SHE Auditing and Inspection

STFC SHE Code No 30

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Revisions

1.0	Initial Release	May 2008
1.1	Update to flow chart in Appendix 2 and to Tour Scores.	July 2010
1.2	Remove reference to 'housekeeping' in appendix 4	August 2011
1.3	Amendments to audit checklist and training matrix	May 2013
1.4	Changes to Appendix 2 and Audit Report format	June 2013
1.5	Minor change to 4.2.1 and 4.2.6 to increase audit cycle	March 2014
1.6	Document Retention Policy Added	August 2014
1.7	Changes to Appendix 4 and minor changes to reflect the launch of SHE Assure	August 2018
1.8	Changes to Appendix 2 and change of name of SHE Assure to Evotix Assure	August 2022
1.9	Changes to Appendix 2	April 2023

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SHE Auditing and Inspection

1.   Purpose

This code establishes a framework of STFC Safety, Health and Environment (SHE) Management System audits and inspections in all areas where the STFC holds SHE responsibilities. It establishes the scope, frequency, method, competency, and responsibilities for SHE audits and inspections.

Audit and inspection are critical elements of the STFC SHE Management System providing essential feedback that STFC SHE Policy and Codes are being implemented and are fit for purpose. Audit and inspection:

- Proactively maintain the profile of SHE management and STFC SHE policy within the Council;
- Provide management assurance of the integrity and implementation of the SHE management system;
- Improve the operational effectiveness and efficiency with which SHE codes are implemented; and
- Ensure that improvements identified are acted upon in a proactive and timely manner.

Audit and inspection are key aspects of the STFC Corporate Governance framework providing assurance of the integrity of the SHE Management System. The findings of SHE audit and inspection provide an input to the STFC Corporate Risk Register and Stewardship Framework.

This audit and inspection programme is designed to be complementary to that provided by the Research Council Internal Audit Service (RCIAS) and will be reported to the STFC Audit Committee alongside those of the RCIAS.

Establishing and relying upon audit and inspection are consistent with the Health and Safety Executive (HSE) Guidance document HSG65 "Successful Health and Safety management".

2.   Scope

This code applies to the inspection of STFC estates infrastructure, offices, laboratories and facilities, and audit of all relevant STFC SHE codes, at:

- STFC owned and operated sites, for example: RAL; DL; UKATC; Chilbolton; the Cosener's House; and ING; and
- sites where STFC UK staff occupy facilities/offices as tenants, for example: Boulby Mine Dark Matter Facility; Swindon Office; and the Cockcroft Institute.

Host site restrictions, where the STFC is a tenant, or non-UK SHE legislative requirements may limit the use or application of STFC SHE codes as a basis for safety management and auditing. In such circumstances local SHE codes or their equivalents will form the basis for audits conducted by the STFC where these are

not conducted by the host site for example fire management, building maintenance. See STFC SHE Policy Appendix 1.

Audit and inspection shall encompass the activities of STFC staff, contractors working on behalf of the STFC, tenants on STFC owned sites, visitors and facility users.

The code does not apply directly to institutions where the STFC has shareholder responsibilities, for example: DLS; CERN; ILL; ESRF; ESO; AAT; EISCAT. Through our representation at such institutions, and consistent with our shareholding influence, the STFC may undertake or assist in the audit and/or inspection of these institutions in collaboration with the institution.

Where STFC staff are required to work at the sites of collaborative partners in the UK or overseas, with the agreement of the host site, the STFC may undertake audit and/or inspection of the locations where STFC staff will work to give STFC management assurance of their health and safety.

3.   Definitions

3.1   **SHE System Audit**
The documented, systematic and objective examination of the SHE management system, SHE Policy and Codes, with the aim of assessing whether the management system meets STFC needs and legal requirements - to identify opportunities for its improvement - *"Are we doing what we should be doing, is the system working as a whole - delivering STFC expectations?"*.

System and Compliance auditing both rely upon the examination of representative samples and is not a process for identifying all discernable non-conformities. Auditing can not therefore be relied upon to provide absolute assurance. Audits are best conducted by those independent of the activity being audited.

3.2   **SHE Compliance Audit**
The documented, systematic and objective examination of the implementation of the SHE management system, SHE Codes, with the aim of improving their efficiency, and/or effectiveness in managing a particular SHE hazard - to identify opportunities for their improvement or non compliances with documented controls - *"Are we following the codes, and can they be improved?"*.

3.3   **SHE Inspection** (including Safety Tours or Housekeeping Inspections)
A SHE assessment that focuses primarily upon the adequacy of the physical working environment in which staff and others work.

3.4   **SHE Non conformance**
An evidence-based observation that processes and controls documented in SHE codes have not been applied in practise.

3.5   **SHE Improvement opportunity**
A documented suggestion, identified through audit or inspection, through which the efficiency or effectiveness of the code or its implementation may be improved.

4.   Responsibilities

4.1   Chair of the **STFC SHE Management Committee shall:**

4.1.1   Ensure that the STFC SHE Management Committee commission and approve a rolling SHE Code Compliance Audit programme and periodic STFC SHE System Audit ensuring that sufficient resource, including internal auditors, is made available for their efficient, effective and timely completion.

4.1.2   Ensure that the STFC SHE Management Committee review at least annually delivery of the compliance audit programme and the effectiveness of SHE Code deployment across the STFC. Determine through the results of the audit programme whether additional or STFC wide action is required, see STFC SHE Policy Appendix 4.

4.1.3   Appoint in writing sufficient competent internal auditors to undertake the rolling SHE Code Compliance Audit programme. The appointments should be recorded in SHE Directory where the scope of the appointments should be defined.

STFC 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, see Appendix 2.

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 5-year cycle. As a risk-based audit programme there may be instances where audits are conducted more frequently than that dictated by a 5-year cycle. This programme should, as appropriate, utilise the UKRI Management Assurance Team (MAT) 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.

4.2.3   Monitor and ensure that the compliance audit programme is completed to plan; that the findings of audits are documented; and that non conformances/actions are assigned to relevant managers and staff and recorded in Evotix Assure, see Appendix 2 for further guidance.

4.2.4   Monitor and ensure the timely completion of non conformances/actions arising from SHE compliance audits reporting progress to the STFC H&S Consultation Committee and as appropriate Site and Departmental Safety Committees, see STFC SHE Policy Appendix 4.

4.2.5   Ensure that a review of the compliance audit programme and its findings are reported to the STFC SHE Management Committee and Site Safety Committees annually and included in SHE Improvement plans at Council and Departmental levels (see SHE Code 7, SHE Improvement Planning).

4.2.6   Establish 5 yearly SHE System Audits employing competent auditors who are independent of the STFC and report their findings to the STFC SHE Management Committee, see Appendix 3.

4.3   **Departmental Directors/Safety Contacts shall:**

4.3.1   Establish an agreed programme of SHE Inspections (Tours) prioritised upon the results of risk assessments of Departmental locations/hazards; current SHE performance - incidents and near misses; planned changes to current work programmes; and the results of previous inspections/tours, see Appendix 4 for further guidance. As appropriate this programme should be approved by the Departmental Safety Committee or equivalent. All areas should be subject to at least one inspection every 2 years.

4.3.2   Ensure that sufficient and suitably trained SHE inspection team members are available to undertake the programme, see Appendix 1, where possible inspectors team members should be independent of the areas visited. Good practice encourages swapping inspection team members between Departments, sites/areas to provide 'fresh' perspectives and share good practices; and to include Trade Union (TU)/employee safety representatives, see Appendix 4 for further guidance.

4.3.3   Ensure that the inspection programme is communicated in advance, completed to plan and that the findings of the inspections are documented and that remedial actions identified or non conformances are recorded in Evotix Assure and assigned to relevant managers and staff, see Appendix 4 for further guidance.

4.3.4   Ensure the timely completion of non conformances/actions arising from SHE inspections and report progress appropriately Departmental Safety Committees or other management meetings, and as appropriate Site Safety Committees or SHE Group, see STFC SHE Policy Appendix 4.

4.3.5   Ensure that a review of the inspection programme and its findings is included in Departmental SHE Improvement plans (see SHE Code 7, SHE Improvement Planning).

4.4   **SHE Auditors and SHE Inspection tour members shall:**

4.4.1   Undertake necessary training, see Appendix 1, and conduct audits or inspections to plan, objectively documenting, reporting findings and non conformances, and making recommendations for action to local management, see Appendices 2, 3 and 4 for guidance.

4.5   **Managers responsible for areas/activities subject to audit or inspection shall:**

4.5.1   On receipt of the findings of SHE Compliance and System audits, and SHE Inspections, consider and as appropriate act on the non conformances and recommendations raised. Where such recommendations are accepted address the findings in a timely manner and if not accepted the basis for this decision should be recorded and the audit signed off.

Appendices

Appendix 1 Training

Role	Initial Training	Refresher Training	Refresher Frequency	Comments
SHE inspection tour members	½ Day STFC Safety Tour training – Internal STFC		5 years	
SHE compliance auditors	1-day STFC SHE Auditor training event – Internal STFC		2 years	
SHE compliance auditors – Lead auditors	½ Day STFC SHE Auditor training event – Internal STFC		2 years	

Appendix 2   Guidance for managing, undertaking and reporting SHE Compliance Audits

To assure audits are conducted objectively they should be performed by trained and competent individuals, see Appendix 1 for training requirements, wherever possible independent of the activities being audited.

Where a team of auditors is required, one auditor should be nominated the Lead Auditor to initiate audit planning, co-ordinate the audit, co-ordinate the audit report write up and manage the audit's progress through line management to the agreement of audit actions.

In undertaking audits, auditors and specifically Lead Auditors should:

- Ensure that the scope of the audit is clearly defined by the audit programme: which SHE codes; which geographic or responsibility areas (Departments, sites etc) to be covered; and in what time period;
- Obtain information relevant to the audit planned, that may provide a focus for areas to be reviewed, this should include:
    - A copy of the code(s) to be audited;
      Note: the format and structure of the codes detailing responsibilities by role lends itself to structuring audit interviews;
    - the **audit checklists** relevant to the code(s) to be audited - an appendix to each code in the SHE website. Good practise shows that audit checklists should be developed by auditors based on the code itself, the format of such can be found at the end of this appendix and can act as a helpful means to structure the audit process – what questions and to whom to satisfy which aspect of the code being audited.
      Note: audit checklists should be used as a guide and should not become the ultimate focus of the audit process (a tick list);
    - for the area to be audited and the STFC in general SHE incidents related to the controls defined by the code(s) being audited;
    - where available the findings of previous audits of the area and the code(s) under consideration; and
    - relevant pro forma documentation required for audit checklists, reports etc.
- Plan the audit to ensure that you understand who will need to be present (the 'auditees') and which areas will be visited;
- Where a team of auditors is required ensure that the team contains a balance of suitably qualified and experienced personnel appropriate for the scope and subject of the audit. Ensure that they have been trained, see Appendix 1. Ensure that the audit has sufficient priority in their work plans and that they have sufficient time available to conduct the audit and are sent relevant paperwork. A preparatory audit team meeting will be helpful to assign areas of responsibility/tasks for the audit and share information relevant to the audit including audit paperwork;
- Having identified 'auditees' ensure that they are aware of the audit and have made time in their diaries. An e-mail to the relevant Department Director for cascade is a useful means of raising auditee awareness prior to the audit. Where applicable, consider arranging opening and closing meetings with local management. While time consuming this aspect of planning an audit is critical to make effective use of auditor and auditee time;
  Flexibility will be required to ensure that the audit programme does not clash with major and/or urgent operational activities;

- The objective of SHE Compliance auditing is to examine the ***implementation of SHE Codes***, with the aim of improving their efficiency, and/or effectiveness in managing a particular SHE hazard - ***"Are we following the codes, and can they be improved?"***. SHE Compliance audits should **NOT** in the first instance set out to review adequacy of the SHE code to meet current or anticipated SHE legislation this is the purpose of SHE System Audit that assess whether the management system meets STFC needs and legal requirements - *"Are we doing what we should be doing, is the system working as a whole - delivering STFC expectations?".*

- In undertaking audits consider the following behaviours:
    - Polite and courteous – you have a responsibility to maintain a professional relationship with auditees treating them with respect at all times - remembering that audits can be perceived as threatening by auditees and can result in very emotional responses. The purpose of the audit is to assess the process not the people;
    - Objective – seeking verifiable evidence of compliance at all times;
    - Transparent – ensure that all involved in the audit understand what you are doing, what you find and whether it meets code requirements – no surprises;
    - Supportive – once a concern is identified, consider with those involved how the requirements of the code could be satisfied efficiently and effectively so that pragmatic improvement suggestions can be made – **try to leave solutions not just problems** that consider relevant cost implications; and
    - Maintaining integrity – the importance with which audit report findings will be considered by management depends to a significant degree on the integrity of those undertaking the audit.

- Employing an **audit checklist** against each question/prompt record who was audited and what was found and your conclusions as auditor – remember that you do not need to examine all examples of an activity – simply a sufficiently representative sample that gives you assurance that a responsibility is being enacted, ~5% level. Ensure that all conclusions are recorded and adequately supported and by reliable evidence – generally documented evidence; physical observation; or recorded verbal comment. This evidence should be sufficient for an experienced manager with no previous connection with the audit to ascertain what was found and how the conclusions were reached;

- Formally issue the finalised audit report to Department Directors for management consideration of the audit recommendations with a 1-month deadline, copied to SHE Group, Departmental Safety Contacts, Departmental Safety Committee Chairs and the STFC SHE Management Committee. Where recommendations are agreed management to detail the action required, the action owner and completion date for the action. Where a recommendation is rejected, management are required to document the basis for rejecting the recommendation.

- Record the audit report in Evotix Assure where the actions can also be set up to facilitate monitoring their completion. Evotix Assure will also allow standard progress reports for safety inspection actions to be set up.

- A template audit report can be found here.

Determining the frequency and scope of SHE Code audits

The audit plan attempts to audit approximately 42 safety Codes within a 5-year rolling programme. This equates to 8 audits per year over the 5-year period, whilst allowing for some flexibility each year to the scope of audits undertaken.

Audits are undertaken mainly by the internal STFC SHE audit team, with additional support being provided by the UKRI Management Assurance Team (MAT) for generic lower-risk activity audits, and external professional consultants for the specialist technical SHE Code audits. Typically, the UKRI and consultant teams would undertake a total of 3 to 4 audits per year from the programme.

The frequency and scope of the SHE Code audits are determined by the following factors:

- The undertaking of an audit of a specific SHE code within a maximum 5-year timescale based on the last audit date or the initial issue date for any new SHE codes
- This 5 year timescale is further adjusted accordingly based on the previous overall audit report assessment

Overall assessment	Audit period
Substantial	6 to 7 years
Moderate	5 years
Limited	3 to 4 years
Unsatisfactory	1 to 2 years

- In addition, the scope of each audit is also determined by the previous overall audit report assessment;

Overall assessment	Scope
Substantial	Desk-top audit only
Moderate	General audit
Limited	Detailed audit including possible inspections
Unsatisfactory	Specific audit rigorously checking major actions from previous audit

The frequency of the audits would be further influenced by the following;

- Changes made to the SHE codes since the last audit was undertaken often need to embed into the department structures before they can be tested and this may extend the audit period accordingly. Likewise, some changes may require immediate implementation and these would need to be checked at an earlier date
- Changes in legislation impacting on the SHE codes requiring auditing by an earlier date
- STFC infrastructure changes at the various sites impacting on the SHE codes
- RIDDOR incidents requiring procedural updates and specific changes to the SHE codes
- National/International events which would prompt urgent audit requirements of specific SHE codes
- The findings of the annual STFC Risk Register, determining which of the top 10 SHE risks have not been audited in the past 4 years

Minimum requirements for the experience and qualifications of lead auditors

For each of the SHE Codes, there are agreed minimum requirements for the experience and qualification of the lead auditors responsible for the quality of the audit. This includes knowledge of the respective Codes and audit experience. All audit reports should confirm how these requirements are met.

Code	Technical knowledge	Audit experience
SC01 Lone Working	- Risk assessment training - Lone working awareness training – Totara - Awareness of lone working alarm system	- SHE Advisor - Experience of lone working planning - Knowledge of previous audit report or experience as part of the audit team
SC02 Safe movement of vehicles	- Risk assessment training - Awareness of the site vehicle transport risk assessment - Awareness of the Highway Code	- SHE Advisor/Estates team - Experience of site traffic management - Knowledge of previous audit report or experience as part of the audit team
SC03 Safe use of cryogenic materials	- Safe use of cryogenic equipment training - Awareness of cryogenic hazard information - Awareness of oxygen level monitors	- SHE Advisor/Engineering background - Experience of cryogenic management - Knowledge of previous audit report or experience as part of the audit team
SC04 PUWER	- PPE, ladder use, scaffold awareness, LEV, abrasive wheels, FLT training - General awareness of machinery user information - Awareness of vibrating equipment and HAV	- SHE Advisor/Engineering background - Experience of hand tool and machinery use and management - Knowledge of previous audit report or experience as part of the audit team
SC05 Incident reporting and investigation	- Awareness of the incident investigation process - Awareness of RIDDOR and SoPS process - Awareness of incident reporting process	- SHE Advisor/Technical background - Experience of incident investigation - Knowledge of previous audit report or experience as part of the audit team
SC06 Risk management	- Awareness of the STFC risk assessment process - Awareness of hazard identification - Awareness of method statement process	- SHE Advisor/Technical background - Experience of risk assessment preparation - Knowledge of previous audit report or experience as part of the audit team
SC07 SHE Improvement planning	- Awareness of the STFC SHE Improvement planning process - Awareness of department SHE Improvement planning process - Awareness of the review and monitoring process in the delivery of the STFC SHE Improvement plans	- SHE Advisor/Third party body - Experience of the STFC SHE Improvement plan preparation - Knowledge of previous audit report or experience as part of the audit team
SC08 Travel on Council business	- Awareness of the STFC travel policy and controls - Awareness of the preparation of travel plans and itineraries - Awareness of the FCO travel risk process	- SHE Advisor/Estates team - Experience of the STFC travel plan preparation - Knowledge of previous audit report or experience as part of the audit team
SC09 Working at height	- Awareness of the STFC working at height policy and controls - Awareness of the STFC	- SHE Advisor/Estates team/Technical background - Experience of the preparation of working at height risk

	working on roofs process - Awareness of the emergency and rescue requirements for working at height	assessments - Knowledge of previous audit report or experience as part of the audit team
SC10 SHE Training	- Awareness of the STFC SHE induction and refresher training process - Awareness of the STFC SHE mandatory training process - Awareness of the hazard specific STFC SHE training process	- SHE Advisor/Third party body - Experience of the preparation of a training needs analysis - Knowledge of previous audit report or experience as part of the audit team
SC11 Work in confined spaces	- Awareness of the STFC working in confined spaces policy and controls - Awareness of the STFC permit to work in confined space process - Awareness of the emergency and rescue requirements for working in confined spaces	- SHE Advisor/Estates team/Technical background - Experience of the preparation of working in confined spaces risk assessments - Knowledge of previous audit report or experience as part of the audit team
SC12 Manual handling	- Awareness of the STFC manual handling policy and controls - Awareness of the identification of manual handling hazards - Awareness of the preparation of manual handling risk assessments	- SHE Advisor/Technical background - Experience of the preparation of manual handling risk assessments - Knowledge of previous audit report or experience as part of the audit team
SC13 CDM	- Awareness of the STFC CDM policy and controls - Awareness of the duty holder roles required for CDM projects - Awareness of the notifiable project criteria and the process of notifying the HSE	- SHE Advisor/Estates team/Technical background - Experience of the undertaking of CDM projects - Knowledge of previous audit report or experience as part of the audit team
SC14 Radioactive sealed sources	- Awareness of the STFC management of radioactive sealed sources policy and controls - Awareness of the RPA and RPS roles and their duties - Awareness of the annual source audit process	- SHE Advisor/Radiation safety team - Experience of the local rules associated with the use of radioactive sealed sources - Knowledge of previous audit report or experience as part of the audit team
SC15 Management of contractors	- Awareness of the STFC management of contractors policy and controls - Awareness of the SLC and CSO roles and their duties - Awareness of the STFC SHE information for contractors and the preparation of RAMS	- SHE Advisor/Estates team - Experience of managing contractors - Knowledge of previous audit report or experience as part of the audit team
SC16 Biological safety	- Awareness of the STFC biological safety policy and controls - Awareness of the biological safety officer role and duties - Awareness of the STFC biological safety committees and their scope	- SHE Advisor/Biological safety officer/ Third party body - Experience of the preparation of biological risk assessments - Knowledge of previous audit report or experience as part of the audit team
SC17 Testing and inspection of	- Awareness of the STFC PAT	- SHE Advisor/Electrical

electrical equipment	testing policy and controls - Awareness of the PAT tester and PLO roles and their duties - Awareness of the classification of electrical equipment	engineer/Estates team/Third party body - Experience of the inspection and testing programme for Schedule A and B electrical equipment - Knowledge of previous audit report or experience as part of the audit team
SC18 Control of noise at work	- Awareness of the STFC control of noise at work policy and controls - Awareness of noise action values - Awareness of the noise assessment process and the provision of health surveillance	- SHE Advisor/Technical background/Estates team - Experience of noise hazard identification and assessment - Knowledge of previous audit report or experience as part of the audit team
SC19 Work on buildings	- Awareness of the STFC work on buildings policy and controls - Awareness of building work co-ordinator role and duties - Awareness of the change of use process and subsequent hazard identification	- SHE Advisor/Technical background/Estates team - Experience of buildings, premises, services and infrastructure projects - Knowledge of previous audit report or experience as part of the audit team
SC20 DSEAR	- Awareness of the STFC controlling explosive and flammable gases and dusts policy and controls - Awareness of hazard area classifications - Awareness of the ATEX requirements	- SHE Advisor/Mechanical engineer/Third party body - Experience of the preparation of DSEAR risk assessments - Knowledge of previous audit report or experience as part of the audit team
SC21 Radioactive waste	- Awareness of the STFC radioactive waste policy and controls - Awareness of the RPA, RWA, RWM and RMC roles and their duties - Awareness of the annual radioactive waste material audits process	- SHE Advisor/Radiation safety team - Experience of the STFC radioactive waste disposal process - Knowledge of previous audit report or experience as part of the audit team
SC22 Working with lasers	- Awareness of the STFC working with lasers policy and controls and the roles of overall laser responsible officer, laser responsible officer and laser nominated person, and their duties - Awareness of laser exposure limit values and health surveillance requirements - Awareness of the identification of laser hazards and the designation of laser areas	- SHE Advisor/Third party body - Experience of the preparation of laser risk assessments and the implementation of control measures - Knowledge of previous audit report or experience as part of the audit team
SC23 Working with time-varying EMFs	- Awareness of the STFC working with time-varying EMFs policy and controls - Awareness of the role of EMF protection advisors and their duties	- SHE Advisor/Third party body - Experience of the preparation of specific EMF risk assessments and the implementation of control measures

	- Awareness of the EMF exposure limit values	- Knowledge of previous audit report or experience as part of the audit team
SC24 Occupational health screening and surveillance	- Awareness of the STFC occupational health screening and surveillance policy and controls - Awareness of the site specific occupational health provision of health screening and surveillance - Awareness of the role of appointed doctor and their duties	- SHE Advisor/Third party body - Experience of the preparation of PPQs for new members of staff - Knowledge of previous audit report or experience as part of the audit team
SC25 DSE	- Awareness of the STFC DSE policy and controls - Awareness of the requirements of DSE assessments and the subsequent implementation of controls - Awareness of the DSE training provision	- SHE Advisor/Technical background - Experience of the preparation of DSE assessments - Knowledge of previous audit report or experience as part of the audit team
SC26 Lifting equipment and lifting accessories	- Awareness of the STFC lifting equipment and lifting accessories policy and controls - Awareness of the roles of LOLER manager and LLOs and their duties - Awareness of the requirements for the purchase, design and use of LELA	- SHE Advisor/Mechanical engineer - Experience of the preparation of lifting plans for complex lifts - Knowledge of previous audit report or experience as part of the audit team
SC27 Receipt and dispatch of hazardous substances	- Awareness of the STFC receipt and dispatch of hazardous substances policy and controls - Awareness of the roles of RPA, radioactive substance dispatchers and DGSA, and their duties - Awareness of the dangerous goods packaging requirements	- SHE Advisor/Third party body - Experience of the preparation of hazard assessments of materials with no MSDS - Knowledge of previous audit report or experience as part of the audit team
SC28 Radioactive open sources	- Awareness of the STFC radioactive open sources policy and controls - Awareness of the RPA, RPS, and Health physics group roles and their duties - Awareness of the radioactive open source accounting process	- SHE Advisor/Radiation safety team - Experience of the receipt and dispatch of radioactive open sources - Knowledge of previous audit report or experience as part of the audit team
SC29 Management of ionising radiation at work	- Awareness of the STFC management of ionising radiation at work policy and controls - Awareness of the RPS, RPA, RWA and Health physics group roles and their duties - Awareness of the site radiation emergency response process	- SHE Advisor/Radiation safety team - Experience of the preparation of radiation risk assessments - Knowledge of previous audit report or experience as part of the audit team
SC30 SHE Auditing and inspection	- Awareness of the STFC SHE auditing and inspection policy and controls	- SHE Advisor/Third party body - Experience in the identification of SHE

	- Awareness of the requirements for SHE compliance audits, SHE system audits and SHE inspection tours - Awareness of identifying SHE non-conformance	improvement opportunities - Knowledge of previous audit report or experience as part of the audit team
SC31 Controlled and hazardous waste	- Awareness of the STFC controlled and hazardous waste policy and controls - Awareness of the roles of STFC environment officer and waste disposal officer and their duties - Awareness of the requirements of hazardous waste consignment notes	- SHE Advisor/Technical background/third party body - Experience in the packaging and labelling of waste being transferred for disposal - Knowledge of previous audit report or experience as part of the audit team
SC32 Fire and emergency management	- Awareness of the STFC fire and emergency management policy and controls - Awareness of the roles of building fire managers, building wardens, fire safety advisors and hot work permit issuers and their duties - Awareness of the requirements of PEEPs	- SHE Advisor/Technical background/FSA - Experience in the preparation of fire risk assessments - Knowledge of previous audit report or experience as part of the audit team
SC33 Safety of pressure and vacuum systems	- Awareness of the STFC safety of pressure and vacuum systems policy and controls - Awareness of the roles of pressure/vacuum systems design engineer, nominated engineer, technicians and permit issuers and their duties - Awareness of the requirements of the fitting protective devices to pressure and vacuum systems and the preparation of WSE	- SHE Advisor/Mechanical engineer - Experience in the design or use of pressure and vacuum systems - Knowledge of previous audit report or experience as part of the audit team
SC34 Electrical safety	- Awareness of the STFC electrical safety policy and controls - Awareness of the roles of electrical authorising engineer, authorising person and nominated person and their duties - Awareness of the requirements of electrical distribution system safety rules and procedures	- SHE Advisor/Electrical engineer - Experience in hazard identification of electrical work - Knowledge of previous audit report or experience as part of the audit team
SC35 Asbestos management	- Awareness of the STFC asbestos management policy and controls - Awareness of the site asbestos register and associated asbestos permits to work - Awareness of the roles of building works coordinators and asbestos control officer and their duties	- SHE Advisor/Estates team/third party body - Experience in the preparation of risk assessments for work where there is a likely exposure to asbestos - Knowledge of previous audit report or experience as part of the audit team
SC36 First aid management	- Awareness of the STFC first aid management policy and	- SHE Advisor/third party body - Experience in the preparation

	controls - Awareness of the training requirements of site first aiders and specific treatment requirements for cryogenic and hydrofluoric acid burns - Awareness of the role of occupational health teams, first aiders and contract supervising officers and their duties	of assessments of first aid needs in the workplace - Knowledge of previous audit report or experience as part of the audit team
SC37 COSHH	- Awareness of the STFC COSHH policy and controls - Awareness of the role of COSHH assessor and contract supervising officers and their duties - Awareness of the general principles for working with hazardous substances	- SHE Advisor/technical background - Experience in the preparation of COSHH risk assessments - Knowledge of previous audit report or experience as part of the audit team
SC38 Control of legionella	- Awareness of the STFC control of legionella policy and controls - Awareness of the role of legionella responsible person and the site water safety groups and their duties - Awareness of the requirements of emergency actions in the event of an outbreak of legionella	- SHE Advisor/technical background/Estates team/Third party body - Experience in the preparation of legionella risk assessments and water system registers - Knowledge of previous audit report or experience as part of the audit team
SC39 Static magnetic fields	- Awareness of the STFC static magnetic fields policy and controls - Awareness of the role of static magnetic field protection advisers and occupational health advisors and their duties - Awareness of the exposure limit values and action levels	- SHE Advisor/technical background - Experience in the hazard identification associated with strong static magnetic fields and the preparation of specific EMF assessments - Knowledge of previous audit report or experience as part of the audit team
SC41 Controlling pollution to air, land and water	- Awareness of the STFC controlling pollution to air, land and water policy and controls - Awareness of the authorisations required to carry out discharges and the production of hazardous waste - Awareness of the annual review of the environmental legal compliance registers	- SHE Advisor/technical background/third party body - Experience in the preparation of the register of legal requirements and environmental aspects and impacts - Knowledge of previous audit report or experience as part of the audit team

Minimum requirements for auditor independence

Auditors undertaking SHE compliance audits should have a level of impartiality in their duties in order to address the risks associated with creating biased results. Any conflict of interest, self-interest, self-review, advocacy, intimidation or familiarity with the Departments and processes being audited needs to be reconciled. All auditors should be provided with the freedom from influences that might affect impartiality, including those that could arise from undue pressures or inducements, conflict of interest, and personal, financial, or other non-professional considerations.

It is important that auditors provide specialist support for technical audits, affording their training, knowledge and experience of the subject matter, but need to be fully aware that in doing so they uphold the principles of the absence of bias in their contributions.

Checks should be made at the outset of an audit to ensure that auditor impartiality has been addressed and recorded in each audit report.

Minimum requirements for the peer review of audit reports prior to publication

Prior to publication, audit reports should be peer reviewed by the SHE audit manager and/or the head of SHE Group. The review ensures that the scope coverage has been met, that the content of the audit against the annual audit programme has been evaluated and that standards of evidence are consistent throughout the report. This peer review should be recorded in the audit reports.

A summary flowchart of the audit process is shown below

STFC SHE COMMITTEE	STFC SHE GROUP	AUDITOR	LOCAL MANAGEMENT	AUDITEE

Start

Develop/update annual rolling 5 year audit schedule

Review and approve annual rolling 5 year audit schedule and ensure sufficient resource is available to undertake it

Organise and plan audit programme's delivery through qualified auditors – defining subject and scope of audit

Organise and prepare for audit collecting relevant preparatory material and planning audit dates and times with local management

Opening meeting with local management to ensure scope and subject of audit is clear and understand any specific issues

Undertake audit collecting objective and sampled evidence of conformance to the SHE code(s) being audited

Collect and record observation and evidence of conformance and non conformance

Closing meeting with local management to share findings and ensure no misunderstanding in key findings – no surprises in final reports recommendations

Write up report within 1 month of audit and send to Head of SHE for "Peer Review"

Head of SHE to Peer Review audit report

As appropriate update report and send final version to management for consideration of audit findings.

Review audit findings and agree action plan for non conformances within a month of receipt

Enter audit actions agreed by management in SHE Enterprise. Monitor and report completion of audit actions.

Complete actions to plan updating SHE Enterprise

Review compliance audit programme findings and action completion

End

Suggested prompts for auditors undertaking audits

Audit interview checklist

- Introduce yourself - explain objectives of the audit programme – senior management assurance and code improvement and what code you are auditing.
- Thank them for sparing the time to be audited.
- Remind them that the process is being assessed NOT the people – never compare people or judge them.
- Remind auditees that everything is confidential, but you will be taking some written notes to write up a report and that the report will go to the STFC H&S Consultation Committee and local management.
- Use checklist to keep interview on track
- Use question types appropriately – open questions to seek information, closed questions to clarify your understanding – avoid leading questions.
- Summarise your conclusions to ensure no surprises.
  Don't engage in gossip, argue or be confrontational - remain professional.

Appendix 3 Guidance for instigating SHE System Audits

It is anticipated that SHE System Audits will be undertaken by auditors independent of the STFC employing their own protocols and methodologies.

Their remit will be to: *assess whether the STFC SHE Management System meets STFC needs and legal requirements and identify opportunities for its improvement.*

The use of HSG65 will likely form the basis of such assessments by independent auditors, addressing the following areas:

Policy
- Does the SHE Policy set a clear direction for the STFC?
- Does policy indicate how safety management is organised and who is responsible for SHE at all levels?
- Has it been effectively communicated to staff and others to whom it is relevant?
- Are the SHE policy objectives clear? Can they be achieved?

Organisation
- Do management and staff understand their SHE responsibilities?
- Are staff at all levels involved in SHE related activities or management?
- Is SHE training undertaken?
- Is SHE management a recognised competence within the organisation?
- How is information on hazards and risks communicated to staff and others in their workplaces?
- Are employee representatives involved in the STFC SHE management system?

Planning and implementation
- How are hazards and risks identified and assessed?
- Is there a plan setting objectives, responsibilities and timescales for improvement in SHE performance?
- How has this plan been acted on?

Measuring performance
- Is there a balanced approach to monitoring SHE performance of input (leading) and outputs (lagging) metrics?
- Are SHE incidents reported? Are they reported promptly?
- Are SHE incidents investigated to minimise the potential for their recurrence?
- Are actions identified to minimise incident recurrence acted upon and implemented? Is SHE performance communicated to staff and others?

Auditing and Reviewing Performance
- Is the SHE performance of the STFC and its component parts reviewed and reported?
- Does the organisation establish SHE improvement plans based upon a review of performance? can achievement of the plan be verified objectively?
- Does the performance of the organisation stand comparison with others? And best practise?
- Is the performance of the SHE Management System reviewed systematically through inspection and independent audit?
- Is the STFC engaged in continuous improvement in SHE performance?

Appendix 4   Guidance for managing, undertaking and reporting SHE inspections (SHE Tours)

SHE Inspections, commonly referred to as Safety Tours, form a critical component of the STFC's SHE monitoring regime and focus upon the adequacy of the physical working environment in which staff and others work.

In establishing the inspection programme consider the following factors:
- Geographic areas – *all areas should be subject to an inspection at least every 2 years* – particular areas may warrant inspection at a greater frequency until they are considered under control - in general sites/estate areas outside of areas occupied will be addressed by the inspection programmes of the site estates teams but this should be confirmed where there is uncertainty. At RAL areas immediately outside Departmental buildings would be covered by Departmental inspections;
- Document the programme assigning inspection numbers, inspection leaders and approximate time frames over which the tours should be undertaken;
- Consider the hazards present in particular areas - while offices are by comparison low hazard areas that could be inspected once every 2 years higher hazard areas for example workshops should be inspected more frequently;
- Review the injury and near miss data for particular buildings/areas would this direct particular attention to any given workshop or laboratory; and
- Review the results of previous safety inspection or audits to determine any areas of concern that may warrant higher frequency inspection.

When establishing inspection/tour teams consider the balance of experience available within the team:
- Employ staff who have undergone training detailed in Appendix 1;
- Ensure that at least one team member is independent of the areas to be toured. It is recommended that 'swops' are made between Departments or Divisions to encourage the sharing of learning between Departments and bringing 'a fresh pair of eyes' to particular areas;
- Offer places on the team to locals Trade Union (TU)/employee safety representatives. TUs have legal rights to undertake safety inspections and involving them in an established programme minimises the impact of safety inspections on staff;
- Ensure that one member of the team takes a lead and is responsible for ensuring that the inspection report is completed and issued in a timely manner; and
- Inspections should involve one member of the Corporate SHE team to ensure standards and good practices are shared between Departments.

When conducting and reporting safety inspections/tours consider the following:
- In preparation for the inspection:
  o confirm scope of areas to be inspected/toured;
  o find copies of the last inspection – to check whether previously identified issues are still a problem;
  o find copies of the fire safety plans for areas to be audited from SHE Group showing fire doors, fire alarm call points, fire detectors points and fire extinguisher locations that can be checked; and
  o as appropriate utilise the checklists in this appendix for offices, workshops and/or laboratories. While the use of checklists can be helpful they should not become the focus of attention as any checklist will inevitably not address all issues in all circumstances.
- Consider using digital cameras/phone cameras to take photos of area that require attention, rooms, cupboards etc this is often a far more effective way of describing an issue than using words. Ensure you have some means of recording the location of each image recorded.

- Actively take time to talk to staff and others during inspections to check their understanding of the SHE Management system, for example check they:
    - know how to report incidents and near misses;
    - know about the SHE codes and where to find them;
    - know what to do in the event of a fire or fire alarm;
    - know where the Risk Assessments for their work are located and their content;
    - have received sufficient training to undertake their role safely; and
    - have discussed safety objectives and safety training needs as part of their APR.
- When talking to staff and others make sure to give positive feedback to those who are managing safely well and consider when documenting the safety inspection's findings recording such in the report and/or recording an action to give such feedback to relevant management such that it can be relayed to those seen during the inspection and managers responsible for the area toured.
- Care should be taken when undertaking SHE inspections to ensure that the focus remains on SHE issues – an untidy office, laboratory or workshop is not necessarily a SHE issue. SHE inspections should focus on SHE issues for example fire hazards from accumulated combustible materials or a trip hazards from material stored on floor hindering access or egress rather than an unsubstantiated comment about an untidy office.
- Document the findings of safety inspections as soon as practicable after the event, ideally within 1 working week. Record problems identified and recommended actions, and praise/commendation for areas well controlled and managed. If specific actions have already been agreed with local management as the tour proceeded, then these should be recorded. The reports should be forwarded to relevant responsible management for acceptance or otherwise. Suggested report structure and content is presented below.
- Responsibility for assigning resource to complete actions and completion dates resides with line management. Where possible all actions should be completed within 3 months of the audit.
- Record the audit report in Evotix Assure where the actions can also be set up to facilitate monitoring their completion. Evotix Assure will also allow standard progress reports for safety inspection actions to be set up.

Suggested structure of Inspection Report:

From: Lead inspector
To: Management responsible for area(s) inspected
Cc: SHE Group, inspection team, chair(s) of Departmental safety committee(s), Trade Union safety representatives and Departmental Safety Contact(s)

Inspection Report title

Inspection tour reference YYYY/01
Summary of areas inspected
Date(s) tour conducted
Name of lead inspector and inspection team
Inspection report recipients: management responsible for the areas audited

1. Summary including an overall tour score

Inspection tour scores

Score	Descriptor	Commentary
1	Unsatisfactory	Serious hazards identified requiring immediate shutdown of area and Departmental Director notified. The area is only to be reopened when the faults are corrected, and the area made safe and authorisation given by the Department Director. Areas receiving a score of 1 should be re-toured prior to re-opening and after three months.
2	Significant Improvements Needed	A high number of faults / hazards identified. The department head of an area scoring a two is to be notified and sent the tour report which will include a list of faults. Areas receiving a score of 2 should be re-toured shortly after the three month correction period has expired.
3	Moderate Improvements Needed	Numerous faults / hazards identified. Areas receiving a score of 3 should be re-toured shortly after the three month correction period has expired.
4	Minor Improvements Needed	Two or three minor faults / hazards identified. Areas receiving a score of 4 should be re-toured as planned in the next round of annual tours.
5	Satisfactory	One minor fault / hazard identified. Areas receiving a score of 5 should be re-toured as planned in the next round of annual tours.

2. Recommendations – presented in tabular format to facilitate their consideration by relevant line management, suggested format below and pro forma attached

Area	Room/Lab/ Workshop	Problem identified and recommended action(s)	Mgnt. accepted YES/NO	If NO basis for this decision If YES action(s) planned	If YES	
					Responsibility for action completion	Action completion date
Area 1	Room Nos					
	Room Nos					
	Room Nos					
Area 2	Room Nos					
	Room Nos					
	Room Nos					

Example safety inspection/tour checklists

Inspection/tour checklists should be employed with care while helpful when inspection members are new to their role, excessive use can result in a 'blinkered' approach to inspections/tours and failure to 'stand back' and observe major deficiencies.

The attached example inspection checklists should be considered as examples to be tailored to suit particular applications.

Examples have been developed for typical examples of the following environments:
- Offices;
- Laboratories; and
- Workshops

Example inspection checklist for Offices

1	**Floors** and **stairs** are well maintained, have non-slip surfaces; & corridors are clear of obstacles to allow easy movement of people and equipment under normal circumstances and in the event of an emergency.
2	**Toilets** are clean and adequately illuminated with functional wash basin(s) and hand drying facilities.
3	**Working temperature** is suitable for working, above 16°c and provided with windows in hot weather. Where **portable electric heaters etc** are present are they properly wired & maintained?
4	**Swing doors** provided with vision panels.
5	**Fixtures & Fittings** must be suitable for purpose; free from splinters & sharp edges.
6	**Scissors, knives, pins, razor blades, sharp items** are suitably stored and used safely.
7	**Filing cabinets** are fitted with 'pull out stops' to prevent toppling when more than one draw opened.
8	**Computers, desks & seats** should be free from wear/tear & require **DSE assessments**, Has computer equipment been PAT tested? Is it in date?
9	**Kick stools/step ladders** should be provided for reaching high levels, are they in good order?
10	**Is shelving overloaded?** If heavy materials are stored above head height is there suitable access – kick stools?
11	**Kitchen areas:** has crockery etc been washed; spillages wiped up, no accumulated food wastes, where cookers are present are there fire blankets/extinguishers? Are they in date?
12	Is there a **Risk Assessment** for the area, is it up to date? Is it posted locally, do staff know about it?
13	**Electrical machines etc.** should be tuned off or powered down when not in use.
14	Are **electrical plugs etc** in good repair – no bare wires, broken pugs etc; is the use of **extension cords** limited where possible, no 'daisy chaining' of extension leads or multiple adaptors, to prevent overloading circuits, no trip hazards from trailing cables.
15	All **portable appliances** are within PAT test dates & those that are **directly wired** to the **mains system** on an annual basis.
16	Do staff and visitors know their **fire drill** – location of nearest fire glass break point, how to report a fire **x2222**, where the nearest fire extinguisher is, location of fire assembly areas etc
17	Staff have unrestricted escape routes to fire doors without trip hazards, do the fire doors open?
18	Check that the type & number of **fire extinguishers** are present & in date; have the workforce been trained; are there sources of ignition?
19	Keep **fire doors** closed; **escape routes** should be marked & free from obstruction. Can **fire exits** be easily opened in emergency? Are smoke detectors free from obstruction that may hinder their effectiveness?
20	Is the **fire alarm** audible everywhere?

21	Are all **employees/visitors** aware of their respective First Aiders.
22	Has a **manual handling assessment** been carried out for any significant **manual handling** tasks?
23	Are employees & visitors instructed in the **proper lifting techniques**? Have they been trained?
24	**Wastepaper bins, skips, etc.** particularly in photocopier rooms, should be provided and emptied regularly to prevent the accumulation of combustible materials.

Example inspection checklist for Laboratories

1	Floors, stairs, corridors etc. are well maintained, well lit, provided with non-slip surfaces & free of detritus. All work areas should be left neat & tidy.
2	Ceilings, **benches, shelves** etc. should be clean, clear of equipment & waste materials when not in use. Liquid chemicals are stored **below shoulder height**.
3	There should be no **tripping hazards**; doors are fitted with **obstruction vision panels**.
4	**Fridges, freezers etc.** used for storing samples are clearly labelled; no food or beverages stored in alongside samples
5	**Mechanical pipetting** devices must be used.
6	Flammable liquids segregated from ignition sources; and oxidising materials & clearly labelled. Chemicals stored correctly.
7	An inventory for flammable liquids (flash pt. >60.5°C) and Combustible liquids (f.p.<60.5°C).
8	Computers, desks, chairs, etc. **DSE risk assessments** should be carried out.
9	**Heavy machines** having pulleys, belts, "pinch points" etc; are protectively guarded; if a guard is removed then unit must **not** energise. Electrical plugs are disconnected when not in use.
10	Airborne hazards contained in glove-boxes or fume cupboards, such equipment should be registered and inspected at least 14 monthly.
11	All laboratory workers must be familiar with **SDS sheets for the materials they are working with**; accessible through the SHE website.
12	An **inventory** of all chemicals used in the lab (e.g. SDS) and their suppliers is available?
13	Are **COSHH assessments** carried out? What is the **washing procedure** for flasks, etc? should chemical showers be available?
14	All liquid chemicals stored in **drums/IBCs** shall be labelled; in designated bunded areas.
15	**Separate containers** must be made available for broken glass, metals, oil & batteries.
16	Ensure that waste cultures are **autoclaved**. Decontaminate/clean area at the end of the working day.
17	A chemical spill-kit available for each lab; calcium gluconate should be used for hydrofluoric acid, mercury spill kit for mercury.
18	**Acids** must be separated from caustic chemicals and poisons from acids. Chemicals are stored & used away from eating/drinking/smoking areas; storage areas must be labelled.
19	**PPE, safety shoes and gloves, etc.** provided, worn & stored correctly. Staff understand the use and limits of the **PPE** they use. No open-toed sandals worn.
20	**Hearing protection** for noisy areas;
21	Work surfaces are free from clutter/equipment; spillages/accidents cleaned up promptly.
22	Employees/visitors familiar with **fire** instructions, location and types of fire extinguishers – in date extinguishers. Fire exits; risk assessments; available?
23	Keep fire doors closed; escape routes should be clearly marked & free from obstruction.
24	**Alarm** audible everywhere? Fire exits should be easily opened, identifiable & well lit.
25	**First Aid** kit; & eyewash unit are available; everybody knows their individual First Aiders.

26	Temporary cables are covered where a **tripping hazard** occurs. Water in proximity?
27	Are **electrical plugs etc** in good repair – no bare wires, broken pugs etc; is the use of **extension cords** limited where possible, no 'daisy chaining' of extension leads or multiple adaptors, to prevent overloading circuit..
28	All **portable appliances** are within PAT test dates & those that are **directly wired** to the **mains system** on an annual basis.
29	Overloaded circuits, incorrect use of adapters etc. may require use of an extension bar.
30	Operators of **waste-controlled areas** remove waste & provide adequate work bins/skips.
31	Are heavy loads shared; ensure direction is visible; which if any, **lifting aids** is provided? Have manual handling assessments been carried out? Are employee/visitors trained?
32	Have **risk assessments** been carried out for each type of machine? Are staff aware of them, have actions been completed?
33	Any **machine areas** are suitably marked; & kept free of waste, materials & hazards.
34	Are laboratory sink drains marked to indicate what can be placed in them?
35	Is signage present at the area entrance, indicating anything which may pose a risk to members of security and emergency services entering the area in an emergency (possible oxygen depletion, high voltage, radiation source etc.)?

Example inspection checklist for Workshops

1	**Floors/stairs, ceilings, walls, benches, shelves etc.** free from debris, etc. & wear/tear.
2	No **non-slip surfaces**; no tripping hazards; **swing doors** have restricted vision panels.
3	No obstructions - wastes; & suitable **width** for easy movement of **people/equipment**.
4	**Lighting** is free of glare/poor lighting, windows can open.
5	**Heating** is satisfactory; if seated persons exposed to a minimum of <16°C after 1st hour.
6	**Fixtures & fittings** are suitable for the purpose; free from splinters & sharp edges.
7	**Flammable liquids** away from ignition/electrical sources (flash pt. >60°C); clearly labelled; shower & eyewash unit available; inventory should be carried out & displayed.
8	**Liquid or fluid chemicals** should be stored below 4 litres (by volume); stored below shoulder height; & signage is required for gases/flammables.
9	**Computers, desks, chairs, etc.** – they must have **DSE** risk assessments for their users
10	**Heavy machines** having "pinch points" etc. are protectively guarded; if a guard is removed then unit must <u>not</u> energise. Machines turned off/powered down when idling.
11	**Limited access/exclusion zones** are clearly marked; hazardous emissions only within the **capture zone of hood; LEVs** regularly tested; warning notice should be displayed.
12	Ensure that **method statements** (& risk assessments.) **for contractors; safe systems of work; work permits;** & **hazard warning labels**; are completed by the manager.
13	A **notice board** with the person's name on it; emergency first aid; & fire arrangements.
14	Ensure **road markings, speed limits and all traffic routes** are explained & understood.
15	Are **protective guards** available to the pillar drills; grinders; lathes; CNC machines etc.?
16	Are **risk assessments** carried out for each type of machine? Is **PPE** necessary?
17	Is access to alarms; stop/plant controls; & **safety equipment** unobstructed?
18	**Drains** are marked on **plans** (trade waste-blue; surface water-green; ponds; & canals).
19	Are environ/safety **emergency control** equipment in place; showers/spillage containment?
20	The **SDS** must be available. Are **COSHH** risk assessments carried out?
21	Evaluate all **labels** & ensure **chemicals/biological samples** are correctly stored.
22	Liquid chemicals to be stored in drums, tanks & Intermediate Bulk Containers (IBCs), labelled & placed in bunded areas.

23	**Storage areas** should be labelled for usage & fire purposes. Flammables (solvents) are separated from oxidising materials & acids/caustic chemicals from poisonous materials.
24	Ensure laboratory equipment is safely operated, stored & maintained and experiments in extract hoods should be **labelled** & **unobstructed**. Chemicals are kept to a minimum vol.
25	**Vacuum pumps** are equipped with a pulley guard and should be discharged outside.
26	Lab coats, safety glasses/goggles, thermal & hearing protection, prescriptive shoes etc. should be **worn**. No open **toed shoes or sandals etc**. are allowed.
27	**Respiratory wearers** should be fitness tested, personalised & registered with the lab.
28	Employees/visitors/contractors are familiar with fire instructions **(training)**; & aware of assembly points? Keep **fire doors closed** & escape routes marked & free of obstruction.
29	Is fire alarm audible; fire exits marked & easily opened; know a **klaxon** from a **fire drill**?
30	Fire extinguishers & First Aid kits are readily available and in date; **smoking** available in workshops?
31	Are **flammable materials** stored in a metal cabinet; is **waste** removed regularly?
32	Electrical cords, plugs, etc. – broken, in bad repair? On a regular **maintenance service**?
33	**Portable electric heaters, etc.** - properly wired with appropriate earthing devices; circuit breakers; & three prong plugs; put through a portable appliance test (PAT). **Out-of-date**?
34	**Directly wired appliances** to the mains system are placed on an inventory checklist.
35	Any overloaded circuits; **damaged cables**; worn leads; or the **incorrect** use of **adapters**.
36	**Fixed equipment** are hard wired to the mains system; **computers** use an extension bar.
37	Any **waste** shall be removed in a controlled manner and decontaminated prior to disposal?
38	Adequate **bins/skips** for areas should be provided and emptied on a regular basis.
39	A risk assessment been carried out for **manual handling** task? Are heavy loads shared?
40	Is signage present at the area entrance, indicating anything which may pose a risk to members of security and emergency services entering the area in an emergency (possible oxygen depletion, high voltage, radiation source etc.)?

Appendix 5 Audit checklist

Ref	Item	Rating	Comments
1 (Section 4.1.2)	Has STFC SHE Management Committee reviewed the findings of the previous year's compliance audit programme?		
2 (Section 4.1.1)	Has STFC SHE Management Committee approved the annual compliance audit programme?		
3 (Section 4.2.6)	Has a system audit been conducted in the last 5 years?		
4 (Section 4.2.1)	Is the compliance audit programme based on an assessment of risk? And encompass all STFC sites?		
5 (Section 4.2.1)	Does the programme deliver compliance with auditing all codes at all sites within 5 years?		
6 (Section 4.2.2) (Section 4.4.1)	Are all compliance audits undertaken by trained auditors?		
7 (Section 4.2.4)	Have all actions agreed by management been completed to plan?		
8	Where recommended actions have not been completed is there a recorded basis for this decision?		
9 (Section 4.3.1)	Does each Department have a programme of safety inspections/tours?		
10	Are all areas inspected at least annually?		
11 (Section 4.3.2) (Section 4.4.1)	Are inspections conducted by trained staff?		
12 (Section 4.3.2)	Have trade union safety representatives been involved?		
13 (Section 4.3.4)	Have actions arising from safety tours agreed by management been completed to plan?		
14 (Section 4.3.4) (Section 4.3.5)	Are findings of safety tours discussed at Departmental safety committees? And used to inform Departmental safety plans		

15 (Appendix 2)	Have audit checklists been employed in preparing for compliance audits and appended to audit reports providing an audit trail for the audit process?		

Appendix 6 Document Retention Policy

Records Established	Minimum Retention Period	Responsible Record Keeper	Comments / Justification
SHE Audit Reports	Current + 5 years	SHE Group	Except where covered by specific code requirements