents of external origin required for planning and implementing its OH&S management system. The distribution of these documents needs to be controlled to ensure that the most current information is used in making decisions impacting OH&S. For example, the organization should establish procedures for managing the safety data sheets developed for hazardous substances used by the organization. Responsibility for this task should be assigned. The person charged with this task should ensure that all persons in the organization are kept informed of any relevant changes to such information that affects their duties or working conditions.

The development of an organization’s document control process will typically result in items such as the following:

- a document control procedure, including assigned responsibilities and authorities,
- document registers, master lists or indexes,
- a list of controlled documentation and its location,
- archive records (some of which should be held in accordance with legal or other time requirements).

Documents should be reviewed from time to time to ensure that they are still valid and accurate. This can be performed as a dedicated exercise, and could also be necessary:

- as part of a review of risk assessment of processes,
- as part of a response to an incident,
- as part of the management of change procedure, and
- following changes in legal and other requirements, processes, installation, workplace layout, etc.

Obsolete documents retained for reference can present a particular concern, and great care should be taken to ensure that they do not return back into circulation. However, it is sometimes necessary to retain obsolete documents as part of the records relating to the development or performance of the OH&S management system.
4.4.6 Operational control

**OHSAS 18001 text**

The organization shall determine those operations and activities that are associated with the identified hazard(s) where the implementation of controls is necessary to manage the OH&S risk(s). This shall include the management of change (see 4.3.1).

For those operations and activities, the organization shall implement and maintain:

a) operational controls, as applicable to the organization and its activities; the organization shall integrate those operational controls into its overall OH&S management system;

b) controls related to purchased goods, equipment and services;

c) controls related to contractors and other visitors to the workplace;

d) documented procedures, to cover situations where their absence could lead to deviations from the OH&S policy and the objectives;

e) stipulated operating criteria where their absence could lead to deviations from the OH&S policy and objectives.

**4.4.6.1 General**

Once it has gained an understanding of its OH&S hazards (4.3.1), the organization should implement the operational controls that are necessary to manage the associated risks and comply with applicable OH&S legal and other requirements. The overall objective of OH&S operational controls is to manage the OH&S risks to fulfil the OH&S policy.

Information to be considered when establishing and implementing operational controls includes:

- OH&S policy and objectives,
- results of hazard identification, risk assessment, evaluation of existing controls and determination of new controls (see 4.3.1),
- management of change processes (see 4.3.1.5),
- internal specifications (e.g. for materials, equipment, facilities layout),
- information on existing operating procedures,
- legal and other requirements to which the organization subscribes (see 4.3.2),
- product supply chain controls related to purchased goods, equipment and services,
- feedback from participation and consultation (see 4.4.3),
- the nature of, and extent to which, tasks are to be performed by contractors and other external personnel,
- access to the workplace by visitors, delivery personnel, service contractors, etc.
When developing operational controls, priority should be given to control options with higher reliability in preventing injury or ill health, consistent with the hierarchy of controls, i.e. this should start with redesign of equipment or processes to eliminate or reduce hazard(s), improved signage/warnings for hazard avoidance, improved administrative procedures and training to reduce the frequency and duration of the exposure of persons to inadequately controlled hazards, and lastly the use of personal protective equipment (PPE) to reduce the severity of injury or exposure (see 4.3.1.6).

The operational controls need to be implemented, evaluated on an ongoing basis (4.3.1.8) to verify their effectiveness, and integrated into the overall OH&S management system.

4.4.6.2 Establishing and implementing operational controls

Operational controls should be established and implemented as necessary to manage the OH&S risks to an acceptable level, for operational areas and activities, e.g. purchasing, research and development, sales, services, offices, off-site work, home based working, manufacturing, transportation and maintenance. Operational controls can use a variety of different methods, e.g. physical devices (such as barriers, access controls), procedures, work instructions, pictograms, alarms and signage.

NOTE It is preferable that warning signage is based on accepted design principles, emphasizing standardized graphical symbols and minimizing the use of text, and that when text is required, accepted signal words, e.g. “danger” or “warning”, are used. For further guidance see relevant international or national standards.

The organization should establish operational controls to eliminate, or reduce and control, the OH&S risks that could be introduced into the workplace by employees, contractors, other external personnel, members of the public and/or visitors. Operational controls can also need to take into account situations where OH&S risks extend into public areas or areas controlled by other parties (e.g. when employees of the organization are working at a client’s site). It is sometimes necessary to consult with external parties in such circumstances.

Examples of areas in which OH&S risks typically arise, and examples of their associated control measures, include:

a) general control measures

- regular maintenance and repair of facilities, machinery and equipment to prevent unsafe conditions from developing,
- housekeeping and maintenance of clear walkways,
- traffic management (i.e. the management of the separation of vehicle and pedestrian movements),
- provision and maintenance of workstations,
- maintenance of the thermal environment (temperature, air quality),
- maintenance of the ventilation systems and electrical safety systems,
- maintenance of emergency plans,
- policies related to travel, bullying, sexual harassment, drug and alcohol abuse, etc.,
— health programmes (medical surveillance programmes),
— training and awareness programmes relating to the use of particular controls (e.g. permit-to-work systems),
— access controls;

b) performance of hazardous tasks
— use of procedures, work instructions, or approved working methods,
— use of appropriate equipment,
— pre-qualification and/or training of personnel or contractors for hazardous tasks,
— use of permit-to-work systems, pre-approvals, or authorizations,
— procedures controlling the entry and exit of personnel to hazardous work sites,
— controls to prevent ill health;

c) use of hazardous materials
— established inventory levels, storage locations and storage conditions,
— conditions of use for hazardous materials,
— limitations of areas where hazardous materials can be used,
— secure and safe storage provisions and control of access,
— provision of and access to material safety data and other relevant information,
— shielding of radiation sources,
— isolation of biological contaminants,
— knowledge in the use of and availability of emergency equipment (4.4.7);

d) facilities and equipment
— regular maintenance and repair of facilities, machinery and equipment to prevent unsafe conditions from developing,
— housekeeping and maintenance of clear walkways, and traffic management,
— provision, control and maintenance of personal protective equipment (PPE),
— inspection and testing of OH&S equipment, such as guarding, fall arrest systems, shutdown systems, rescue equipment for confined spaces, lock-out systems, fire detection and suppression equipment, exposure monitoring devices, ventilation systems and electrical safety systems,
— inspection and testing of material handling equipment (cranes, forklifts, hoists and other lifting devices);

e) purchase of goods, equipment and services
— establishment of OH&S requirements for goods, equipment and services to be purchased,
— communication of the organization’s own OH&S requirements to suppliers,
— pre-approval requirements for the purchase or transport/transfer of hazardous chemicals, materials and substances,
— pre-approval requirements and specifications for the purchase of new machinery and equipment,
— pre-approval of procedures for the safe operation of machinery, equipment, and/or the safe handling of materials prior to their use,
— selection and monitoring of suppliers,
— inspection of received goods, equipment and services, and (periodic) verification of their OH&S performance,
— approval of the design of OH&S provisions for new facilities.

f) contractors
— establish criteria for the selection of contractors,
— communication of the organization’s own OH&S requirements to contractors,
— evaluation, monitoring and periodic re-evaluation, of the OH&S performance of contractors;

g) other external personnel or visitors in the workplace.
As the knowledge and capabilities of visitors or other external personnel vary greatly, this should be considered when developing controls. Examples can include:
— entry controls,
— establishing their knowledge and capabilities prior to permitting the use of equipment,
— provision of advice and training as necessary,
— warning signage/administrative controls,
— methods for monitoring visitor behaviour and supervising their activities.

4.4.6.3 Stipulating operating criteria
The organization should stipulate operating criteria where they are necessary for the prevention of injury or ill health. Operating criteria should be specific to the organization, its operations and activities, and be related to its own OH&S risks, where their absence could lead to deviation from the OH&S policy and objectives.

Examples of operating criteria can include:

a) for hazardous tasks
— use of specified equipment, and procedures/work instructions for its use,
— competency requirements,
— use of specified entry control processes and equipment,
— authorities/guidelines/instructions/procedures for individual risk assessment prior to immediate commencement of the task;
b) for hazardous chemicals
   — approved chemical lists,
   — exposure limits,
   — specific inventory limits,
   — specified storage locations and conditions;

c) for task involving entry into hazardous areas
   — specification of personal protective equipment (PPE) requirements,
   — specified conditions for entry,
   — health and fitness conditions;

d) for tasks involving work performed by contractors
   — specification of OH&S performance criteria,
   — specification of competency and/or training requirements for contractor personnel,
   — specification/inspection of contractor provided equipment;

e) for OH&S hazards to visitors
   — entry controls (sign-in/sign-out, access limitations),
   — personal protective equipment (PPE) requirements,
   — site safety briefings,
   — emergency requirements.

4.4.6.4 Maintaining operational controls
Operational controls should be reviewed on a periodic basis to evaluate their ongoing suitability and effectiveness. Changes that are determined to be necessary should be implemented (see 4.3.1).

In addition, procedures should be in place to determine circumstances where new controls and/or modifications of existing operational controls are needed. Proposed changes to existing operations should be evaluated for OH&S hazards and risks before they are implemented. When there are changes to operational controls, the organization should consider whether there are new or modified training needs (see 4.4.2).

4.4.7 Emergency preparedness and response

<table>
<thead>
<tr>
<th>OHSAS 18001 text</th>
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<tbody>
<tr>
<td>The organization shall establish, implement and maintain a procedure(s):</td>
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<tr>
<td>a) to identify the potential for emergency situations;</td>
</tr>
<tr>
<td>b) to respond to such emergency situations.</td>
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</table>

The organization shall respond to actual emergency situations and prevent or mitigate associated adverse OH&S consequences.

In planning its emergency response the organization shall take account of the needs of relevant interested parties, e.g. emergency services and neighbours.
The organization shall also periodically test its procedure(s) to respond to emergency situations, where practicable, involving relevant interested parties as appropriate.

The organization shall periodically review and, where necessary, revise its emergency preparedness and response procedure(s), in particular, after periodical testing and after the occurrence of emergency situations (see 4.5.3).

4.4.7.1 General

The organization should assess the potential for emergency situations that impact on OH&S and develop a procedure(s) for an effective response(s). This may be a stand-alone procedure(s) or be combined with other emergency response procedure(s). The organization should periodically test its emergency preparedness and seek to improve the effectiveness of its response activities and procedure(s).

NOTE Where the procedure is combined with other emergency response procedure(s), the organization needs to ensure that it addresses all potential OH&S impacts and should not presume that the procedures relating to fire safety, or environmental emergencies, etc., will be sufficient.

4.4.7.2 Identification of potential emergency situations

Procedures to identify potential emergency situations that could impact on OH&S should consider emergencies that can be associated with specific activities, equipment or workplaces.

Examples of possible emergencies, which vary in scale, can include:

- incidents leading to serious injuries or ill health,
- fires and explosions,
- release of hazardous materials/gases,
- natural disasters, bad weather,
- loss of utility supply (e.g. loss of electric power),
- pandemics/epidemics/outbreaks of communicable disease,
- civil disturbance, terrorism, sabotage, workplace violence,
- failure of critical equipment,
- traffic accidents.

When identifying potential emergency situations, consideration should be given to emergencies that can occur during both normal operations and abnormal conditions (e.g. operation start-up or shut-down, construction or demolition activities).

Emergency planning should also be reviewed as a part of the ongoing management of change. Changes in operations can introduce new potential emergencies or necessitate that changes be made to emergency response procedures. For example, changes in facility layout can impact emergency evacuation routes.

The organization should determine and assess how emergency situations will impact all persons within and/or in the immediate vicinity of workplaces controlled by the organization. Consideration should be given to those with special needs, e.g. people with limited mobility,
vision and hearing. This could include employees, temporary workers, contract employees, visitors, neighbours or other members of the public. The organization should also consider potential impacts on emergency services personnel while at the workplace (e.g. fire-fighters).

Information that should be considered in identifying potential emergency situations includes the following:

- the results of hazard identification and risk assessment activities performed during the OH&S planning process (see 4.3.1),
- legal requirements,
- the organization’s previous incident (including accident) and emergency experience,
- emergency situations that have occurred in similar organizations,
- information related to accident and/or incident investigations posted on the websites of regulators or emergency response agencies.

4.4.7.3 Establishing and implementing emergency response procedures

Emergency response should focus on the prevention of ill health and injury, and on the minimization of the adverse OH&S consequences to a person(s) exposed to an emergency situation.

A procedure(s) for responding to emergency situations should be developed and should also take into account applicable legal and other requirements.

The emergency procedure(s) should be clear and concise to facilitate their use in emergency situations. They should also be readily available for use by emergency services. Emergency procedure(s) that are stored on a computer or by other electronic means might not be readily available in the event of a power failure, so paper copies of emergencies procedure(s) ought to be maintained in readily accessible locations.

Consideration should be given to the existence and/or capability of the following, in developing emergency response procedure(s):

- inventory and location of hazardous materials storage,
- numbers and locations of people,
- critical systems that can impact on OH&S,
- the provision of emergency training,
- detection and emergency control measures,
- medical equipment, first aid kits, etc.,
- control systems, and any supporting secondary or parallel/multiple control systems,
- monitoring systems for hazardous materials,
- fire detection and suppression systems,
- emergency power sources,
- availability of local emergency services and details of any emergency response arrangements currently in place,
- legal and other requirements,
- previous emergency response experience.
When the organization determines that external services are needed for emergency response (e.g. specialist experts in handling hazardous materials and external testing laboratories), pre-approved (contractual) arrangements should be put in place. Particular attention should be paid to staffing levels, response schedules and emergency service limitations.

Emergency response procedure(s) should define the roles, responsibilities and authorities of those with emergency response duties, especially those with an assigned duty to provide an immediate response. These personnel should be involved in the development of the emergency procedure(s) to ensure they are fully aware of the type and scope of emergencies that they can be expected to handle, as well as the arrangements needed for coordination. Emergency service personnel should be provided with the information required to facilitate their involvement in response activities.

Emergency response procedures should give consideration to the following:

- identification of potential emergency situations and locations,
- details of the actions to be taken by personnel during the emergency (including actions to be taken by staff working off-site, by contractors and visitors),
- evacuation procedures,
- responsibilities, and authorities of personnel with specific response duties and roles during the emergency (e.g. fire-wardens, first-aid staff and spill clean-up specialists),
- interface and communication with emergency services,
- communication with employees (both on-site and off-site), regulators and other interested parties (e.g. family, neighbours, local community, media),
- information necessary for undertaking the emergency response (plant layout drawings, identification and location of emergency response equipment, identification and location of hazardous materials, utility shut-off locations, contact information for emergency response providers).

4.4.7.4 Emergency response equipment

The organization should determine and review its emergency response equipment and material needs.

Emergency response equipment and materials can be needed to perform a variety of functions during an emergency, such as evacuation, leak detection, fire suppression, chemical/biological/radiological monitoring, communication, isolation, containment, shelter, personal protection, decontamination, and medical evaluation and treatment.

Emergency response equipment should be available in sufficient quantity and stored in locations where it is readily accessible; it should be stored securely and be protected from being damaged. This equipment should be inspected and/or tested at regular intervals to ensure that it will be operational in an emergency situation.

Special attention should be paid to equipment and materials used to protect emergency response personnel. Individuals should be informed of the limitations of personal protective devices and trained in their proper use.
The type, quantity and storage location(s) for emergency equipment and supplies should be evaluated as a part of the review and testing of emergency procedures.

4.4.7.5 Emergency response training

Personnel should be trained in how to initiate the emergency response and evacuation procedures (see 4.4.2).

The organization should determine the training needed for personnel who are assigned emergency response duties and ensure that this training is received. Emergency response personnel should remain competent and capable to carry out their assigned activities.

The need for retraining or other communications should be determined when modifications are made that impact on the emergency response.

4.4.7.6 Periodic testing of emergency procedures

Periodic testing of emergency procedures should be performed to ensure that the organization and external emergency services can appropriately respond to emergency situations and prevent or mitigate associated OH&S consequences.

Testing of emergency procedures should involve external emergency services providers, where appropriate, to develop an effective working relationship. This can improve communication and cooperation during an emergency.

Emergency drills can be used to evaluate the organization’s emergency procedures, equipment and training, as well as increase overall awareness of emergency response protocols. Internal parties (e.g. workers) and external parties (e.g. fire department personnel) can be included in the drills to increase awareness and understanding of emergency response procedures.

The organization should maintain records of emergency drills. The type of information that should be recorded includes a description of the situation and scope of the drill, a timeline of events and actions and observations of any significant achievements or problems. This information should be reviewed with the drill planners and participants to share feedback and recommendations for improvement.

NOTE OHSAS 18001:2007, 4.4.7, specifies that emergency response procedures shall be periodically tested “where practicable”. This means that such testing has to be performed if it is capable of being done.

4.4.7.7 Reviewing and revising emergency procedures

OHSAS 18001:2007, 4.4.7, requires the organization to review its emergency preparedness and response procedure(s) periodically. Examples of when this can be done are:

- on a schedule defined by the organization,
- during management reviews,
- following organizational changes,
- as a result of management of change, corrective action, or preventive action (see 4.5.3),
- following an event that activated the emergency response procedures,
— following drills or tests that identified deficiencies in the emergency response,
— following changes to legal and other requirements,
— following external changes impacting the emergency response.

When changes are made in emergency preparedness and response procedure(s), these changes should be communicated to the personnel and functions that are impacted by the change; their associated training needs should also be evaluated.

4.5 Checking

4.5.1 Performance measurement and monitoring

OHSAS 18001 text

The organization shall establish, implement and maintain a procedure(s) to monitor and measure OH&S performance on a regular basis. This procedure(s) shall provide for:

a) both qualitative and quantitative measures, appropriate to the needs of the organization;

b) monitoring of the extent to which the organization's OH&S objectives are met;

c) monitoring the effectiveness of controls (for health as well as for safety);

d) proactive measures of performance that monitor conformance with the OH&S programme(s), controls and operational criteria;

e) reactive measures of performance that monitor ill health, incidents (including accidents, near-misses, etc.), and other historical evidence of deficient OH&S performance;

f) recording of data and results of monitoring and measurement sufficient to facilitate subsequent corrective action and preventive action analysis.

If equipment is required to monitor or measure performance, the organization shall establish and maintain procedures for the calibration and maintenance of such equipment, as appropriate. Records of calibration and maintenance activities and results shall be retained.

4.5.1.1 General

An organization should have a systematic approach for measuring and monitoring its OH&S performance on a regular basis, as an integral part of its overall management system. Monitoring involves collecting information, such as measurements or observations, over time, using equipment or techniques that have been confirmed as being fit-for-purpose. Measurements can be either quantitative or qualitative. Monitoring and measurements can serve many purposes in an OH&S management system, such as:
— tracking progress on meeting policy commitments, achieving objectives and targets, and continual improvement,
— monitoring exposures to determine whether applicable legal and other requirements to which the organization subscribes have been met,
— monitoring incidents, injuries and ill health,
— providing data to evaluate the effectiveness of operational controls, or to evaluate the need to modify or introduce new controls (see 4.3.1),
— providing data to proactively and reactively measure the organization’s OH&S performance,
— providing data to evaluate the performance of the OH&S management system, and
— providing data for the evaluation of competence.

To achieve these purposes, an organization should plan what will be measured, where and when it should be measured, what measurement methods should be used, and the competence requirements for the persons who will perform the measurements (see 4.4.2). To focus resources on the most important measurements, the organization should determine the characteristics of processes and activities that can be measured and the measurements that provide the most useful information. The organization needs to establish a procedure(s) for performance measurement and monitoring to provide consistency in measurements and enhance the reliability of data produced.

The results of measurement and monitoring should be analysed and used to identify both successes and areas requiring correction or improvement.

The organization’s measuring and monitoring should use both reactive and proactive measures of performance, but should primarily focus on proactive measures in order to drive performance improvement and injury reduction.

a) Examples of proactive measures include:
— assessments of compliance with legal and other requirements,
— the effective use of the results of workplace safety tours or inspections,
— evaluation of the effectiveness of OH&S training,
— use of OH&S behaviour based observations,
— use of perception surveys to evaluate OH&S culture and related employee satisfaction,
— the effective use of the results of internal and external audits,
— completion of legally required and other inspections as scheduled,
— the extent to which programme(s) (see 4.3.3) have been implemented,
— the effectiveness of the employee participation process,
— the use of health screening,
— exposure modelling and monitoring,
— benchmarking against good OH&S practices,
— work activity assessments.

b) Examples of reactive measures include:
— monitoring of ill health,
— occurrences and rates of incidents and ill health,
— lost time incident rates, lost time ill health rates,
— actions required following assessments by regulators,
— actions following receipt of comments from interested parties.

4.5.1.2 Monitoring and measuring equipment

OH&S monitoring and measurement equipment should be suitable, capable and relevant for the OH&S performance characteristics to be measured.

To assure the validity of results, monitoring equipment used to measure OH&S conditions (e.g. sampling pumps, noise meters, toxic gas detection equipment, etc.) should be maintained in good working order and calibrated or verified, and adjusted if necessary against measurement standards, traceable to international or national measurement standards. If no such standards exist, the basis used for calibration should be recorded.

Where computer software or computer systems are used to gather, analyse, or monitor data, and can affect the accuracy of OH&S performance results, they should be validated to test their suitability, prior to use.

Appropriate equipment should be selected and be used in a way that will provide accurate and consistent results. This could involve confirming the suitability of sampling methods or sampling locations or specifying that the equipment be used in a specific way.

The calibration status of measuring equipment should be clearly identified to the users. OH&S measuring equipment whose calibration status is unknown, or which is known to be out of calibration, should not be used. Additionally, it should be removed from use, and be clearly labelled, tagged, or otherwise marked, to prevent misuse.

Calibration and maintenance should be performed by competent personnel (see 4.4.2).

4.5.2 Evaluation of compliance

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<tr>
<td>4.5.2.1 Consistent with its commitment to compliance [see 4.2c]), the organization shall establish, implement and maintain a procedure(s) for periodically evaluating compliance with applicable legal requirements (see 4.3.2). The organization shall keep records of the results of the periodic evaluations. NOTE The frequency of periodic evaluation may vary for differing legal requirements.</td>
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</tbody>
</table>
4.5.2.2 The organization shall evaluate compliance with other requirements to which it subscribes (see 4.3.2). The organization may wish to combine this evaluation with the evaluation of legal compliance referred to in 4.5.2.1 or to establish a separate procedure(s).

The organization shall keep records of the results of the periodic evaluations.

NOTE The frequency of periodic evaluation may vary for differing other requirements to which the organization subscribes.

An organization should establish, implement and maintain a procedure for periodically evaluating its compliance with the legal or other requirements that are applicable to its OH&S risks, as part of its commitment to compliance.

Evaluation of the organization’s compliance should be performed by competent persons, either from within the organization and/or using external resources.

A variety of inputs can be used to assess compliance, including:
- audits,
- the results of regulatory inspections,
- analysis of legal and other requirements,
- reviews of documents and/or records of incidents and risk assessments,
- interviews,
- facility, equipment and area inspections,
- project or work reviews,
- analysis of test results from monitoring and testing,
- facility tours and/or direct observations.

The organization’s processes for the evaluation of compliance can depend on its nature (size, structure and complexity). A compliance evaluation can encompass multiple legal requirements or a single requirement. The frequency of evaluations can be affected by factors such as past compliance performance or specific legal requirements. The organization can choose to evaluate compliance with individual requirements at different times or at different frequencies, or as appropriate.

A compliance evaluation programme can be integrated with other assessment activities. These can include management system audits, environmental audits or quality assurance checks.

Similarly, an organization should periodically evaluate its compliance with other requirements to which it subscribes (for further guidance on other requirements, see 4.3.2). An organization can choose to establish a separate process for conducting such evaluations or it can choose to combine these evaluations with its evaluations of compliance with legal requirements (see above), its management review process (4.6) or other evaluation processes.

The results of the periodic evaluations of compliance with legal or other requirements need to be recorded.
4.5.3 Incident investigation, nonconformity, corrective action and preventive action

4.5.3.1 Incident investigation

OHSAS 18001 text

The organization shall establish, implement and maintain a procedure(s) to record, investigate and analyse incidents in order to:

a) determine underlying OH&S deficiencies and other factors that might be causing or contributing to the occurrence of incidents;

b) identify the need for corrective action;

c) identify opportunities for preventive action;

d) identify opportunities for continual improvement;

e) communicate the results of such investigations.

The investigations shall be performed in a timely manner.

Any identified need for corrective action or opportunities for preventive action shall be dealt with in accordance with the relevant parts of 4.5.3.2.

The results of incident investigations shall be documented and maintained.

Incident investigation is an important tool for preventing reoccurrence of incidents and identifying opportunities for improvements. It can also be used for raising the overall OH&S awareness in the workplace.

The organization should have a procedure(s) for reporting, investigating and analysing incidents. The purpose of the procedure(s) is to provide a structured, proportionate and timely approach for determining and dealing with the underlying (root) cause(s) of the incident.

All incidents should be investigated. The organization should seek to prevent the under-reporting of incidents. In determining the nature of the investigation, the resources needed, and the priority to be given to investigation of an incident, account should be taken of:

- the actual outcome and consequences of the incident, and
- the frequency of such incidents and their potential consequences.

In developing those procedures the organization should give consideration to the following:

- the need for a common understanding and acceptance of what constitutes an “incident” (see 3.9) and the benefits that can be gained from its investigation,
- that reporting should capture all types of incidents, including major and minor accidents, emergencies, near-misses, instances of ill health and those that take place over a period of time (e.g. exposure),
- the need to meet any legal requirements relating to the reporting and investigation of incidents, e.g. maintenance of a register of accidents,
- defining the assignment of responsibilities and authorities for the reporting of incidents and subsequent investigations,
— the need for immediate action to deal with imminent risks,
— the need for investigation to be impartial and objective,
— the need to focus on determining causal factors,
— the benefits of involving those with knowledge of the incident,
— defining the requirements for the conduct and recording of the various phases of the investigation process, such as:
  • gathering facts and collecting evidence, in a timely manner,
  • analysing the results,
  • communicating the need for any identified corrective action and/or preventive action,
  • providing feedback into the processes for hazard identification, risk assessment, emergency response, OH&S performance measurement and monitoring and management review.

Those assigned to conduct incident investigations should be competent (see 4.4.2).

The outputs from the incident investigation processes should address items a) to e) in OHSAS 18001:2007, 4.5.3.1.

4.5.3.2 Nonconformity, corrective action and preventive action

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<tbody>
<tr>
<td>The organization shall establish, implement and maintain a procedure(s) for dealing with actual and potential nonconformity(ies) and for taking corrective action and preventive action. The procedure(s) shall define requirements for:</td>
</tr>
<tr>
<td>a) identifying and correcting nonconformity(ies) and taking action(s) to mitigate their OH&amp;S consequences;</td>
</tr>
<tr>
<td>b) investigating nonconformity(ies), determining their cause(s) and taking actions in order to avoid their recurrence;</td>
</tr>
<tr>
<td>c) evaluating the need for action(s) to prevent nonconformity(ies) and implementing appropriate actions designed to avoid their occurrence;</td>
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<tr>
<td>d) recording and communicating the results of corrective action(s) and preventive action(s) taken; and</td>
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<tr>
<td>e) reviewing the effectiveness of corrective action(s) and preventive action(s) taken.</td>
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Where the corrective action and preventive action identifies new or changed hazards or the need for new or changed controls, the procedure shall require that the proposed actions shall be taken through a risk assessment prior to implementation.

Any corrective action or preventive action taken to eliminate the causes of actual and potential nonconformity(ies) shall be appropriate to the magnitude of problems and commensurate with the OH&S risk(s) encountered.

The organization shall ensure that any necessary changes arising from corrective action and preventive action are made to the OH&S management system documentation.
For an OH&S management system to be effective on an ongoing basis, an organization should have a procedure(s) for identifying actual and potential nonconformity(ies), making corrections and taking corrective and preventive action, preferably preventing problems before they occur. The organization can establish individual procedures to address corrective and preventive action, or a single procedure to address both.

Nonconformity is a non-fulfilment of a requirement. A requirement can be stated in relation to the OHSAS 18001 management system or in terms of OH&S performance. Examples of issues that can give rise to nonconformities include:

a) for OH&S management system performance
   - failure of top management to demonstrate commitment,
   - failure to establish OH&S objectives,
   - failure to define responsibilities required by an OH&S management system, such as responsibilities for achieving objectives,
   - failure to periodically evaluate compliance with legal requirements,
   - failure to meet training needs,
   - documentation being out of date or being inappropriate,
   - failure to carry out communications;

b) for OH&S performance
   - failure to implement the planned programme to achieve improvement objectives,
   - consistent failure to achieve performance improvement objectives,
   - failure to meet legal or other requirements,
   - failure to record incidents,
   - failure to implement corrective action in a timely manner,
   - consistent high rates of illness or injury that are not being addressed,
   - deviations from OH&S procedures,
   - introduction of new materials or processes without appropriate risk assessments being conducted.

Inputs into corrective action and preventive action can be determined from the results of:
   - periodic tests of emergency procedures,
   - incident investigations,
   - internal or external audits,
   - the periodic evaluations of compliance,
   - performance monitoring,
   - maintenance activities,
   - employee suggestion schemes and feedback from employee opinion/satisfaction surveys,
   - exposure assessments.
Identification of nonconformities should be made part of individual responsibilities (see 4.4.1), with individuals closest to the work being encouraged to report potential or actual problems.

Corrective actions are actions taken to eliminate the underlying (root) cause(s) of identified nonconformity or incidents in order to prevent recurrence.

Once nonconformity is identified, it should be investigated to determine the cause(s), so that corrective action can be focused on the appropriate part of the system. An organization should consider what actions need to be taken to address the problem, and/or what changes need to be made to correct the situation. The response and timing of such actions should be appropriate to the nature and scale of the nonconformity and the OH&S risk.

Preventive actions are actions taken to eliminate the underlying (root) cause(s) of the potential nonconformity or potential undesirable situations, in order to prevent occurrence.

When a potential problem is identified but no actual nonconformity exists, preventive action should be taken using a similar approach as for corrective action. Potential problems can be identified using methods such as extrapolating corrective action of actual nonconformities to other applicable areas where similar activities occur, or hazard analysis.

The organization should ensure that:

— where new or changed hazards or the need for new or changed controls have been determined, the proposed corrective or preventive actions will be taken through a risk assessment, prior to implementation,

— corrective actions and preventive actions are implemented,

— the results of corrective action and preventive action are recorded and communicated,

— there is follow-up to review the effectiveness of the actions taken.

4.5.4 Control of records

OHSAS 18001 text

The organization shall establish and maintain records as necessary to demonstrate conformity to the requirements of its OH&S management system and of this OHSAS Standard, and the results achieved.

The organization shall establish, implement and maintain a procedure(s) for the identification, storage, protection, retrieval, retention and disposal of records.

Records shall be and remain legible, identifiable and traceable.

Records should be maintained to demonstrate that the organization is operating its OH&S management system effectively and is managing its OH&S risks.
Records that can demonstrate conformance to the requirements include:

- records of the evaluation of compliance with legal and other requirements,
- hazard identification, risk assessment and risk control records,
- records of the monitoring of OH&S performance,
- calibration and maintenance records for equipment used to monitor OH&S performance,
- records of corrective action and preventive action,
- reports of OH&S inspections,
- training and associated records that support evaluations of competence,
- OH&S management system audit reports,
- participation and consultation reports,
- incident reports,
- incident follow-up reports,
- OH&S meeting minutes,
- health surveillance reports,
- personal protective equipment (PPE) maintenance records,
- reports of emergency response drills,
- management review records.

The integrity of records and data should be maintained to facilitate their subsequent use, e.g. for monitoring and review activities, for the identification of trends for preventive action, etc.

In determining the appropriate controls for records the organization should take into account any applicable legal requirements, confidentiality issues (particularly those relating to personnel), storage/access/disposal/back-up requirements, and the use of electronic records.

For electronic records the use of antivirus systems and off-site backup storage should be considered.

4.5.5 Internal audit

The organization shall ensure that internal audits of the OH&S management system are conducted at planned intervals to:

a) determine whether the OH&S management system:
   1) conforms to planned arrangements for OH&S management including the requirements of this OHSAS Standard; and
   2) has been properly implemented and is maintained; and
   3) is effective in meeting the organization's policy and objectives;

b) provide information on the results of audits to management.

Audit programme(s) shall be planned, established, implemented and maintained by the organization, based on the results of risk assessments of the organization’s activities, and the results of previous audits.
4.5.5.1 General

Audits can be used by an organization to review and evaluate the performance and effectiveness of its OH&S management system.

An internal OH&S management system audit programme should be established to review the conformity of the organization’s OH&S management system to OHSAS 18001.

Planned OH&S management system audits should be carried out by personnel from within the organization and/or by external personnel selected by the organization, to establish whether the OH&S management system has been properly implemented and maintained. Individuals selected to conduct the OH&S management system audits should be competent and be selected in a manner to ensure objectivity and impartially in the audit process.

NOTE The general principles and methodology described in ISO 19011 are appropriate to OH&S management system auditing.

4.5.5.2 Establishing an audit programme

The implementation of an internal audit programme should address the following:

- communication of the audit programme to relevant parties,
- establishing and maintaining a process for the selection of auditors and audit teams,
- providing the resources necessary for the audit programme,
- planning, coordinating and scheduling audits,
- ensuring that audit procedures are established implemented and maintained,
- ensuring the control of records of audit activities,
- ensuring the reporting of audit results and audit follow-up.

NOTE The above has been adapted from ISO 19011:2002, 5.4.

The audit programme should be based on the results of risk assessments of the organization’s activities and the results of previous audits. The results of the risk assessments (see 4.3.1) should guide the organization in determining the frequency of audits of particular activities, areas or functions and what parts of the management system should be given attention.
The OH&S management system audits should cover all areas and activities within the scope of the OH&S management system (see 4.1), and assess conformity to OHSAS 18001.

The frequency and coverage of OH&S management system audits should be related to the risks associated with the failure of the various elements of the OH&S management system, available data on the performance of the OH&S management system, the output from management reviews, and the extent to which the OH&S management system or the organizational activities are subject to change.

4.5.5.3 Internal audit activities

OH&S management system audits should be conducted according to the audit programme. The organization should consider conducting additional audits:
- as changes occur in the hazards, or risk assessment,
- when indicated by the results of previous audits,
- depending on the type of incidents or increased frequency of incidents, or
- when circumstances indicate that they are necessary.

An internal audit typically consists of the following activities:
- initiating the audit,
- conducting document review and preparing for the audit,
- conducting the audit,
- preparing and communicating the audit report,
- completing the audit and conducting audit follow-up.

NOTE The above has been adapted from ISO 19011:2002, 6.1.

4.5.5.4 Initiating an audit

The following activities are typically done to initiate an audit:
- defining the audit objectives, scope and criteria for the audit,
  NOTE Audit criteria are the references against which audit evidence is compared, e.g. OHSAS 18001, OH&S policy and procedures.
- selection of appropriate auditors and audit team for the audit taking into account the need for objectivity and impartiality,
- determining the audit methodology,
- confirming audit arrangements with the auditee and other individuals who will take part in the audit.

Determination of any applicable workplace OH&S rules is an important part of this process. In some cases, auditors could need additional training and/or be required to conform to additional requirements [e.g. the wearing of specialized personal protective equipment (PPE)].

4.5.5.5 Selection of auditors

One or more persons can undertake OH&S management system audits. A team approach can widen involvement and improve cooperation. A team approach can also allow a wider range of
specialist skills to be utilized and allow for individual auditors to have specific competencies.

In order to maintain independence, objectivity and impartiality, auditors should not audit their own work.

Auditors need to understand their task and be competent to carry it out. Auditors should be familiar with the OH&S hazards and risks of the areas they are auditing and any applicable legal or other requirements. They need to have the experience and knowledge of the relevant audit criteria and activities they are auditing to enable them to evaluate performance and determine deficiencies.

4.5.5.6 Conducting document reviews and preparing for an audit

Prior to conducting an audit, the auditors should review appropriate OH&S management system documents and records, and the results of prior audits. This information should be used by the organization in making its plans for an audit.

The documentation that can be reviewed includes:
- information on roles responsibilities and authorities (e.g. an organization chart),
- OH&S policy statement,
- OH&S objectives and programme(s),
- OH&S management system audit procedures,
- OH&S procedures and work instructions,
- hazard identification, risk assessment and risk control results,
- applicable legal and other requirements,
- incident, nonconformity and corrective action reports.

The amount of documentation to be reviewed and the detail provided in the plans for the audit should reflect the scope and complexity of the audit. The plans for the audit should cover the following:
- audit objectives,
- audit criteria,
- audit methodology,
- audit scope and/or location,
- audit schedule,
- roles and responsibilities of the various audit parties.

The audit planning information can be contained in more than one document. The focus should be on providing adequate information to implement the audit.

If other parties need to be included in the audit process (e.g. employee representatives), this should be included in the plans for the audit.

4.5.5.7 Conducting an audit

The following activities are typically part of the audit:
- communication during the audit,
- collecting and verifying information,
- generating audit findings and conclusions.
Depending on the scope and complexity of the audit, it can be necessary to make formal arrangements for communication during the audit. The audit team should communicate to the auditee in a timely manner:

- the plans for the audit,
- the status of the audit activities,
- any concerns raised during the audit, and
- the audit conclusions.

Communication of the plans for the audit can be achieved through the use of an opening meeting. Audit findings and conclusions should be reported during a closing meeting.

Evidence collected during the audit which suggests an imminent risk that requires immediate action should be reported without delay.

During the audit, information relevant to the audit objectives, scope and criteria should be collected by appropriate methods. The methods will depend on the nature of the OH&S management system audit being undertaken.

The audit should ensure that a representative sample of the important activities is audited and that relevant personnel are interviewed. This can include interviews of personnel such as individual workers, employee representatives and relevant external personnel, e.g. contractors.

Relevant documentation, records and results should be examined.

Wherever possible, checks should be built into the OH&S management system audit procedures to help to avoid misinterpretation or misapplication of collected data, information, or other records.

Audit evidence should be evaluated against the audit criteria to generate the audit findings and conclusions. Audit evidence should be verifiable. Audit evidence should be recorded.

4.5.5.8 Preparing and communicating the audit report

The results of the OH&S management system audits should be recorded and reported to management, in a timely manner.

The content of the final OH&S management system audit report should be clear, precise and complete. It should be dated and signed-off by the auditor.

It should contain the following elements:

- the audit objectives and scope,
- information about the plans of the audit (identification of the members of the auditing team and the audited representatives, dates of audit and identification of the areas subject to audit),
- the identification of reference documents and other audit criteria used to conduct the audit (e.g. OHSAS 18001, OH&S procedures),
- details of identified nonconformities,
- any relevant remarks on the extent to which the OH&S management system:
• conforms to planned arrangements,
• is being properly implemented and maintained,
• achieves the stated OH&S policy and objectives.

The results of OH&S management system audits should be communicated to all relevant parties as soon as possible, to allow corrective actions to be taken.

Confidentiality should be considered when communicating the information contained within the OH&S management system audit reports.

4.5.5.9 Completing the audit and conducting audit follow-up

A review of the results should be carried out and effective corrective action taken, where necessary.

Follow-up monitoring of audit findings should be established to ensure that identified nonconformities are addressed.

Top management should consider OH&S management system audit findings and recommendations, and take appropriate action as necessary within an appropriate time.

4.6 Management review

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<td>Top management shall review the organization’s OH&amp;S management system, at planned intervals, to ensure its continuing suitability, adequacy and effectiveness. Reviews shall include assessing opportunities for improvement and the need for changes to the OH&amp;S management system, including the OH&amp;S policy and OH&amp;S objectives. Records of the management reviews shall be retained.</td>
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<td>Input to management reviews shall include:</td>
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<td>a) results of internal audits and evaluations of compliance with applicable legal requirements and with other requirements to which the organization subscribes;</td>
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<td>b) the results of participation and consultation (see 4.4.3);</td>
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<td>c) relevant communication(s) from external interested parties, including complaints;</td>
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<td>d) the OH&amp;S performance of the organization;</td>
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<td>e) the extent to which objectives have been met;</td>
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<td>f) status of incident investigations, corrective actions and preventive actions;</td>
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<td>g) follow-up actions from previous management reviews;</td>
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<td>h) changing circumstances, including developments in legal and other requirements related to OH&amp;S; and</td>
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<td>i) recommendations for improvement.</td>
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The outputs from management reviews shall be consistent with the organization’s commitment to continual improvement and shall include any decisions and actions related to possible changes to:

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

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

Management reviews should focus on the overall performance of the OH&S management system with regard to:

— suitability (is the system appropriate to the organization; dependent on its size, the nature of its risks, etc.),
— adequacy (is the system fully addressing the organization’s OH&S policy and objectives?), and
— effectiveness (is it accomplishing the desired results?).

Management reviews should be carried out by top management, on a regular basis (e.g. quarterly, semi-annually, or annually) and can be carried out by meetings or other communication means. Partial management reviews of the performance of the OH&S management system can be held at more frequent intervals, if appropriate. Different reviews can address different elements of the overall management review.

The management appointee (see 4.4.1) has the responsibility for ensuring that reports on the overall performance of the OH&S management system are presented to top management, for review.

In planning for a management review, consideration should be given to the following:

— the topics to be addressed,
— who needs to participate to ensure the effectiveness of the review (top management, managers, OH&S specialist advisors, other personnel),
— responsibilities of individual participants in respect of the review,
— information to be brought to the review,
— how the review will be recorded.

In relation to the OH&S performance of the organization, and to show evidence of progress on the policy commitments to prevent injury and ill health, the following inputs could be considered:

— reports of emergencies (actual or exercises),
— worker satisfaction surveys,
— incident statistics,
— results of regulatory inspections,
— results and/or recommendations from monitoring and measurement,
— OH&S performance of contractors,
- OH&S performance of supplied products and services,
- information on changes in legal and other requirements.

In addition to the specific inputs for management review required by OHSAS 18001, the following inputs can also be considered:

- reports from individual managers on the effectiveness of the system locally,
- reports of ongoing hazard identification, risk assessment and risk control processes,
- progress in the achievement of OH&S training plans.

In addition to the outputs required by OHSAS 18001, details of the following issues can also be considered:

- the suitability, adequacy and effectiveness of current hazard identification, risk assessment and risk control processes,
- current levels of risk and the effectiveness of existing control measures,
- adequacy of resources (financial, personnel, material),
- the state of preparedness for emergency,
- an assessment of the effects of foreseeable changes to legislation or technology.

Depending on the decisions and actions agreed at a review, the nature and types of communication of the results of the review, and to whom they will be communicated, should also be considered.

### Table A.1 Correspondence between OHSAS 18001:2007, ISO 14001:2004 and ISO 9001:2008

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Annex B (informative) Correspondence between OHSAS 18001, OHSAS 18002 and the ILO-OSH:2001 Guidelines on occupational safety and health management systems

B.1 Introduction
This Annex identifies the key differences between the International Labour Organization’s ILO-OSH Guidelines and the OHSAS documents, and provides a comparative assessment of their differing requirements.

It should be noted that no areas of significant difference have been identified. Consequently, those organizations that have implemented an OH&S management system that is compliant with OHSAS 18001 may be reassured that their OH&S management system will also be compatible with the recommendations of the ILO-OSH Guidelines. A correspondence table between the individual clauses of the OHSAS documents and those of the ILO-OSH Guidelines is given in B.4.

B.2 Overview
The two prime objectives of the ILO-OSH Guidelines are:

a) to assist countries in the establishment of a national framework for occupational health and safety management systems; and

b) to provide guidance to individual organizations regarding the integration of OH&S elements into their overall policy and management arrangements.

OHSAS 18001 specifies requirements for OH&S management systems, to enable organizations to control risks and to improve their OH&S performance. OHSAS 18002 gives guidance on the implementation of OHSAS 18001. The OHSAS documents are therefore comparable with Section 3 of the ILO-OSH Guidelines “The occupational safety and health management system in the organization”.

B.3 Detailed analysis of Section 3 of the ILO-OSH Guidelines against the OHSAS documents

B.3.1 Scope
The focus of the ILO-OSH Guidelines is on workers. The focus of the OHSAS Standards, towards persons under the control of the organization and other interested parties, is broader.

B.3.2 OH&S management system models
The models picturing the main elements of an OH&S management system are directly equivalent between the ILO-OSH Guidelines and the OHSAS documents.
B.3.3 ILO-OSH Section 3.2, Worker participation

In the ILO-OSH Guidelines, subsection 3.2.4 recommends that:
“The employer should ensure as appropriate, the establishment and efficient functioning of a health and safety committee and the recognition of workers health and safety representatives in accordance with national laws and practice”.

OHSAS 18001:2007, 4.4.3, requires the organization to establish a procedure for communication, participation and consultation, and to involve a wider spectrum of interested parties (due to the broader scope of application of the document).

B.3.4 ILO-OSH Section 3.3, Responsibility and accountability

The ILO-OSH Guidelines recommend in 3.3.2(h) the establishment of prevention and health promotion programmes. There is no requirement in the OHSAS Standards for this.

B.3.5 ILO-OSH Section 3.4, Competence and training

The recommendation of the ILO-OSH Guidelines sub-section 3.4.4: “Training should be provided to all participants at no cost and should take place during working hours if possible”, is not a requirement of the OHSAS documents.

B.3.6 ILO-OSH Section 3.10.4, Procurement

The ILO-OSH Guidelines emphasize that safety and health requirements of the organization should be incorporated into purchasing and leasing specifications.

The OHSAS Standards address procurement by their requirements for risk assessment, identification of legal requirements and the establishment of operational controls.

B.3.7 ILO-OSH Section 3.10.5, Contracting

The ILO-OSH Guidelines define the steps to be taken to ensure that the organization’s safety and health requirements are applied to contractors (they also provide a summary of the actions needed to ensure that they are). This is implicit in OHSAS.

B.3.8 ILO-OSH Section 3.12, Investigation of work-related injuries, ill health, diseases and incidents, and their impact on safety and health performance

The ILO-OSH Guidelines do not require corrective actions or preventive actions to be reviewed through the risk assessment process prior to implementation, as they are in OHSAS 18001:2007, 4.5.3.2.

B.3.9 ILO-OSH Section 3.13, Audit

The ILO-OSH Guidelines recommend consultation on the selection of auditors. In contrast, the OHSAS documents require audit personnel to be impartial and objective.
B.3.10 ILO-OSH Section 3.16, Continual improvement

This is a separate sub-clause in the ILO-OSH Guidelines. It details arrangements that should be taken into account for the achievement of continual improvement. Similar arrangements are detailed throughout the OHSAS documents, which consequently do not have a corresponding clause.

B.4 Correspondence between the clauses of the OHSAS documents and the clauses of the ILO-OSH Guidelines

Table B.1 Correspondence between the clauses of the OHSAS documents and the clauses of the ILO-OSH Guidelines

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<td>4.3 Planning (title only)</td>
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<td>Planning and implementation (title only)</td>
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<tr>
<td>4.3.1 Hazard identification, risk assessment and determining controls</td>
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<td></td>
<td>3.8</td>
<td>System planning, development and implementation</td>
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<td>Hazard prevention</td>
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<td></td>
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<td>4.3.2 Legal and other requirements</td>
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<td></td>
<td>3.9</td>
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<tr>
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<td>Responsibility and accountability</td>
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<td>3.8</td>
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<td>Continual improvement</td>
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# Table B.1  Correspondence between the clauses of the OHSAS documents and the clauses of the ILO-OSH Guidelines (continued)

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<th>Clause</th>
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<th>Clause</th>
<th>ILO-OSH Guidelines</th>
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<td>4.4.3</td>
<td>Communication, participation and consultation</td>
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<td>Worker participation</td>
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<td>Communication</td>
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<td>4.4.4</td>
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<td>Occupational safety and health management system documentation</td>
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<td>3.10.4</td>
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<td>3.10.3</td>
<td>Emergency prevention, preparedness and response</td>
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<td>4.5</td>
<td>Checking (title only)</td>
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<td>Evaluation of compliance</td>
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<td>4.5.3</td>
<td>Incident investigation, nonconformity, corrective action and preventive action (title only)</td>
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<td>4.5.3.1</td>
<td>Incident investigation</td>
<td>3.12</td>
<td>Investigation of work-related injuries, ill health, diseases and incidents and their impact on safety and health performance</td>
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<td>4.5.3.2</td>
<td>Nonconformity, corrective and preventive action</td>
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<td>Preventive and corrective action</td>
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<td>4.5.4</td>
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<td>Occupational safety and health management system documentation</td>
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<tr>
<td></td>
<td></td>
<td>3.16</td>
<td>Continual improvement</td>
</tr>
</tbody>
</table>
Examples of items for inclusion in a hazard identification checklist

C.1 Physical hazards

- slippery or uneven ground,
- working at height,
- objects falling from height,
- inadequate space to work,
- poor ergonomics (e.g. workplace design that does not take account of human factors),
- manual handling,
- repetitive work,
- trappings, entanglement, burns and other hazards arising from equipment,
- transport hazards, either on the road or on premises/sites, while travelling or as a pedestrian (linked to the speed and external features of vehicles and the road environment),
- fire and explosion (linked to the amount and nature of flammable material),
- harmful energy sources such as electricity, radiation, noise or vibration (linked to the amount of energy involved),
- stored energy, which can be released quickly and cause physical harm to the body (linked to the amount of energy),
- frequently repeated tasks, which can lead to upper limb disorders (linked to the duration of the tasks),
- unsuitable thermal environment, which can lead to hypothermia or heat stress,
- violence to staff, leading to physical harm (linked to the nature of the perpetrators),
- ionizing radiation (from x- or gamma-ray machines or radioactive substances),
- non-ionizing radiation (e.g. light, magnetic, radio-waves).

C.2 Chemical hazards

Substances hazardous to health or safety due to:
- inhalation of vapours, gases, or particles,
- contact with, or being absorbed through, the body,
- ingestion,
- the storage, incompatibility, or degradation of materials.
C.3 Biological hazards

Biological agents, allergens, or pathogens (such as bacteria or viruses), that might be:

- inhaled,
- transmitted via contact, including by bodily fluids (e.g. needle-stick injuries), insect bites, etc.,
- ingested (e.g. via contaminated food products).

C.4 Psychosocial hazards

Situations that can lead to negative psychosocial (including psychological) conditions, such as stress (including post-traumatic stress), anxiety, fatigue, depression, from e.g.:

- excessive workload,
- lack of communication or management control,
- workplace physical environment,
- physical violence,
- bullying or intimidation.

NOTE 1 Psychosocial hazards can arise from issues external to the workplace and can impact the OH&S of individuals or their colleagues.

NOTE 2 ISO 14121 also provides additional examples of sources and hazards.
### Annex D (informative) Comparisons of some examples of risk assessment tools and methodologies

<table>
<thead>
<tr>
<th>Tool</th>
<th>Strengths</th>
<th>Weaknesses</th>
</tr>
</thead>
<tbody>
<tr>
<td>Checklists/Questionnaires</td>
<td>• Easy to use</td>
<td>• Often limited to yes/no answers</td>
</tr>
<tr>
<td></td>
<td>• Use can prevent “missing something” in initial evaluations</td>
<td>• Only as good as the checklist used - it might not take into account unique situations</td>
</tr>
<tr>
<td>Risk matrices</td>
<td>• Relatively easy to use</td>
<td>• Only 2-dimensional - cannot take into account multiple factors impacting risk</td>
</tr>
<tr>
<td></td>
<td>• Provides visual representation</td>
<td>• Predetermined answer might not be appropriate to the situation</td>
</tr>
<tr>
<td></td>
<td>• Does not require use of numbers</td>
<td></td>
</tr>
<tr>
<td>Ranking/Voting tables</td>
<td>• Relatively easy to use</td>
<td>• Requires use of numbers</td>
</tr>
<tr>
<td></td>
<td>• Good for capturing expert opinion</td>
<td>• If the quality of the data is not good, the results will be poor</td>
</tr>
<tr>
<td></td>
<td>• Allows for consideration of multiple risk factors (e.g. severity, probability, detectability, data uncertainty)</td>
<td>• Can result in comparison of incomparable risks</td>
</tr>
<tr>
<td>Failure modes and effects analysis (FMEA);</td>
<td>• Good for detailed analysis of processes</td>
<td>• Needs expertise to use</td>
</tr>
<tr>
<td>Hazard and operability studies (HAZOP)</td>
<td>• Allows input of technical data</td>
<td>• Needs numerical data to input into analysis</td>
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<tr>
<td></td>
<td></td>
<td>• Takes resources (time and money)</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Better for risks associated with equipment than those associated with human factors</td>
</tr>
<tr>
<td>Exposure assessment strategy</td>
<td>• Good for analysis of data associated with hazardous materials and environments</td>
<td>• Needs expertise to use</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Needs numerical data to input</td>
</tr>
<tr>
<td>Computer modelling</td>
<td>• If relevant and sufficient data are available, computer modelling can give good answers</td>
<td>• Significant time and money needed to develop and validate</td>
</tr>
<tr>
<td></td>
<td>• Generally uses numerical inputs and is less subjective</td>
<td>• Potential for over-reliance on the results, without questioning their validity</td>
</tr>
<tr>
<td>Pareto analysis</td>
<td>• A simple technique that can assist in determining the most important changes to make.</td>
<td>• Only useful for comparing similar items, i.e. is unidimensional</td>
</tr>
</tbody>
</table>
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ISO/FDIS 23601, Safety identification — Escape and evacuation plan signs


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