
Science and
Technology
Facilities Council
STFC Internal SHE
Compliance Lead
Auditor Workshop

STFC Internal SHE Compliance Lead Auditor Course

Outline programme

**** Please note timings are approximate and will be adjusted to suit progress through the course material ****

09:00 to 09:10	Introduction and programme
09:10 to 09:30	Purpose of the audit report
09:30 to 09:50	Format of the audit report
09:50 to 10:10	Before you start - has fieldwork finished?
10:10 to 10:40	Converting evidence to narrative
10:40 to 11:00	Break
11:00 to 11:30	Converting narrative to actions
11:30 to 12:00	Rating actions
12:00 to 12:25	Determining overall audit rating
12:25 to 13:00	Summary and questions.

STFC Internal SHE Compliance Lead Auditor Workshop

18 May 2022

Welcome to RAL

Health and Safety

While visiting the STFC your host(s) are responsible for your well being – if you have any concerns please talk to your host.

Emergency

In the event of a site or external Emergency follow the instructions provided by your host.

First Aid

If you require **medical attention** or **first aid** ask your host or call **Ext. 2222 internally or 01235 778888 from a mobile phone.**

Fire

If you discover a **fire** raise the alarm, activate alarm call point (break glass), leave building by the nearest exit and call **Ext. 2222 or 01235 778888 from a mobile phone** to report the fire.

Incidents

If you are involved in or witness a safety, health or environmental incident please report it to your host.

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STFC - Internal SHE Compliance Auditor Course 3

Programme

STFC internal SHE compliance lead auditor workshop – Preparing the audit report

- Purpose of the audit report
- Format of the audit report
- Converting evidence to narrative
- Converting narrative to actions
- Looking for potential single-point failures
- Rating actions
- Determining overall audit rating
- Summary and questions

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STFC - Internal SHE Compliance Auditor Course 4

Aims and Objectives

Aims

The purpose of this workshop is to describe a common process by which compliance audit reports of STFC SHE Codes can be prepared

Objectives

- Understand the principles and aims of audit report writing
- Understand how to correlate findings and actions
- Be able to present the findings of the audit in a consistent way

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Purpose of the audit report - MIKE

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Purpose of the audit report

The audit report:

- To document the scope of the audit
- To communicate findings from the audit process
- To provide department directors with information relating to compliance and non-compliance
- To offer suggested corrective actions on non-compliance findings

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Format of the audit report - MIKE

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Format of the audit report

Format:

- Executive summary
- Background
- Scope of the audit
- Methodology
- Audit key findings
- Observations and recommendations
- Summary of recommendations
- Overall assessment

Format of the audit report

Format:

- Executive summary

A code compliance audit, based on interviews and available documented records, was carried out within CLF, ISIS, Estates, SHE Group, Technology, the UK Astronomy Technology Centre (UKATC), RAL Space, RCaH, ASTeC and BID departments based at the Rutherford Appleton Laboratory (RAL), Daresbury Laboratory (DL), Chilbolton and Royal Observatory Edinburgh (ROE) between January 2021 and March 2021. The audit examined compliance with the STFC SHE **Code 17, Testing and Inspection of Electrical Equipment** applicable to the work of staff within the departments.

All departments were found to have a range of activities where compliance to the Testing and inspection of electrical equipment SHE Code is required.

Most departments have staff trained as portable electrical equipment test operatives so that they are able to undertake ad-hoc testing to suit their project needs. Some departments undertake very few such tests annually, whereas other departments can be testing significant quantities of equipment each year and may in certain circumstances sub-contract this work.

The site Waste Electrical and electronic equipment (WEEE) disposal process is used exclusively for the disposal of any failed portable electrical equipment taken out of service.

It was a common finding that portable electrical equipment testing training was either urgently due for renewal or had already expired. The majority of these cases were likely to be due to the COVID-19 lockdown restrictions at the time of the audit preventing face-to-face training taking place.

The overall audit assessment concluded; **"Substantial".** (See appendix 2)

Format of the audit report

Format:

- Background

SHE auditing was introduced following the launch of STFC SHE Code 30: SHE Audit and Inspection in March 2009. The 2020/21 SHE Audit programme is sponsored and was approved by the STFC SHE Management Committee and this audit is part of that programme. The primary recipients of this audit report are audited Department directors, and findings from the STFC SHE Audit programme are reviewed by the STFC SHE Management Committee.

It should be recognised that the audit process and the conclusions drawn from it are based on a sample of evidence gathered at the time of the audit and cannot provide absolute assurance that the processes audited are in place in all circumstances and at all times. Further detail can be obtained from the audit team if required.

It should also be noted that due to COVID-19 restrictions at the time of the audit interviews, the scope had to be marginally reduced and that department area inspections were not included as part of the overall audit. All interviews were undertaken as Zoom meetings.

Format of the audit report

Format:

- Scope of the audit

This audit addresses compliance with STFC SHE **Code 17, Testing and Inspection of Electrical Equipment**.

The audit was based on interviews, incident reports and available documented records of the testing and inspection of electrical equipment, and was carried out within CLF, ISIS, Estates, Technology, the UK Astronomy Technology Centre, RAL Space, RCaH, ASTeC and BID departments based at RAL, DL, Chilbolton and ROE.

The audit specifically excluded the following from its scope:

- Battery operated equipment
- Class II equipment where the flexible cord supplies voltage ≤120VDC or ≤50VAC
- Class III equipment
- Fixed electrical installations

Format of the audit report

Format:

- Methodology

The audit started with a review of relevant incident reports relating to work undertaken on the testing and inspection of electrical equipment at the respective STFC sites.

Incident reports recorded a range of incidents occurring which involved the use of portable electrical equipment. Many of these related to the PAT test labels displaying expired dates, or items which had been passed during the test but were clearly damaged or in a dangerous state. Others included the incorrect wiring of electrical equipment causing some form of failure, or the incorrect use of portable electrical equipment, such as extension cables, where individual power sockets should have been used instead. There were also examples where facility users had incorrectly used European style plugs in UK 3 pin sockets. Very few of these incidents resulted in injuries, although there were a few cases where individuals suffered minor electrical shocks as a result. There were no reportable injuries recorded.

The auditors interviewed staff for procedural compliance to the code within their department. 42 people in total were interviewed.

Format of the audit report

Format:

- Audit key findings

CLF

- CLF have a small team of trained portable electrical equipment test operatives, generally testing equipment for the user programme. They do not support the annual testing programme organised by Estates.
- The test operatives have been trained to City and Guilds level or have attended the SHE Group portable electrical equipment testing training. In certain cases, they have many years of experience of testing portable electrical equipment.
- Typically, the test operatives would undertake 20 to 30 tests a month.
- They do not have formal letters of appointment as CLF lists these roles in their safety handbook.

Format of the audit report

Format:

- Observations and recommendations

Ref	Observation and its risk/implication (including cross reference to relevant SHE Code clause)	Recommendation	Category	Management Response	Where action agreed	
					Action owner	Completion date
7.1.1	Some portable electrical equipment test operative and liaison officer training appeared to be out of date. There is a risk that current best practice is not being employed and that portable electrical equipment is being tested incorrectly. (Appendix 6)	Review the training needs of all portable electrical equipment test operatives and liaison officers and renew training where required.	Recommendation			
7.1.2	No formal portable electrical equipment test procedure is followed as the test machines used have a pre-programmed process as part of their function. However, it wasn't clear if these pre-programmed processes are comparable with appendix 1 of the safety code. There is a risk that incorrect testing of the portable electrical equipment may be taking place. (4.3.1)	Check that the pre-programmed processes of the test machines are comparable with appendix 1 of the safety code. Revise accordingly if they are not.	Recommendation			

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Format of the audit report

Format:

- Summary of recommendations

	Major	Minor	Recommendation	Commendation
CLF	0	0	3	2
ISIS	0	1	5	3
Estates	0	0	7	1
Technology	0	1	5	0
UKATC	0	0	0	1
RAL Space	0	1	6	1
RCaH	0	0	3	0
ASTeC	0	0	2	0
BID	0	0	6	0
SHE Group	0	0	5	0
Total	**0**	**3**	**42**	**8**

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Format of the audit report

Format:

- Overall assessment

The overall audit assessment:
"Substantial". See appendix 2 for explanation of overall audit assessment

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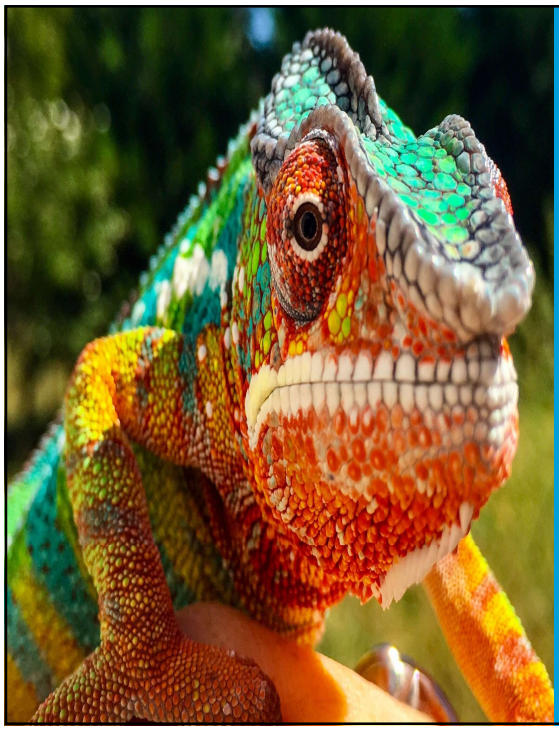

Before you start - has fieldwork finished?

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What is required to issue an assurance opinion?

Two different types of Assurance Opinion

- Reasonable Assurance (Positive)

  Auditor concludes that they have **sufficient evidence** to allow them to conclude that controls and risk mitigation processes **are** adequate and effective.

- Limited Assurance (Negative)

  Auditor concludes that after their procedures and tests have been performed **nothing has come to their attention** to suggest that controls and risk mitigation processes **are not** adequate and effective

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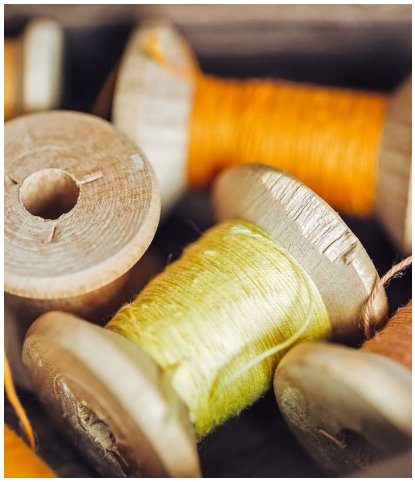
Audit Design and Reporting



- Reasonable Assurance = Flexible Testing Plan
- Audit design might need revisiting at any point right up to report issue
- Report must link back to sufficient evidence
- To write the report you must be clear you understand the hazard and the golden thread to risks, mitigations/controls, tests and findings
- Throughout the audit take a step back and consider the bigger picture
- Regularly road test your understanding and challenge the approach

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Exercising Professional Judgement

Types of Challenges to Scope and Audit Approach:

- What is the relevant population for testing?
- Are there very different and distinct control environments?
- Third party risk
- Have all key processes been followed end to end? E.g source data to report
- Have you considered the human factors? Culture, motivation, single point of failure, training/experience, capacity for error.
- What are you relying on? IT reliance? Expert opinion?
- Changes to legislation and regulations – is the SHE Code up to date?
- Be alert to previously unknown and unexpected issues – anything raised must be followed up and closed

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Converting evidence to narrative - Rob

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Converting evidence to narrative

Evidence:

- Following the audit interviews you will be confronted with a mass of evidence
- This will be supported further by information from training records, risk assessments, incident reports and previous audit reports

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Converting evidence to narrative

Evidence:

- The analysis of this evidence can appear to be a daunting task
- The critical challenge will be to draw from this collection of evidence the important findings from the audit
- The secondary challenge will be to ensure you have captured all salient evidence and present these findings in a meaningful way to the recipients of the audit report

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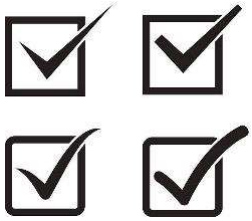
Converting evidence to narrative

Evidence:

- Precisely determining which item of evidence merits some form of action can be a challenge
- Where possible, adopt any prevailing guidance to assist with this task
- Implement this guidance for each item of evidence



Converting evidence to narrative

Evidence:

- Test the evidence against the responsibilities within the safety code
- Make a judgement of the evidence based on what should be in place and what is actually being implemented

4.2 SHE Group shall:

4.2.1 Establish a prioritised and risk based SHE Code compliance audit programme based upon: the results of risk assessments of STFC activities; current SHE performance - incidents and near misses; planned changes to current work programmes; new legislation; and the results of previous audits.

The programme shall encompass all STFC sites or sites where STFC staff work in the UK and overseas and all SHE Codes relevant to those activities.

The programme should ensure that all STFC SHE Codes are compliance audited on a sample basis across the STFC on a 6 year cycle. As a risk based audit programme there may be instances where audits are conducted more frequently than that dictated by a 6 year cycle. This programme should, as appropriate, utilise the RC Audit and Assurance Services Group (AASG) and complement its external audit programme.

4.2.2 Ensure that sufficient and suitably trained SHE compliance auditors are available to undertake the agreed programme, see Appendix 1, nominating a lead auditor where a team of auditors is required. Where possible auditors should be independent of the areas they audit. As appropriate specialist and external auditors may be employed to undertake SHE audits as part of this programme on behalf of the STFC.

Converting evidence to narrative

Narrative:

- Do not offer an opinion – i.e. in my view……
- Don't be derisive – i.e. the teams were wasting their time undertaking this task…..
- Don't be judgmental – i.e. I've never seen a more incompetent setup….
- Keep to the evidence as collected – i.e. there was no risk assessment in place….
- Look for trends (One example of non-compliance is not a trend) – i.e. there is a culture of not undertaking risk assessments
- If there is insufficient evidence, state this fact – i.e. it was unclear if…….

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Converting evidence to narrative

Narrative:

- Be pragmatic – i.e. there was clear evidence of non-compliance….
- Don't be swayed by preconceived ideas – i.e. there were rumours that……
- Avoid contradictions – i.e. there was evidence of routine good compliance but this was not always in place
- Don't overstate the evidence – i.e. there was a small amount of evidence of excellent compliance
- Be concise – i.e. Non-compliance was found throughout…..

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Converting evidence to narrative

Narrative:

- Don’t struggle through the process on your own – seek advice from a mentor or other lead auditors

Converting evidence to narrative

Example:

- Evidence collected during interviews

What specific training have you undertaken which allows you to carry out your nominated role?	SHE Group training - a while since this was undertook though - also undertaken independent course to maintain up-to-date information	SHE training - is a member of the Institute of Waste Management – also undertaken external training for Hazardous waste

State the facts:

- SHE Group provided training has been undertaken by all nominated staff
- Additional training to maintain and add value to the SHE Group training has been undertaken
- Some of the SHE Group training may be due for renewal
- Some of the training is supported by Institute membership

Converting evidence to narrative

Example:

- What the safety code states

4.3.1 Ensure a suitable number of competent Waste Disposal Officers are trained for defined areas of responsibility within their Department.

Reviewing the facts:

- SHE Group provided training has been undertaken by all nominated staff (Compliant)
- Additional training to maintain and add value to the SHE Group training has been undertaken (Extra)
- Some of the SHE Group training may be due for renewal (Possible non-compliant – confirmed by evidence from training records)
- Some of the training is supported by Institute membership (Extra)

Converting evidence to narrative

Example:

- Generating narrative for these facts

- **All nominated staff have been suitably trained, although some of this training is due for renewal.**
- **In addition, independent training has been undertaken in order to maintain up-to-date information pertaining to the role, some of which is supported by Institute membership.**

Converting evidence to narrative

Exercise 1:

- Produce a one/two sentence statement for each line of evidence

What type of activities are undertaken within your workshop which require the safe disposal of waste?	The production of swarf, metal waste, waste coolant, some special metal waste which is considered to be hazardous.	The machining of plastics and metals. There is no cutting fluids used as only dry work carried out.	The use of machine oils and wire erosion equipment, chemicals, coolants. These produce Swarf.	The use of chemicals and materials for target making. They tend not to be recycled but will always be stored in a flammable cabinet.
What percentage of waste produced in the workshop is considered to be highly flammable, toxic or carcinogenic?	About 5% of waste would be classed as this - very little in total to what is produced during general machining.	Try to minimise hazardous waste but do have chemical waste stored locally until ready to be removed off site.	Only the machine oil which is stored locally until ready for removal.	Would contact the WDO for removal of any such waste, this is very rare.
Where is the location of the nearest Waste Control Points to your workshop?	Immediately outside the workshop.	Just outside the workshop area.	There is a bunded area close to the workshop. Also, inside the workshop there is a chemical cabinet.	Use the scrap metal bins in the corridor close to the laboratory.

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Converting evidence to narrative

Exercise 1:

- Review these statements with reference to compliance with the safety code

What type of activities are undertaken within your workshop which require the safe disposal of waste?	The code shall apply wherever STFC activities (including those of staff and facility users, visitors, contractors and tenants on STFC sites), require the safe collection, transport, handling, storage, recycling and disposal of waste or scrap materials (for example scrap metal).
What percentage of waste produced in the workshop is considered to be highly flammable, toxic or carcinogenic?	All waste is potentially harmful but it is defined as hazardous if, for example, it is highly flammable, toxic or carcinogenic.
Where is the location of the nearest Waste Control Points to your workshop?	Waste Control Points (WCP) are defined STFC locations where controlled and hazardous wastes can be stored temporarily prior to removal, disposal, incineration and treatment by a waste disposal contractor. Such locations are designed to ensure that stored wastes do not present an environmental hazard and are the responsibility of a Waste Controller.

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Converting evidence to narrative

Exercise 1:

- Generate narratives for these facts
- **The workshops and laboratories would typically generate waste which are covered by the safety code, such as metal waste, coolant, chemicals and distinct waste such as special metals and plastics.**
- **Only very small quantities of the overall waste produced by the workshops and laboratories would be considered highly flammable, toxic or carcinogenic. Risk controls are applied to this waste.**
- **Waste control points are located immediately outside the workshops and the laboratories with additional chemical cupboards located inside the workshops.**

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Converting narrative to actions - Rob

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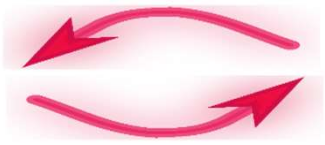
Converting narrative to actions

Narrative:

- Once you have produced your narratives the next process is to determine if any of these findings are non-compliant to the safety code and therefore require the creation of a recommendation
- This check will already have been undertaken as part of converting the evidence to narratives
- Include some form of non-compliance reference in this narrative



Converting narrative to actions

Generating actions:

- Be both positive and negative – balance the report – i.e. the process of reviewing risk assessments ensures all current hazards are identified. This should be commended.
- Focus on areas of higher risk – i.e. the risk controls in place are insufficient to prevent a significant incident…..
- Communicate the full extent of any problem – i.e. unregulated waste management processes are being used and waste is not being disposed of correctly….

Converting narrative to actions

Narrative:

- Identify the root causes – i.e. There is no evidence that a duty of care audit is undertaken…..
- Determine the relative risk if the action is not addressed – i.e. There is a risk that……
- Suggest how to fix the problem – i.e. Undertake a duty of care audit for all waste disposal contractors being used…..
- Give specific information so that the location of the issue can be easily identified i.e. Group, building, site (Don't name individuals) – i.e. Risk assessments are not prepared by the DL Technology Tower workshop……
- Include the applicable reference back to the safety code – i.e. Waste carrier registration has not been obtained (4.5.2)….

Converting narrative to actions

Example:

- The WDO has been suitably trained, although this training has now expired.
- The nominate role of the WDO is recorded in the SHE Directory.
- It wasn't clear if a duty of care audit is undertaken for the external waste disposal contractors used by the DL department workshop.
- A procedure is in place at both RAL and DL to determine if waste should remain at its point of generation. It is rare for waste to be produced where its characteristics are unknown.
- It appears that waste arising from the department activities is not being included in the departmental SHE improvement plans.
- A local waste management training course is provided by the RAL user support group which is presented to facility users and new starters.

Converting narrative to actions

Example:

The RAL WDO has been suitably trained, although this training has now expired. There is a risk that current safe practices are not being adopted regarding the management of hazardous waste. (Appendix 2)	Arrange WDO refresher training for the RAL WDO.	Action
It wasn't clear if a duty of care audit is undertaken for the use of external waste disposal contractors by the DL Tower workshop. There is a risk that unregulated waste management processes could be used and that waste is not being disposed of correctly by these contractors. (4.5.2)	Undertake a duty of care audit for the current external waste disposal contractors being used by CLF.	Action

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Converting narrative to actions

Example:

It appeared that waste arising from department activities is not being included in the departmental SHE Improvement Plans. There is a risk that important waste management control measures are not being implemented as a result of this information not being include in the departmental SHE Improvement Plans. (4.3.2)	Ensure that information relating to the waste arising from department activities is included in the departmental SHE Improvement Plans.	Action
A local contact training course is provided by the RAL user support group which is presented to facility users and new starters. This ensures staff and facility users are aware of their responsibilities for managing waste. (4.5.1)	By providing a waste management induction training course for facility users and new staff ensures they are made aware of their responsibilities for managing all types of waste. This reduces the risks associated with the control of hazardous waste. This should be commended. A departmental notice should be issued to recognise audit commendations.	**Commendation**

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Converting narrative to actions

Exercise 2:

- Produce a set of actions from the following audit narrative.

- It wasn't clear if waste disposal forms for both external and internal waste disposal stream are retained. (4.5.9)
- The quantities of construction waste are reported by the main contractors for large construction projects. However, it appears that this information is not being submitted as part of an annual review of waste for inclusion in the departmental SHE improvement plans. (4.3.2)
- A new contract has been recently placed on Select Environmental Services to undertake both the RAL and Chilbolton site hazardous waste disposal. It was noted that they did not undertake a site inspection prior to submitting their tender and a copy of Safety Code 31 was not provided to them. (2)
- The plan is that monthly reports will be generated by Select Environmental Services for all waste streams. All bins are microchipped which allows for the measurement of their weight, allowing detailed quantities to be assessed for each building location. (4.3.2)

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Converting narrative to actions

Exercise 2:

- Safety code references.

4.5.9 Retain WDFs, HWCN and CWTN for at least 3 years and maintain a record of wastes disposed. Appendix 4 details the Hazardous Waste Consignment Note procedure.

4.3.2 On an annual basis, review the waste arising from their Department's activities and consider the scope for waste elimination, minimisation, re-use, re-cycling or disposal reporting this through Departmental SHE Improvement Plans, see STFC SHE Code 7, SHE Improvement Planning.

2 The code shall apply wherever STFC activities (including those of staff and facility users, visitors, contractors and tenants on STFC sites), require the safe collection, transport, handling, storage, recycling and disposal of waste or scrap materials (for example scrap metal).

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Converting narrative to actions

Exercise 2:

- Produce a set of actions from the following audit narrative.

- It wasn't clear if waste disposal forms for both external and internal waste disposal stream are retained. (4.5.9)
- The quantities of construction waste are reported by the main contractors for large construction projects. However, it appears that this information is not being submitted as part of an annual review of waste for inclusion in the departmental SHE improvement plans. (4.3.2)
- A new contract has been recently placed on Select Environmental Services to undertake both the RAL and Chilbolton site hazardous waste disposal. It was noted that they did not undertake a site inspection prior to submitting their tender and a copy of Safety Code 31 was not provided to them. (2)
- The plan is that monthly reports will be generated by Select Environmental Services for all waste streams. All bins are microchipped which allows for the measurement of their weight, allowing detailed quantities to be assessed for each building location. (4.3.2)

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Rating actions - Mike

STFC Internal SHE Compliance Lead Auditor Workshop

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Rating actions

Actions:

- Once the actions and their suggested fixes are determined, they need to be rated
- This can be done by determining the resultant risks if the action isn't addressed
- Once the level of risk is determined the urgency of undertaking the action should automatically follow
- A useful approach is to compare similar actions within other departments – consistent approach

Rating action

Type	Management response	Response time
Major	Immediate management action	Within 1 week of being informed during audit closing meeting
Minor	Management development of an action plan to resolve	Management action plan developed within 1 month of receipt of the final audit report. In general such actions should be addressed within 3 months of plan being developed.
Recommendation	Management to consider but development of an action plan optional	
Commendation	No management action except to communicate internally. SHE Group to highlight as an area/example of "Good practice" across STFC	

Those items identified as **Major** will have been reported within a week of their report at the audit closing meeting through separate notification.

Rating actions

Example:

The RAL WDO has been suitably trained, although this training has now expired. There is a risk that current safe practices are not being adopted regarding the management of hazardous waste. (Appendix 2)	Arrange WDO refresher training for the RAL WDO.	• **Original training has been undertaken** • **Only revisions to current safe practice are therefore missing** • **Low level of risk if refresher training isn't undertaken** • **Recommendation**
It wasn't clear if a duty of care audit is undertaken for the use of external waste disposal contractors by the DL Tower workshop. There is a risk that unregulated waste management processes could be used and that waste is not being disposed of correctly by these contractors. (4.5.2)	Undertake a duty of care audit for the current external waste disposal contractors being used by CLF.	• **Failure to undertake the duty of care audit is a non-compliance to 4.5.2 of the safety code** • **There is a low risk that the contractors are not registered to dispose of waste** • **There is a significant risk if the contractors do not hold a current licence to dispose of waste** • **Minor**

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Rating actions

Example:

It appeared that waste arising from department activities is not being included in the departmental SHE Improvement Plans. There is a risk that important waste management control measures are not being implemented as a result of this information not being include in the departmental SHE Improvement Plans. (4.3.2)	Ensure that information relating to the waste arising from department activities is included in the departmental SHE Improvement Plans.	• **There is a low risk that waste management controls are not being implemented due to the missing information** • **There is a risk that a one-off project has produced above normal quantities of waste** • **The overall controlled waste produced by the department is relatively low** • **Recommendation**
A local contact training course is provided by the RAL user support group which is presented to facility users and new starters. This ensures staff and facility users are aware of their responsibilities for managing waste. (4.5.1)	By providing a waste management induction training course for facility users and new staff ensures they are made aware of their responsibilities for managing all types of waste. This reduces the risks associated with the control of hazardous waste. This should be commended. A departmental notice should be issued to recognise audit commendations.	**Commendation**

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Rating actions

Exercise 3:

- Rate the actions determined in exercise 2.

Determine the overall audit rating - Mike

STFC Internal SHE Compliance Lead Auditor Workshop

Determine the overall audit rating

Rating:

- Once all the actions have been rated an overall categorisation of the audit report needs to be made
- This could be done as a quantitative rating based on the number of Major – Minor – Recommendations made
- It could be based on the audit summary and the associated prevailing risks highlighted
- You need to make an overall judgement of any underlying issues and the effectiveness of the safety culture with reference to the safety codes
- Use the categorisation chart to determine the overall rating

Categorisation of Audit Findings

Audit Assessment	Definition
Substantial (formerly Full Assurance)	The framework of Governance, Risk Management and Control is adequate and effective.
Moderate (formerly Substantial Assurance)	Some improvements are required to enhance the adequacy and effectiveness of the framework of Governance, Risk Management and Control.
Limited (formerly Limited Assurance)	There are significant weaknesses in the framework of Governance, Risk Management and Control such that it could be or could become inadequate and ineffective.
Unsatisfactory (formerly No Assurance)	There are fundamental weaknesses in the framework of Governance, Risk Management and Control such that it is inadequate and ineffective or is likely to fail.

Determine the overall rating

Exercise 4:

- Determine the overall rating for the following example.

	Major	Minor	Recommendation	Commendation
CLF	0	1	6	0
ISIS	0	1	14	7
Estates	0	1	12	1
Technology	0	2	10	0
UKATC	0	1	2	2
RAL Space	0	0	3	0
RCaH	0	0	6	0
ASTeC	0	0	1	0
BID	0	0	6	0
SHE Group	0	4	13	0
Total	0	10	73	10

Safety, Health and Environment

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Determine the overall rating

Exercise 4:

Some departments have staff trained as Waste Disposal Officers (WDO) who undertake the management of any hazardous waste disposal. The majority of WDO training has now expired.

The majority of hazardous waste is disposed directly through the use of external waste disposal contractors. Very few departments undertake a duty of care audit regarding the engagement of these contractors. Likewise, the waste carrier registration and the waste management disposal licence for these contractors is rarely obtained.

Any unknown waste is either assessed through the WDO route or through external waste disposal contractors who offer a testing facility.

Copies of waste disposal forms, hazardous waste consignment notes, controlled waste transfer notes and chemical analysis results tend to be retained as hard-copies only with no electronic back-up.

Very little of the hazardous waste arising from department activities is quantified and included in the Departmental SHE Improvement Plans.

Registration of the various STFC sites in respect of waste management activities is now undertaken at a UKRI level. It is noted that the current registration expired in June 2021.

Safety, Health and Environment

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Determine the overall rating

Exercise 4:

"Moderate"

Audit Assessment	Definition
Substantial (formerly Full Assurance)	The framework of Governance, Risk Management and Control is adequate and effective.
Moderate (formerly Substantial Assurance)	Some improvements are required to enhance the adequacy and effectiveness of the framework of Governance, Risk Management and Control.
Limited (formerly Limited Assurance)	There are significant weaknesses in the framework of Governance, Risk Management and Control such that it could be or could become inadequate and ineffective.
Unsatisfactory (formerly No Assurance)	There are fundamental weaknesses in the framework of Governance, Risk Management and Control such that it is inadequate and ineffective or is likely to fail.

Safety, Health and Environment

Determine the overall rating

Exercise 5:

- Determine the overall rating for the following example.

	Major	Minor	Recommendation	Commendation
CLF	0	0	2	0
ISIS	0	0	1	2
Estates	2	13	3	2
Technology	0	0	1	0
UKATC	0	1	2	1
RAL Space	0	0	1	4
RCaH	0	1	1	0
ASTeC	0	1	2	2
CI	0	0	0	0
BID	0	1	1	2
DI	0	5	3	0
SHE Group	0	3	4	0
Total	2	25	21	13

Safety, Health and Environment

Determine the overall rating

Exercise 5:

Many department procedures are low-risk managed activities of short duration, where contractors are for example employed to undertake the installation or maintenance of existing site equipment.

Higher-risk activities are also undertaken involving the use of principal contractors along with sub-contractors for specialist activities.

Not all departments have a comprehensive awareness of the code, with many of the relevant personnel who manage contractors having taken on these roles without formal training.

The majority of hazards identified as part of the management of contractors are suitably controlled and monitored, with many departments employing permit systems for specific hazard management.

The communication of contractor activities arranged by the Estates department is generally perceived as poor and it is common for other departments to state that they have no prior knowledge of the planned contractor work.

Generally, contractors appear to have a low standard of health and safety awareness in the work they undertake for the STFC. This is reflected in the large number of health and safety incidents reported involving the use of contractors.

Determine the overall rating

Exercise 5:

"Limited"

Audit Assessment	Definition
Substantial (formerly Full Assurance)	The framework of Governance, Risk Management and Control is adequate and effective.
Moderate (formerly Substantial Assurance)	Some improvements are required to enhance the adequacy and effectiveness of the framework of Governance, Risk Management and Control.
Limited (formerly Limited Assurance)	There are significant weaknesses in the framework of Governance, Risk Management and Control such that it could be or could become inadequate and ineffective.
Unsatisfactory (formerly No Assurance)	There are fundamental weaknesses in the framework of Governance, Risk Management and Control such that it is inadequate and ineffective or is likely to fail.

Summary and questions – Mike & Rob

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Summary

Short plenary session to conclude the workshop

- Merits of yesterday's training session
- Merits of today's workshop
- What could we have done better
- What do we want to take away from the training
- Topics for future discussion

Safety, Health and Environment

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Summary