**Defence
Infrastructure
Organisation**

JSP 375
HEALTH & SAFETY HANDBOOK
VOLUME 3

CHAPTER 1

POLICY

1.   AUTHORITY

1.1.   Joint Service Publication (JSP) 375 – MOD Health and Safety Handbook is sponsored by 2nd Permanent Under Secretary (PUS) as Process Owner for Safety (and Sustainable Development and Environmental Protection). Volume 3 of JSP 375 is compiled and maintained by Defence Infrastructure Organisation (DIO) and issued by the Safety, Sustainable Development & Continuity (SSD&C) Division, under the authority of the Occupational Health, Safety and Environment Board (OHSEB) as the relevant domain Functional Safety Board.

1.2.   The implementation and use of JSP 375 Volume 3 is mandatory on the defence estate. Where MOD appoints a Maintenance Management Organisation (MMO) the MOD is to specify in the Conditions of Contract that the contractor is to comply with JSP 375 Volume 3.

1.3.   DIO, through the Senior Authorising Authorities (SAAs), shall provide assurance for the activities to the Top Level Budget (TLB) Holders. Trading Fund Agencies (TFA) are required to provide a similar level of assurance, this may be provided by DIO subject to a Service Level Agreement (SLA).

1.4.   JSP 375 Volume 3 is also to be fully implemented on the MOD Estate (Overseas), with the exception of Military Works Areas[1]. At overseas locations, where any deviation from, or local version of, JSP 375 Volume 3 is necessary, agreement for such deviations or local versions must be sought via the DIO Coordinating Senior Authorising Authority (CSAA) in accordance with Para 1.5 below. Legally enforceable local regulations are to override any conflicting requirements of JSP 375 Volume 3.

1.5.   Where any deviation from JSP 375 Volume 3 is necessary, the Authorising Engineer (AE) is to obtain written agreement for such deviation before it is implemented. Requests for deviations should be routed via the DIO CSAA who will coordinate any response from the relevant SAA(s).

2.   STRUCTURE

2.1.   JSP 375 Volume 3 is the MOD Safety Management System for defined significant risk activities on the defence estate. It contains rules and procedures which provide MOD's safe systems of work for the management and control of these activities. In addition to enabling the MOD to effectively manage and control significant risk activities in a cohesive and consistent manner, it also serves to ensure that the requirements of UK legislation are being met and is specifically intended to aid duty holders in the discharge of their responsibilities by ensuring suitable and sufficient competent persons are appointed. It consists of seven chapters:

    a.   Chapter 1 Policy.
    b.   Chapter 2 Common Requirements.
    c.   Chapter 3 Electricity.
    d.   Chapter 4 Mechanical Systems.
    e.   Chapter 5 Petroleum.
    f.   Chapter 6 Confined Spaces.
    g.   Chapter 7 Working at Height.

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[1] Military Works Areas are covered by Defence Information Note 2011/DIN 06-11

2.2   JSP375 Volume 3 is aligned to the structure and principles of recognised safety management systems (e.g. HSG65 and OSHAS18001) as illustrated in Figure 1.
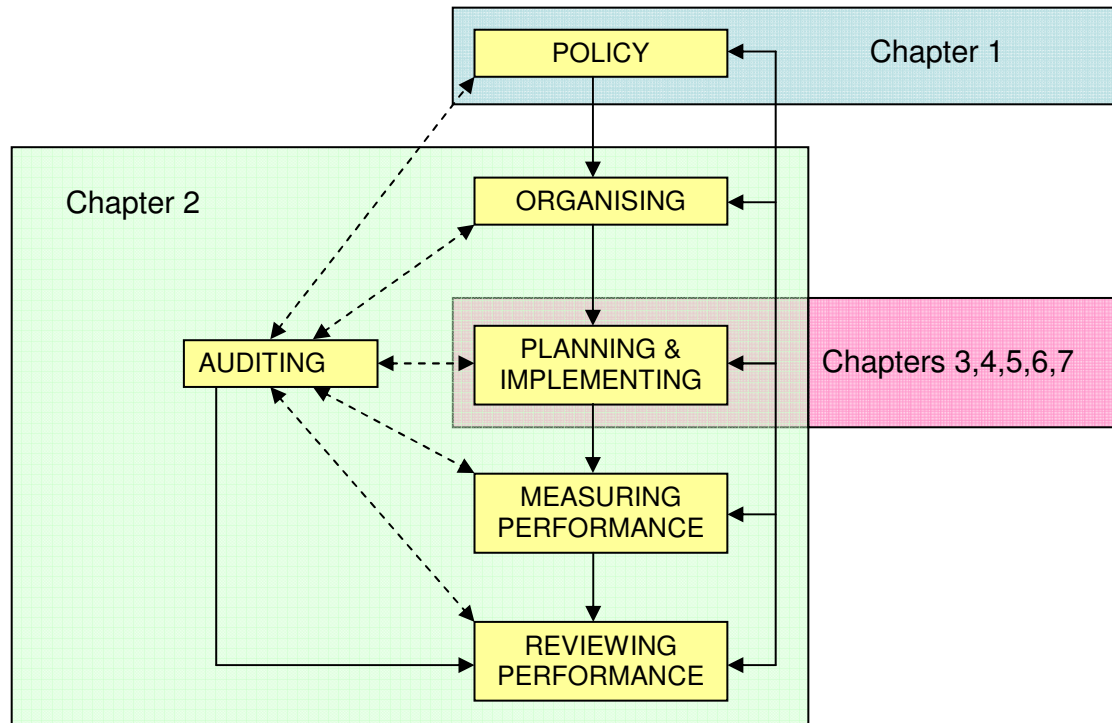

Figure 1 – Elements of Health and Safety Model[2]

2.3   Chapter 1 defines the Policy for the use of JSP 375 Volume 3. Chapter 2[3] identifies the activities, roles, procedures and processes that are necessary to meet the requirements of the Safety Management System (SMS). Chapters 3 to 7 define the requirements specific to the significant risk areas covered by JSP 375 Volume 3.

3.   MAINTENANCE

3.1   JSP 375 Volume 3 will be maintained on the MOD intranet and internet and will be revised on an as-required basis. All hard copies of JSP 375 Volume 3 are uncontrolled. To check the latest amendment status, reference is to be made to the following intranet or internet sites:

    a.   *JSP375 Volume 3 Intranet Home Page*

    b.   *JSP375 Volume 3 Internet Home Page*

4.   AMENDMENT RECORD

4.1   Amendments will be managed by DIO and routed through SSD&C as Secretariat for the OHSEB who will ensure they are staffed with TLB and TFA duty

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[2] Taken from "Successful Health and Safety Management" HSG65 HSE Books
[3] Chapter 8, formerly Tuition Training and Site Familiarity, has now been subsumed into Chapter 2

holders. Major amendments and new inclusions will be submitted for endorsement at the appropriate level. These will be announced by Defence Instructions and Notices (DIN) under Channel 6 – Safety, Health, Environment and Fire. A DIO Policy Instruction will be raised to publicise outside of MOD.

5.   CHANNELS FOR COMMENT

5.1   Enquiries or proposed changes are to be directed to the DIO CSAA who will coordinate a response from the relevant SAA and/or CAE Steering Group.

5.2   General enquiries, amendments or proposed changes are to be addressed to:

> The Coordinating Senior Authorising Authority,
> Defence Infrastructure Organisation,
> St George's House, Kingston Road,
> Sutton Coldfield,
> West Midlands B75 7RL
> Telephone: 0121 311 3770

6.   DISCLAIMER

6.1   Nothing contained within Volume 3 of JSP 375 removes the responsibility of any duty holder to comply with health and safety legislation and MOD policy.

CHAPTER 2

COMMON REQUIREMENTS

CONTENTS

1. ORGANISING

1.1. Control – Organisational Hierarchy

a.   The administration of the Safety Rules and Procedures contained within JSP 375 Volume 3 is managed through a hierarchical structure, with some of the roles being carried out within the MOD and some within the industry partners engaged to undertake the maintenance and upkeep of the estate.

b.   The Chief Environmental and Safety Officer (CESO) DIO provides the necessary link and focal point with the Safety, Sustainable Development and Continuity (SSD&C) Division and provides the route for assurance up to the Occupational Health, Safety and Environment Board (OHSEB).

c.   The Coordinating Senior Authorising Authority (CSAA) is responsible for maintaining the 'common requirements' elements of Volume 3 and ensuring coordination and cooperation across the Senior Authorising Authorities (SAAs) and their deputies (DSAAs).

d.   The Senior Authorising Authority (SAA) community, who sit within DIO Professional and Technical Services (PTS), provide the necessary specialist input to compile and maintain the seven chapters of Volume 3.

e.   The Maintenance Management Organisation (MMO) is the organisation responsible for planning, organising and managing the operation, maintenance and repair of equipment and may include the design and construction of new works. The MMO hold the duty to enforce JSP375 Volume 3 within the scope of their deliverables and will discharge this duty by appointing Authorising Engineers (AEs) and Authorised Persons (APs). The MMO may be a Contractor, DIO or Military.

f.   The Coordinating Authorising Engineer (CAE) coordinates the actions of Authorising Engineers (AEs) for the MMO and acts as focal point for health and safety information and other guidance.

g.   An AE is a person who has been deemed competent by the SAA, or their Deputy (DSAA), and appointed by the MMO to oversee the application and provide the necessary assurances of adequate implementation of a specific discipline (Chapter) within JSP 375 Volume 3. The AE community provide the primary audit function within the Safety Management System along with high level implementation of the rules and procedures and assessment of competence across an estate delivery area.

h.   The Safe Systems Coordinator (SSC) is the site or site cluster[4] focal point for the Authorised Persons (APs) appointed by the MMO on matters related to health and safety, particularly on matters relating to the prevention of danger associated with disciplines defined under JSP 375 Volume 3.

i.   An AP is a person who has been deemed competent by the AE and appointed by the MMO to undertake the practical implementation of a specific discipline (Chapter) of JSP 375 Volume 3 for the defined area of appointment.

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[4] In areas where unmanned sites or for low activity/maintenance frequency a single cluster role may be appropriate

The APs implement the rules and procedures at site level and are responsible for the control of activities through the issue of Safety Documentation.

j.   The Person in Charge (PiC) is a person who has been assessed as competent for the task, registered as a Skilled Person[5] (SkP) and is in receipt of written authority from the relevant AP.

k.   A SkP is a person who has been assessed as competent for the task and registered as such by the AP to ensure that the safety rules and procedures are adhered to for work activities[6] in accordance with a specific discipline (Chapter) of JSP 375 Volume 3. The SkPs undertake a wide variety of tasks on the many establishments covered by JSP 375. The SkP can be either a single unsupervised operative, or a supervisor for a team of operatives in any work area.[7]

1.2.   Control – Roles and Duties

1.2.1. Coordinating Senior Authorising Authority (CSAA)

a.   The Coordinating Senior Authorising Authority (CSAA) is responsible for maintaining the 'common requirements' elements of Volume 3 and ensuring coordination and cooperation across the Senior Authorising Authorities (SAAs) and their deputies (DSAAs) and is to act as:

i.   focal point for the application of JSP 375 Volume 3 on the defence estate.

ii.   custodian of JSP 375 Volume 3.

iii.   advisor to Head PTS on the appointment of SAAs.

iv.   adjudicator and/or arbitrator in issues concerning JSP 375 Volume 3.

v.   primary interface with SSD&C (through CESO DIO) on matters concerning JSP 375 Volume 3.

vi.   champion for the improvement and development of JSP 375 Volume 3 and the Continuing Professional Development (CPD) of the SAA/AE community.

b.   The CSAA is to:

i.   maintain professional competence.

ii.   provide advice on the appointment of SAAs (may also provide independent support to SAAs on the appointment of DSAAs)

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[5] In JSP 375 Volume 3 Chapter 7 a Skilled Person is referred to as a Skilled Climber.
[6] In accordance with Health and Safety Management Regulations
[7] Examples would be Fitters, Electricians or cable jointer mates or trainees; the mate/trainee normally will be working to the instructions of the SkP.

iii.   be the custodian of JSP 375 Volume 3 on behalf of SSD&C and ensure its applicability, currency and ensure that it is updated when required.

iv.   review the results of monitoring and audit reports by the SAA, CAE & AE communities on the implementation of JSP 375 Volume 3 and report to the appropriate authority any deficiencies identified.

v.   undertake audit of process and compliance.

vi.   maintain and improve the Safe Systems processes.

vii.   provide reports to the DIO Management Board and other stakeholders as required.

viii.   approve and issue of JSP 375 Volume 3 related Policy Instructions/Notices.

ix.   oversee SAA steering groups and workshops at appropriate intervals.

x.   liaise with other government departments, the Health and Safety Executive and non-government organisations.

1.2.2. Senior Authorising Authority (SAA)

a.   An SAA is to:

i.   be the focal point for the management & implementation of the chapter of JSP 375 Volume 3 applicable to their specialism.

ii.   be the custodian of the chapter of JSP 375 Volume 3 applicable to their specialism.

iii.   provide the necessary assurance for JSP 375 Volume 3 related activities applicable to their specialism.

iv.   be the Adjudicator and/or Arbitrator in issues concerning their specific chapter within JSP 375 Volume 3.

b.   An SAA is to:

i.   maintain professional competence.

ii.   undertake suitability assessments of AEs appropriate to their discipline and issue Licences as appropriate.

iii.   undertake a review of an AE's implementation of the audit process. (See SAA Review of AEs).

iv.   undertake SAA Inspections where required (see Section 5.2.2).

v.   liaise with CAEs in the development of individual AE training plans where appropriate.

      vi.   report to the CAE where concerns associated with AEs are identified.

      vii.   maintain and improve the chapter of JSP 375 Volume 3 applicable to their discipline.

      viii.   maintain a register of AEs for whom they have issued AE Licences.

      ix.   notify the CSAA of any agreed deviations of the requirements of JSP 375 Volume. 3.

      x.   ensure that all AEs are made aware of any information or notices relevant to their systems/areas as soon as is reasonably practicable, and ensure that they receive copies together with any appropriate advice to prevent danger.

      xi.   ensure any amendments to JSP 375 Volume 3 are brought to the attention of and are understood by all AEs.

      xii.   undertake incident/accident investigations as may be required.

      xiii.   maintain a personal logbook as described in Annex B to this chapter.

1.2.3. Deputy Senior Authorising Authority (DSAA)

a.   The DSAA is to provide direct support to the SAA in the maintenance and upkeep of their relevant chapters and the implementation of the SAA's responsibilities with respect to that chapter.

b.   The DSAA is to:

      i.   maintain professional competence

      ii.   undertake suitability assessments and recommend licensing of AEs to the SAA.

      iii.   undertake reviews of AE Audit processes (see Section 5.1.3).

      iv.   undertake SAA Inspections on behalf of the SAA where required (see Section 5.2.2).

      v.   maintain and improve the chapter of JSP 375 Volume 3 applicable to their specialism

      vi.   provide support to the SAA applicable to their discipline.

      vii.   act on behalf of the SAA when required.

      viii.   undertake incident/accident investigations as may be required.

      ix.   maintain a personal logbook as described in Annex B to this chapter.

1.2.4. Coordinating Authorising Engineer (CAE)

    a.   The CAE is responsible for ensuring that there are suitable arrangements in place for the implementation of JSP 375 Volume 3 within their areas of responsibility.

    b.   The CAE is to:

        i.   ensure that there are sufficient numbers of AEs appointed to cover a delivery area including suitable and sufficient deputising arrangements. This must include an assessment of the AE's workload, taking into account the numbers and geographical area of AP appointments within the AE's control.

        ii.   ensure that all sites are subjected to the necessary audit regime to provide the required assurance as to the coverage of implementation of JSP 375 Volume 3.

        iii.   ensure, through discipline AEs, that there are sufficient numbers of APs appointed to cover a delivery area including suitable and sufficient deputising arrangements.

        iv.   act as the focal point to the Senior Management within the MMO and AE teams in all matters relating to JSP 375 Volume 3.

        v.   ensure that there are suitable and sufficient processes in place within their organisations for the continued competence and Continued Professional Development (CPD) of the AEs under their control.

        vi.   provide a programme of Audits to the CSAA as detailed in 7.4.3.

1.2.5. Authorising Engineer (AE)

    a.   The AE provides the necessary assurances that JSP 375 Volume 3 is being appropriately implemented at site level through the AE Audits undertaken and the Assessment of Competence of the Authorised Persons.

    b.   The AE is to:

        i.   issue Certificates of Competence to suitable prospective APs identified by the MMO, for the systems and installations on the site or sites within the area for which the AE has been appointed, in order that the MMO can appoint suitable and sufficient APs to provide the necessary cover and service requirement.

        ii.   approve and monitor training plans for APs.

        iii.   be satisfied that prospective APs:

            1)   meet the AP suitability criteria for appointment.

            2)   meet the training requirements and are familiar with the equipment, systems and locations for which they will be responsible.

> 3)   are able to demonstrate their competency. (Possess adequate skills, training, knowledge understanding and familiarity of the equipment, systems, and locations, for which authorisation is envisaged).

iv.   report to the CAE and MMO any deficiency in the number of trained and competent APs which may impair the provision of the necessary cover. The report is to include recommendations in programme/plan form of the corrective action to be taken to redress any deficiencies identified.

v.   define in writing, using drawings and diagrams as appropriate, the exact extent of the systems and installations for which the AP is responsible, keeping appropriate records.

vi.   ensure that all points of demarcation and operational interface with other Authorities are clearly identified and recorded.

vii.   maintain a register of all APs assessed and approved by the AE and subsequently appointed.

viii.   review the competence, performance and documentation of each AP in accordance with Section 7.4.

ix.   take appropriate action if the AE considers that the APs activity and experience over the period has not been sufficient to maintain the required level of competence and familiarity.

x.   recommend relevant AP technical and procedural training in accordance with the AEs assessment detailed in Section 3.4.

xi.   suspend the appointment of an AP, record the reason(s) for the suspension and recommend withdrawal of the appointment, if considered necessary.

xii.   ensure that all APs are made aware of any information or notices relevant to their systems/areas as soon as is reasonably practicable, and ensure that they receive copies together with any appropriate advice to prevent danger.

xiii.   ensure any amendments to JSP 375 Volume 3 are brought to the attention of and are understood by all APs.

xiv.   notify the appropriate SAA of any known information or notices issued by a manufacturer, supplier or other third party applicable to equipment, systems or in locations, having significant risk within the areas of the appointment.

xv.   formalise operational restrictions on equipment or areas that may arise out of specific equipment defects or arising from maintenance and as may be notified by APs.

xvi.   investigate, with reference to Section 5.2.3 of this chapter, all significant incidents reported involving equipment, systems, installations and locations within the area of appointment.

xvii.   agree with the appropriate SAA any proposed deviation from JSP 375 Volume 3 before implementation following the completion of a suitable RA,. The 4Cs[8] Duty Holder (DH) (or his nominated representative) is to be advised, in writing, of any such agreed deviations from JSP 375 Volume 3.

xviii.   define the auditable system for management of all access keys on each site, these arrangements are to be documented in the document registers.

xix.   fulfil additional discipline specific duties as described within other chapters of JSP 375 Volume 3.

xx.   maintain a personal logbook as described in Annex B to this chapter.

c.   An AE is not normally to undertake AP duties within their own area of appointment as an AE. In exceptional circumstances, the duties of an AP within the area of appointment as AE may be assumed for a pre-determined limited period to be agreed by the CAE and notified to the appropriate SAA. Where the AE assumes the duties of an AP they are not to undertake the subsequent audit in that area.

1.2.6.   The Safe Systems Coordinator (SSC)

a.   The role of the SSC rests with the senior MMO site services manager or supervisor unless this is formally delegated within the site technical team for specific functions.

b.   The SSC is to Coordinate the requirements for APs at each site in relation to the normal planned and reactive work activities being undertaken or any project works which may interface with systems or areas under the control of the MMO.

c.   The SSC is to ensure that:

i.   defined lines of communication are in place for APs. Where sites do not have resident APs the requirements for AP support is notified in due time to the appropriate management teams[9] such that adequate planning and resource can be attributed to each activity.

ii.   formal lines of communication are in place with site 4Cs DH and other authorities, that registers of all relevant contacts are in place as befitting the nature of activities and identified risks on the site[10].

iii.   maintenance of, or access to, a list of all relevant appointed APs and SkPs.

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[8] As described in Leaflet 34 of JSP375 Volume 2.
[9] It is not intended to outline the actual mechanism of Coordination within this document as the arrangements within each MMO may vary. It will be necessary to record all such off site interfaces in elements of the site safety and emergency plans managed by the MMO.
[10] Duty Holders include the 4Cs representative, Building or Area custodians, Operating Authority, Hazardous Area Managers and other interfaces which include Aquatrine Service Providers (ASPs)

iv.   processes are in place to assure that SkPs attending site are working within the boundary of their authority and competence. Any dispute in such matters is to be escalated to the AP or AE.

v.   registers and processes are being maintained in relation to all equipment that is subject to test or calibration.

1.2.7. Authorised Person (AP)

a.   The AP is the individual responsible for the practical implementation and application of JSP 375 Volume 3 for the systems, installations and locations for which they have been appointed. The AP is to:

i.   ensure, so far as is reasonable and practicable, that all personnel observe and comply with the requirements of the relevant chapter of JSP 375 Volume 3.

ii.   issue and cancel safety documentation in accordance with the relevant chapter of JSP 375 Volume 3. In the case of a dispute, the AP is to stop the work or test and refer the matter to the AE for adjudication

iii.   withdraw Safety Documentation if the PiC fails to follow JSP 375 Volume 3, or if an unexpected hazard arises

iv.   ensure any safety and test equipment required to undertake the task is in a suitable condition and is appropriately certified and/or calibrated.

v.   maintain a personal logbook as described in Annex B to this chapter.

vi.   within the scope of the systems under the APs control, assess the competency of SkPs as described in Section 3.1.7 of this chapter prior to the issue of any safety documentation.

vii.   update records and registers of SkPs following any activity or assessment of a SkP as appropriate.

viii.   fulfil additional discipline specific duties as described within other chapters of JSP 375 Volume 3.

1.2.8 Person in Charge (PiC) and Skilled Person (SkP)

a.   In order to act as a PiC an individual must have been assessed as competent by the AP for the work or task, registered as a Skilled Person[11] and be in receipt of written authority from the AP (by the issue of a safety document).

b.   The PiC is to:

i.   follow the AP's instructions and work in accordance with the appropriate sections of JSP 375 Volume 3. The PiC is to take all safety measures necessary to prevent danger, injury and damage to equipment.

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[11] For Chapter 6 PiC must be assessed as competent by the AP and included on PiC Register.

ii.   not leave the place of work until the work or test is completed. If the PiC has to leave the place of work, the work or test is to be suspended and adequate safety precautions taken to prevent danger. The work or test is not to be resumed until the PiC has returned to the place of work and deemed it safe to continue.

iii.   fulfil additional discipline specific duties as described within other chapters of JSP 375 Volume 3.

2. Cooperation and Communication

2.1. Key Interfaces

2.1.1. In order to ensure that JSP 375 Volume 3 is fully incorporated into the MOD Safety Management System[12] there are a number of key positions on an establishment or within a particular area who are required to interface with the requirements and implementation of Volume 3. The responsibilities of these positions are defined elsewhere[13] but are summarised here for clarity.

2.1.2. The Commanding Officer (CO) / Head of Establishment (HoE) is required to:

a.   carry out and maintain an integrated Site Risk Assessment and produce site hazard registers which are to be available to all relevant parties.

b.   put arrangements in place to ensure proper control, cooperation, coordination and communication. The arrangements are to:

i.   specifically address issues associated with safe systems of work which could impact on others e.g. road closures, site wide radiography and power outages.

ii.   highlight any hazard or activity creating a risk that is not under the CO/HoE control.

iii.   notify known site hazards prior to the commencement of any activity.

iv.   include details of formal delegations of responsibility and accountability for site, building and maintenance operations where appropriate.

c.   appoint a site 4Cs DH in accordance with JSP 375 Volume 2 Leaflet 34.

d.   establish suitable arrangements to deal with emergencies on the site.

e.   provide all contractors with an up to date briefing, relevant to their work at the site, prior to work commencing.

2.1.3. Site Estate Team Leader (SETL) / Site Estate Authority Team (SEAT)

a.   The roles and duties of the SETL and the SEAT are defined in detail by JSP 435 Leaflet 1-5 Annex A.

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[12] Defined in JSP 815 - Defence Environment and Safety Management
[13] Defined in JSP 375 Volume 1, JSP 435 – Defence Estate Management and, JSP 815

> b.   The SETL is to act as the focus for ensuring, so far as is reasonably practicable, the health, safety and welfare of their staff and others affected by estate activities.

2.1.4.   The Deputy Hd Ops (Estate Management) and/or DIO Project Managers are to:

> a.   put in place effective arrangements to ensure that prior notification of all contract work is given to the SETL and MMO to allow for the provision of suitable and sufficient information, instruction and arrangements necessary to enable the contractual operations to be performed safely and without risks to health and safety.

> b.   put in place suitable systems and procedures for all contracts placed on their behalf to establish that the appointed contractors and their sub-contractors are competent and able to perform their tasks safely.

> c.   require JSP 375 Volume 3 to be implemented by their contractors and their sub-contractors when they operate on the MOD estate unless, the work/project can be clearly ring fenced, by a defined boundary, and control can be fully handed to the contractor in accordance with Section 2.2.2.

> d.   prior to work commencing on site, require their contractors, in conjunction with the CO/HoE to receive an up to date safety briefing relevant to the contracted undertaking.

> e.   ensure that safety information that is obtained by their contract, which is relevant to the safety of the site or persons on or off the site, is made available to the CO/HoE.

> f.   provide all CO/HoEs with contact details relevant to their project and agree with each the areas of accountability for health and safety on the site.

> g.   cooperate with the CO/HoE by, where appropriate, provide representation to the Site Safety Committee.

2.2. Allocation of Responsibilities and Demarcation Agreements

2.2.1.   Where there is a division of responsibilities within the MOD or between the MOD and others, the AP is, on matters relevant to the APs duties, to cooperate and coordinate with the other party (or parties) as necessary to prevent danger.

2.2.2.   Where MOD does not have control of the risk, i.e. where the work/project is clearly ring fenced by a defined boundary, the contractors are to comply with all relevant statutory instruments and are responsible for ensuring the safety of all persons within the defined and contracted boundary of the works and are responsible for managing the associated risks that may arise. The contractor is to operate a documented safe system of work in line with best practice, in accordance with the latest edition of the Management of Health and Safety at Work Regulations. In exercising its duty of care, MOD must cooperate and coordinate activities with the contractors.

2.2.3.   Where a Contractor is responsible for part of a facility or an installation which may not be ring fenced by a defined boundary, the MOD through the appropriate authorities or Project Manager, is to cooperate and coordinate with the existing MMO

in establishing temporary demarcation points. These are to be formally agreed in writing and supported with detailed plans or drawings. Copies of demarcations agreements with drawings showing demarcation points are to be sent to the AP for retention within the appropriate document registers.

2.2.4.   Where a clear operational and maintenance responsibility exists, detailed by either scope of contract, supply agreement or within a project responsibility document and where identification of any shared equipment or access is clear and unambiguous there will be no requirement for any additional agreements to be put in place. A copy of the appropriate documentation referred to above is to be annotated by the appropriate AE and held in each system document register.

2.2.5.   Where clarification concerning ownership and/or operation or where controlled access to equipment or areas is required, then the appropriate 'authority' should supply this in writing (copies of any correspondence being retained in document registers) and as required fit signage and/or labelling together with unique authority locks to the appropriate equipment or access to areas.

2.2.6.   The AE is to advise and agree on the arrangements and documentation for the demarcation of responsibilities and is to assist in the liaison with the third party's responsible person or authority. Where a separate demarcation document is to be drawn up then the nominated responsible person for each side of the demarcation is to sign and date the agreement. A copy of the signed demarcation agreement is to be held by each authority.

2.2.7.   Each demarcation of responsibility is to be precisely detailed on appropriate plans, operational diagrams, schematic drawings and where appropriate electrical mimic diagrams. In all cases, the line of demarcation is to define a working area which can be completely isolated from the rest of the site, with defined points of isolation.

2.2.8.   Where work is to be undertaken across a point of demarcation which involves equipment, systems or locations having significant risk, all parties are to liaise with the appropriate APs to plan the activity prior to commencement of the work. There must be an agreed written procedure for the work which is to result in the issue of appropriate documentation. This may involve the issue of safety documentation in accordance with JSP 375 Volume 3 and any other documentation relevant to a safe system of work across a system boundary.

2.2.9.   Temporary project demarcation agreements are to define the transfer of responsibility and operational procedures and are to include:

>   a.   required controls to hand over and accept back systems.

>   b.   changes that are likely to occur during the temporary transfer.

2.2.10. The demarcation needs to provide the necessary framework for ensuring that all controls and checks are in place to transfer and accept responsibilities.

2.3. Construction Works

2.3.1.   Construction works are defined within the Construction (Design and Management) Regulations (CDM) and include construction, alteration, conversion, fitting out, renovation, installation, commissioning, repair, upkeep and removal of services.

2.3.2.   At the initial design stage of a project the CDM Client and or designated Project Manager are to formally notify the responsible MMO's CAE appointed for the location, facility or installations at which the works are to take place; to initiate the necessary exchange of pre-construction information and to inform design and build deliberations. The CDM Client must not permit work to commence until they have confirmation from the MMO that plans meet CAE requirements. The CAE is in turn to notify the respective appointed AE(s) and ensure that they are available to provide advice to the project team. The CAE is also to ensure the relevant contact details are provided to the CDM Client for onward submission to appointed designers and contractors; where the project is notifiable[14] the CDM coordinator takes the lead role for coordination and for managing the flow of information between all stakeholders.

2.3.3.   On receipt of notification, the AE(s) are to notify the SSC and appropriate discipline AP(s) of the proposed work within the area for which they are responsible. They, in turn, are to cooperate with the Client or Project Manager who is to:

    a.   ensure that the design and construction take account of the requirements of JSP 375 Volume 3 so they can be satisfactorily implemented throughout the life of the facility or installation.

    b.   ensure that the effects of the works and the completed facility or installation upon the existing site infrastructure are fully understood and taken into account so as to ensure continuing compatibility.

    c.   ensure that familiarisation training is provided for those APs who are to be appointed for the management of the risk activities associated with the facility or installation on construction completion.

    d.   ensure there is sufficient information in the construction works Health and Safety File to enable the future operation, maintenance and demolition to be safely undertaken.

2.3.4.   On completion of the project, where MOD is to accept responsibility for a new facility and before hand over to the MMO for maintenance responsibilities, the AE is to liaise with the CDM Client or Project Manager as appropriate to support the following process:

    a.   the AE is to check that the Health and Safety File holds sufficient information to enable operation and maintenance to be safely undertaken.

    b.   having visited the site of the new works, the AE is to comment on compliance with the following:

        i.   there is adequate space, suitable access and egress to enable maintenance and operation to be safely undertaken.

        ii.   the installation is of an acceptable standard and statutorily compliant.

        iii.   the equipment is suitable and fit for its intended purpose.

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[14] JSP 375 Volume 2 Leaflet 20

        iv.   design philosophies have been applied to the entire facility or installation during the work.

        v.   new installation does not compromise the integrity of the existing facilities or installation.

2.3.5.   The AE may at his own discretion accept an installation that does not satisfy Section 2.3.4 subject to the issue of an Operational Restriction.

2.3.6.   Where it is known that the MOD is to accept control of the risk, the AE is to nominate Designated Authorised Persons for the new facility or installation. The AE is to ensure appropriate familiarisation and on-site training is given to all Designated Authorised Persons.

2.3.7.   The design/build Contractor is to nominate a person to familiarise the Designate Authorised Persons with the equipment, systems or locations having significant risk in order for the adoption of JSP 375 Volume 3 Safety Rules and Procedures. Sufficient time and resourses are to be allowed before acceptance of the works by MOD to allow the APs to become familiar with the new facility and associated hazards.

2.3.8.   After a suitable period of familiarisation and on-site installation and equipment training the designated APs are to confirm their satisfactory completion of familiarisation training to the AE who will amend the appointment, for each AP, to include the equipment, systems or locations in accordance with JSP 375 Volume 3 procedures.

3.   Competence

3.1   Suitability Criteria

3.1.1   CSAA is to:

    a.   be an employee of DIO.

    b.   have attained a degree in Electrical, Mechanical, Structural Engineering, Civil Engineering or similar.

    c.   hold current registration at Chartered level by an appropriate engineering accrediting body.

    d.   possess good communication and interpersonal skills.

    e.   have relevant experience of construction works and facilities maintenance.

    f.   possess a detailed knowledge of JSP 375 Volume 3.

    g.   be conversant with current Health and Safety legislation and regulations.

    h.   be proficient in undertaking assessments and audits of personnel and processes.

    i.   have undertaken the role of SAA for at least one discipline.

3.1.2   SAAs are to:

a.   be an employee of DIO.

b.   have attained a degree in the designated specialism or other relevant subject.

c.   hold current registration at Chartered level by an appropriate engineering accrediting body.

d.   possess good communication and interpersonal skills.

e.   have relevant experience of construction works and facilities maintenance.

f.   possess a high level of knowledge of JSP 375 Volume 3 applicable to their specialism.

g.   be conversant with current Health and Safety legislation and regulations.

h.   be proficient in undertaking assessment and audit of personnel and processes.

3.1.3   DSAAs are to:

a.   be an employee of DIO.

b.   have attained a degree in the designated specialism or other relevant subject (or other suitable qualifications and experience to allow progress to Chartered Status).

c.   hold current registration at Chartered level by an appropriate engineering accrediting professional body (or be demonstrably working towards Chartered Status).

d.   possess good communication and interpersonal skills

e.   have relevant in depth experience of construction works and facilities maintenance

f.   possess a high level of knowledge of JSP 375 Volume 3 applicable to their specialism

g.   be conversant with current Health and Safety legislation and regulations.

h.   be proficient in undertaking assessment and audit of personnel and processes.

3.1.4   CAEs and AEs are to:

a.   be registered as a Chartered Engineer, Incorporated Engineer or Professional Health and Safety Practitioner with experience in the appropriate discipline. In exceptional circumstances the SAA may issue a restricted AE

Licence whilst the prospective AE is working towards registration.

b.   be in a position to demonstrate how they have met the requirements of the appropriate tuition and training appropriate to AEs and APs as detailed in this chapter and the discipline specific chapters of JSP 375 Volume 3.

c.   be familiar with the different types of equipment, systems at significant risk locations for their areas of appointment on the MOD estate.

d.   be an employee of the MMO, a consultant engineer engaged by the MMO, a MOD employee, or a member of the armed forces.

e.   be able to confirm their competency and suitability for the role by demonstrating an appropriate understanding of the tasks involved and knowledge of JSP 375 Volume 3 work for each nominated specialism.

3.1.5   APs are to:

a.   be an employee of the MMO, be directly contracted to the MMO, an MOD employee, or a member of the armed forces.

b.   have an adequate knowledge of JSP 375 Volume 3, any agreed local variations, and of those regulations which are applicable to the equipment, systems or locations for which they are to be appointed.

c.   be able to demonstrate through formal assessment by the AE their competency to be able to safely operate, and make safe to work on or in, the equipment, systems or locations for which appointment is sought and their knowledge of JSP 375 Volume 3.

d.   have successfully completed the appropriate tuition, training and equipment familiarity regime as detailed in this chapter and the discipline specific chapters of JSP 375 Volume 3.

e.   have attained an appropriate level of fire precaution and first aid training as defined by the AE.

3.1.6   SSC are to:

a.   have a clear understanding of installations, systems and equipment that fall within the boundary of JSP 375 Volume 3 which relate to the site or area.

b.   have relevant awareness of the site interface requirements associated with the implementation and operation of JSP 375 Volume 3.

c.   have attained an appropriate level of Health and Safety training as determined by the MMO.

3.1.7   SkPs are to:

a.   be able to demonstrate competence to undertake the work activities required.

b.   be familiar with the types of installation, equipment or location that they are to be required to work in/on or test.

c.   possess the necessary technical knowledge, skill and experience relevant to the nature of the work activities to be undertaken to prevent danger or, where appropriate, injury.

d.   have successfully undertaken technical training in the required discipline and training administered by the organisations or bodies as specified for the particular specialism, or some equivalent form of training and experience acceptable to the appropriate AP or AE.

e.   have an adequate knowledge of the relevant parts of JSP 375 Volume 3, any agreed local variations, and those associated regulations and documents which are applicable to the installations, equipment or locations having significant risk on or within which work or tests are to be undertaken.

f.   have a letter from the individual's employer attesting his or her competence.

3.2   Training Requirements

3.2.1   Training forms one of the key elements of competence of an individual to undertake a specific task. Each key role within this chapter will need some form of training to ensure they are competent to undertake their role. The level of training will depend on the role to be undertaken and the prior knowledge and qualifications of the individual.

3.2.2   Prior to being appointed as either an AE or an AP formal training on the operation of these Safety Rules and Procedures is required to be undertaken, where appropriate the training will include the Common Requirements set out in this chapter (See Annex C).

3.2.3   This formal training must meet the discipline specific learning outcome requirements detailed in Chapters 3 - 7 however, the method of delivery may be tailored to the specific individuals needs. Commercial courses may be utilised to deliver this training however the AE must ensure that the course meets the needs of the individual AP (or in the case of an AE the CAE must provide this assurance).

3.3   AE Refresher Training

3.3.1   The requirement for refresher training in the operation of these Safety Rules and Procedures for AEs is to be determined by the CAE utilising the decision tree at figure 3.1 and in conjunction with the individual AE. Once the AE has been issued a licence by the SAA (or DSAA) then the CAE must ensure that an AE maintains his competency for undertaking the role.

3.3.2.   Should any of the elements reviewed be unsatisfactory or require attention then the CAE in conjunction with the AE will decide on a course of action be it CPD, training or other format needed to resolve the issue. Once that action is satisfactorily complete the CAE will verify the continued competence and make an appropriate record in the AEs logbook.

Verify AE's knowledge of JSP 375 Vol 3 and supplementary Regulations as appropriate

Requires Attention / Not satisfactory

Satisfactory

Confirm AE's knowledge of systems and installations within their appointment domain

Requires attention / Not satisfactory

Satisfactory

Confirm AE's technical knowledge remains current for their area of expertise

Requires attention / Not satisfactory

Satisfactory

Verify satisfactory application of the SSoW, AP appointments, audits, reports and support to APs

Requires attention / Not satisfactory

Satisfactory

Review AE Logbook

Requires attention / Not satisfactory

Satisfactory

CAE & AE to decide on CPD/training/ action required to resolve issues and record in AE logbook

AE undertakes required action

Requires further action

CAE review

Satisfactory

Competency satisfactory record in AE Logbook

Figure 3.1 – Authorising Engineer Refresher Training Decision Process

3.4. AP Refresher Training

3.4.1. The refresher training requirements for APs should be determined on a risk based approach and will be specific to the individual AP needs. This assessment should be undertaken by the AE during the annual audit and the output should be documented within the APs logbook. The decision making framework in figure 3.2 below should be used to decide on what refresher training is applicable.
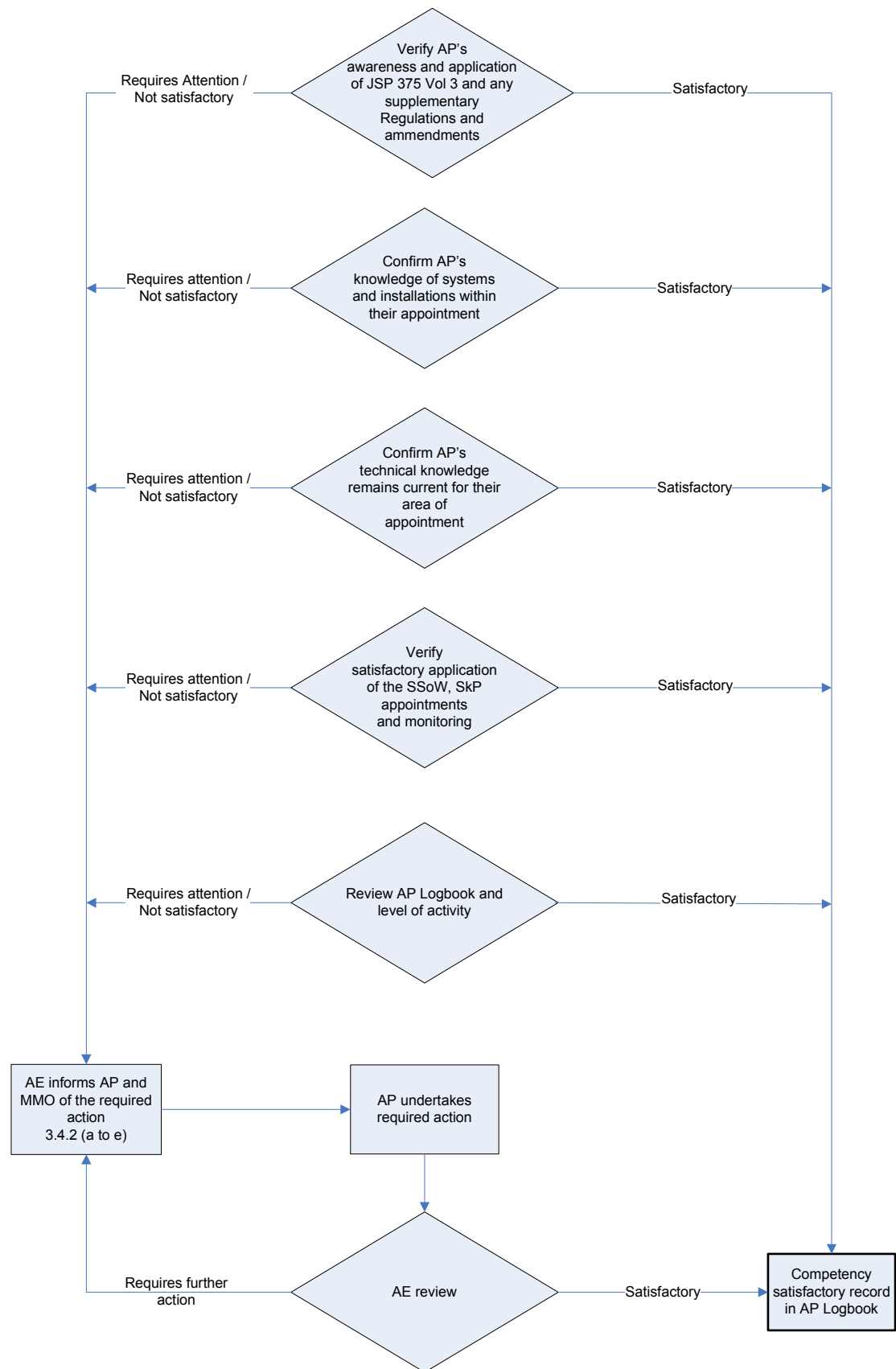
Figure 3.2 – Authorised Person Refresher Training Decision Process

3.4.2 The format of refresher training will be at the discretion of the MMO and AE. The following delivery methods are considered suitable dependant on the requirements of the individual AP:

    a.   one-to-one mentoring between AE and AP – recorded in AE & AP logbook.

    b.   completion of scenario/technical exercise set by AE - recorded in AE & AP logbook.

    c.   AP Workshop delivered by AEs as appropriate and duly certificated.

    d.   refresher training delivered by MMO to meet the training outcomes and duly certificated.

    e.   training course delivered by a suitable external training organisation.

3.5   Site/System Familiarity

3.5.1 Dependant on the role to be undertaken the requirements for site or system familiarity will differ.

3.5.2 For an AE there is a requirement for them to be familiar with the types of system encountered across the estate. Where an AE does not have specific familiarity with a type of system his licence will be restricted. This system familiarity will be tested at initial interview and needs to form part of the ongoing competence requirements under the control of the CAE. Additions to the scope of the licence will require further assessment.

3.5.3 For an AP there is a requirement for both site and system familiarity. They must be familiar with the systems for which they are to provide authorising activities and this must include their interaction with the sites for which they are appointed. They must be familiar with the site processes and procedures and with the specific arrangement of the systems such that the implications of any works for which the AP will undertake/oversee are fully understood prior to any operations/isolations taking place.

3.5.4 Where an AP covers a number of sites they must be able to demonstrate their familiarity with each of these sites and associated systems to the satisfaction of the AE. Records of site familiarisation visits must be kept within the AP Logbook.

3.6   Assessment

3.6.1 CSAA and SAA

    a. The assessment of competence for the CSAA and SAAs will be undertaken as part of the recruitment selection into the posts for which these roles are an integral part. As such a suitable 'expert' may be required to be part of the interview panel in accordance with the MOD Policy Rules and Guidance for Selection Interviewing. For the SAA posts this expertise may be the CSAA who will provide advice to the Hd PTS as Line Manager for the posts and therefore the chairman of the interview panel.

3.6.2 DSAA

    a.   The DSAA assessments will also be undertaken as part of the recruitment selection into the posts and will be undertaken primarily by the SAA as the line manager for the posts. Where appropriate additional 'expert' advice may be sought for the interview panel.

3.6.3 AE

    a.   The employer of an AE has, in the first instance, a responsibility to ensure that any individual he employs with a view to becoming an AE is suitably qualified and experienced in accordance with the suitability criteria defined elsewhere within this chapter. In order that the MOD has the necessary assurance that these individuals are competent prior to them being appointed as an AE they will be subject to an assessment by the relevant SAA (or DSAA). The CAE shall coordinate the dialogue between the prospective AE and the SAA.

    b.   This assessment for AEs will be a structured assessment interview concentrating on the five key elements of competence[15] and will be undertaken at a suitable location such that the prospective AE can demonstrate their competence with respect to the systems for which they are seeking appointment.

    c.   On successful completion of this assessment the prospective AE will be given a Licence to operate on the defence estate. Where during the assessment the SAA considers that the prospective AE is not yet fully competent, he may at his discretion issue a restricted[16] licence. This restricted licence may allow the prospective AE to carry out audits or other defined AE duties. The granting of the restricted licence may require the CAE to administer an action plan for the candidate to achieve full competency and the subsequent granting, by the SAA, of a full licence.

    d.   Maintenance of competence to ensure ongoing suitability for the AE role is the responsibility of the employer and it is the CAE's responsibility to ensure that suitable procedures are developed within their organisation to enable this. (these procedures will be subject to the CSAA Audit detailed in Section 7.3).

    e.   The SAA may withdraw a licence at any time based on the findings of a SAA Review or Inspection. The reasons for the withdrawal must be defined in writing and copied to the CSAA and CAE. The CSAA, SAA and CAE will then determine the subsequent actions required. The CSAA will notify the relevant areas within MOD of the withdrawal and any subsequent impact this may have within a delivery mechanism.

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[15] Skills, Knowledge, Attitude, Training and Experience.
[16] Restricted by either: function, activity and/or time scale.

3.6.4 AP

    a.   APs are to be assessed by the relevant AE prior to them being appointed for AP duties. Prior to this point they must not issue safety documentation except under the direct supervision[17] of either an appointed AP or AE as part of a structured training plan.

    b.   This initial assessment for APs will be a structured interview assessment concentrating on the five key elements of competence and will be undertaken at a suitable location such that the prospective AP can demonstrate their knowledge with respect to the systems for which they are seeking appointment.

    c.   Where the AE deems the AP competent at the initial assessment the AE will issue a Certificate of Competency so that the prospective AP can be given an appointment to operate on site. Where during an initial assessment the AE considers that the prospective AP is not yet fully competent, he will issue an action plan to cover the deficiencies.

    d.   Once appointed APs are to be assessed annually as part of the Annual AE Audit and the findings are to be documented within the AE audit report (see Section 7.4).

    e.   An AE can remove the certificate of competence of an AP and recommend the withdrawal of the appointment at any time based on the findings of an AE Audit or 'ad-hoc' inspection.

3.6.5 SkP

    a.   Prior to the issue of any safety documentation the AP must assess the competence of the SkP in accordance with the requirements of Section 3.1.7.

    b.   Following the assessment the AP shall record his findings in the appropriate Safety Document Register together with copies of any supporting documents submitted as part of the assessment.

    c.   An AP may withdraw a SkP's competency assessment at any time based on the findings of an audit or 'ad-hoc' inspection and this must be entered onto the register and the individual and their employer must be formally notified.

3.7   Appointment

3.7.1 The following key positions defined within this chapter require formal appointments (in writing) to enable them to undertake that role. These formal appointments are required to be accepted by the individual to ensure that they understand their role and the responsibilities associated with the undertaking of that role.

3.7.2 The CSAA is to be appointed in writing by the Hd of PTS

3.7.3. The SAAs are to be appointed in writing by the Hd of PTS taking advice from the CSAA where appropriate.

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[17] Direct supervision; the supervising AP or AE must be present with the prospective AP and sign or initial the prospective AP's documents and assume responsibility for the task.

3.7.4.   The DSAAs are to be appointed in writing by the relevant SAA as line manager of the posts under which their role sits. The CSAA may provide advice if required.

3.7.5.   The CAE and AEs are to be appointed in writing by the MMO for which they are delivering the AE role. The appointment must be subject to the AE holding a Licence from the relevant SAA and maintaining competence to the satisfaction of the CAE. The AE appointment process is shown in figure 3.3.

3.7.6.   The APs are to be appointed in writing by the MMO following issue of a CoC by the AE. The AP appointment process is shown in figure 3.4.

3.7.7.   SkP Appointment - The SkP's appointment becomes extant when they are added to the appropriate SkP Register.

Prospective AE identified

CAE explains the role, duties and responsibilities to the candidate and assesses their suitability against the criteria contained in Chapter 2 and the appropriate discipline chapter(s) of JSP 375 Volume 3

Endorsed suitable by CAE

No → Candidate rejected

Yes

CAE issues logbook to prospective AE (or makes an entry into existing if candidate already has a logbook). In conjunction with the SAA the CAE is to establish the candidates training plan.

The CAE is to nominate an appointed AE to act as mentor to the prospective AE for systems and equipment familiarisation.

CAE to arrange appropriate skills training as appropriate to the discipline.

Prospective AE completes training plan and familiarisation

CAE and AE mentor to assess candidate's readiness for AE duties

Not ready → Further personal development

Ready

CAE nominates prospective AE to SAA

SAA assesses prospective AE

Not suitable → CAE to review

Suitable

SAA issues AE Licence

MMO appoints AE in writing. AE commences duties

Figure 3.3 – Authorising Engineer Training and Appointment Process Map

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┌────────────────┐     ┌─────────────────────┐            ┌──────────────┐
│ Prospective AP │     │ AE explains the role,│           │ Endorsed     │  No  ┌──────────────┐
│ identified by  │────▶│ duties and          │──────────▶│ suitable     │─────▶│ Candidate    │
│ MMO            │     │ responsibilities    │            │ by AE        │      │ rejected     │
└────────────────┘     │ to the candidate and│            └──────────────┘      └──────────────┘
                       │ assesses their suitability│              │
                       │ against the criteria│               Yes
                       │ contained in Chapter 2 and│            │
                       │ the appropriate discipline│            ▼
                       │ chapter(s) of JSP 375│
                       │ Volume 3            │
                       └─────────────────────┘
```

AE issues logbook to prospective AP (or makes an entry into existing if candidate already has a logbook). In conjunction with the MMO the AE is to establish the candidates training plan.

The AE is to nominate a mentor to the prospective AP for systems and equipment familiarisation.

MMO to arrange training as appropriate to the discipline and as identified by the AE.

Technical AP training and mentoring as appropriate.

Further personal development

Prospective AP completes training plan and familiarisation

Not suitable

AE and AP mentor assesses prospective AP

Suitable

AE issues Certificate of Competence

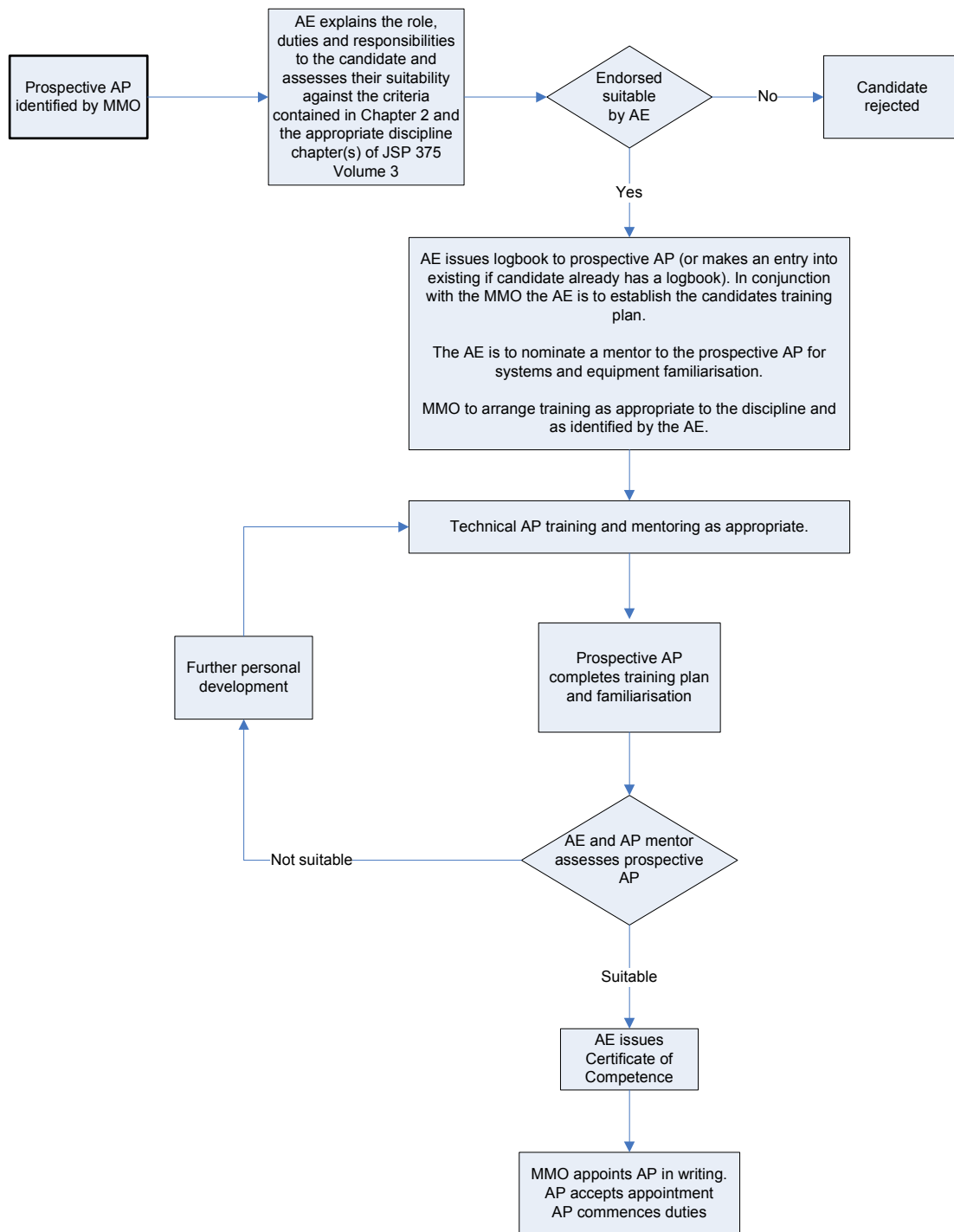MMO appoints AP in writing. AP accepts appointment AP commences duties

Figure 3.4 – Authorised Person Training and Appointment Process Map

4.   PLANNING & IMPLEMENTING

4.1 Risk Assessment

4.1.1 The Management of Health and Safety at Work Regulations require all employers (and self-employed persons) to assess risks to workers and any others who may be affected by their undertaking. Their application within the MOD sites is detailed in JSP 375 Volume 2 Leaflet 23 and Leaflet 39. Guidance is also provided within the publication 'Successful Health and Safety Management – HSG65' and 'Five Steps to Risk Assessment' published by the Health and Safety Executive.

4.1.2 The purpose of a Risk Assessment (RA) is to identify hazards, the persons affected and the degree of risk and to consider suitable means of controlling or eliminating the risk and recording how the control measures are to be implemented.

4.1.3 The MMO is responsible for ensuring that adequate specific RAs, Method Statements (MSs) and other related safety documents are in place before undertaking tasks.

4.1.4 Depending on the tasks to be undertaken or the hazard identified, additional RAs may be required from persons with the relevant specialist experience.

4.1.5 The AP's responsibilities include maintaining written copies of the RAs, MSs, SPs and E&RPs reviewed.

4.1.6 The MMO and AP must ensure that there is a formal means of communicating the results of the RA and contents of the MS to persons involved in, or affected by, the work.

4.1.7 Discipline specific RA requirements are included in the relevant chapters of JSP 375 Volume 3.

4.1.8 Where RAs are produced by persons other than the AP they are to be reviewed by the AP. Where that RA has not been produced by the PiC the AP should ensure that the PiC countersigns it to acknowledge that he is aware of its contents. The same should apply to any MS, SP or E&RP.

4.1.9 Copies of any RA, MS or E&RP are to be kept with the relevant safety document.

4.2   Document Centre

4.2.1 For a site, location or geographical area, as determined by the AE, a JSP 375 Volume 3 Document Centre is required for keeping:

        a.   Site Operating Record.

        b.   Safety Documents Register.

        c.   Equipment Register.

        d.   safety documents.

        e.   site drawings.

     f.   other standard forms.

These documents are required to support the management of activities associated with JSP 375 Volume 3 and are, and will remain, the property of the MOD.

4.2.2 The Document Centre is to comprise lockable drawers or cabinets.

4.2.3 The following information is also to be maintained within the Document Centre. This information will be provided by, and remain the property of, the MMO:

     a.   access to Approved Codes of Practice applicable to all activities associated with JSP 375 Volume 3.

     b.   access to the current version of all chapters of JSP 375 Volume 3.

     c.   a register of SkPs.

     d.   copies of safety documentation relating to activities associated with JSP 375 Volume 3, collated on a discipline basis.

     e.   copies of AE reports for all activities associated with JSP 375 Volume 3, collated on a discipline basis.

4.3   Keys and Key Cabinets

4.3.1 The types of key dealt with are:

     a.   Keys for Safety Locks.

     b.   Keys for Safety Key Boxes.

     c.   Authorised Person's Key.

     d.   Access keys.

     e.   Suited lock keys.

4.3.2 Safety locks and Safety Key Boxes

     a.   Safety Locks (SL) are padlocks indelibly coloured red having one unique key. Each SL is to be marked with a unique identification number and its key is to be labelled with the same number. When the SLs are in use the safety keys are to be kept in a Safety Key Box (SKB).

4.3.3 Safety Key Boxes

     a.   SKBs are secure boxes with either two unique locks or one unique lock and the facility to fit a multi-hasp.

     b.   For Standard SKBs, each of the two unique locks is to have only one key, one being labelled "Safety Key Box-Person in Charge", and the other "Safety Key Box-Authorised Person". Both locks on the SKB must be released before access can be gained to the box.

  c. For SKBs which have a multi-hasp facility, the unique lock is to have only one key, being labelled "Safety Key Box-Authorised Person". When in use the multi-hasp facility must have a multi-hasp fitted and each Permit to Work (PTW) issued against the isolation must have a corresponding unique padlock fitted to the multi-hasp. The key for the padlock in the multi-hasp must be classed as the PiC key and therefore cannot be removed from the multi-hasp until the corresponding PTW has been closed out.

  d. After SLs have been applied to protect/isolate equipment, systems or locations having significant risk, the AP is to place the keys to the SLs in the SKB and secure both the locks of the SKB. The AP is to retain the AP's key and issue the PiC's key to the PiC. The PiC is to retain the PiC key until the permit is cancelled.

  e. Each SKB is to contain the safety keys associated with one safety programme. When not in use, SLs and their keys are to be securely stored.

4.3.4 Authorised Persons' Key Safe

  a. An AP's Key Safe is a key safe with a combination lock which is to be prominently labelled. The AP's key to the Working Key Cabinet is to be locked in this key safe or held by the duty AP. No other keys are to be kept in this key safe.

  b. All APs appointed for the equipment, systems or locations having significant risk are to know the combination to gain access to the AP's Key Safe. Other Authorised Key Signatories may be issued with the combination to the key safe if they require access to the Working Key Cabinet.

  c. On suspension or termination of any AP's or Authorised Key Signatory's appointment, the AE or SSC is to ensure that the combination to the APs' Key Safe is changed and the other Authorised Key Signatories informed of the new combination to the key safe.

4.3.5 Access Keys

  a. Where controlled access is required keys and locks are to be unique except where a system of controlled suited locks is installed.

  b. There is to be an auditable system for the management of all Access Keys on each site. The AE is to define this auditable system and the arrangements are to be documented in the Document Register.

4.3.6 Suited Locks

  a. The administration and use of suited lock systems is to be approved by the AE. The AE is to delegate responsibility for control of suited key systems to the APs of a relevant discipline.

  b. The duty AP is to control the issue of all keys to suited lock systems installed in connection with JSP 375 Volume 3 and the AE is to audit these control procedures.

c.   Where a system of suited locks is installed, the system of suiting is to be displayed within or adjacent to the Working Key Cabinet or the Mimic Diagram, if used.

d.   Where keys to suited locks are issued to persons, other than the duty AP, the issue, use and purpose intended for the keys is to be recorded in a Key Register specific to that system.

4.4   Procedures for Remote Sites

4.4.1 Where APs are not based at the Establishment or site for which they are appointed, the procedures described below are to be adopted.

4.4.2 A Document Centre and Key Cabinets, as required by Sections 4.233 and 4.3 respectively, may be installed at the remote site to which APs have access at all times.

4.4.3 The Document Centre is to contain documents specified in JSP 375 Volume 3 relevant to the equipment and system on the site and to the operational requirements of that site, clearly and indelibly marked with the name of the remote site.

4.4.4 APs are to record their visits in the operating record and complete all necessary documentation relating to the visit and record accurately any work that has been undertaken, as required by JSP 375 Volume 3.

4.5   Electronic Documentation

4.5.1 The arrangements for the implementation of electronically produced safety documentation must be agreed in writing by the AE and a copy of the agreement filed in the relevant Document Register for the specific discipline.

4.5.2 Electronic production of safety document is allowed provided the following criteria are strictly adhered to:

a.   they are printed onto an existing pre-printed pad (used as blanks) in order that the unique numbering and colour coding of documents is retained or,

b.   they are printed onto sheets from a blank pre-numbered pad with the same colour scheme as per the current documentation or,

c.   they are produced utilising a bespoke system in accordance with Section 4.5.14.

4.5.3 Pre-numbered pads are to be unique to prevent the possibility of duplicate numbers being used.

4.5.4 Where there is a specific requirement for countersigning of Safety Programmes/Safety Method Statements/Safety Plans a hard copy of the document showing any amendments must be retained in the relevant Document Register for the specific discipline.

4.5.5 The documents are to be printed onto current pads or blank pre-numbered pads to ensure that once printed the document is then 'locked' and cannot simply be edited electronically and re-printed with the same number.

4.5.6 Where a blank pre-numbered pad is used, the document must follow the format of the current documents and the same arrangements will apply for the use of duplicate documents.

4.5.7 All signatures, dates and times are to be manually entered as per current arrangements.

4.5.8 Safety checklists on PTWs/Sanctions To Test (STTs) are to be manually entered on the job as per current arrangements.

4.5.9 Schematic Drawings (or parts of) may be used within the Safety Documents or attached to the Safety Document. The drawings must contain the following information:

      a.   serial number of the safety document.

      b.   date.

      c.   AP name.

      d.   AP signature.

      e.   PiC name.

      f.   PiC signature.

4.5.10. Any manual modifications to the safety documents by the AP during the course of implementation must be initialled by the AP and by the PiC.

4.5.11. Where a safety document which has been prepared and stored electronically, is re-used (repetitive task) the AP must include the following signed statement:

    "I confirm that the above methodology has been reviewed and is valid for the equipment/location/task stated"

4.5.12. Where electronically produced documentation is used, any manual modifications required during implementation of the safety document must be incorporated into the electronically stored version of the safety document following completion of the task.

4.5.13. Hard copy documents must be stored in the respective Document Register. Electronically stored documents must be filed in an organised manner agreed by the AE.

4.5.14. Where a bespoke system is developed to produce safety documents this system must be capable of producing unique document numbers and must be able to prevent documents being altered once printed. Prior to the use of a system such as this a safety justification report detailing the key elements required to demonstrate a robust system shall be produced and submitted to the CSAA for approval. This justification report should include as a minimum details of any testing, training, change control procedures, rollout strategy and backup processes should the system be unavailable.

4.6   Operational Restrictions

4.6.1 DIO issued Operational Restrictions are contained within Safety Alerts (SAs). SAs can be accessed from the following link:

http://www.mod.uk/DefenceInternet/MicroSite/DIO/OurPublications/HealthandSafety/

4.6.2 Historically Operational Restrictions were found either in Policy Instructions (PI's) or Technical Bulletins (TB's). These can be accessed via the following link:

http://www.mod.uk/DefenceInternet/MicroSite//DIO/OurPublications/TechnicalDocuments/

4.6.3 On receipt of an Operational Restriction, the AP is to:

   a.   acknowledge the receipt to the AE, indicating whether applicable to the site.

   b.   record the receipt in the Operating Record.

   c.   where applicable, place a copy, signed by each relevant AP appointed for the system or installation, in the Documents Register.

   d.   where the equipment or system to which the Operational Restriction relates forms part of the appointed systems or installations, the AP is to:

      i.   withdraw any Standing Instructions permitting operation of the equipment. Revised Standing Instructions, incorporating any Operational Restrictions, may be issued if practicable.

      ii.   disseminate any information as appropriate for action.

      iii.   annotate any relevant diagram with a warning of the Operational Restriction and, where considered necessary, fix a notice to the equipment or location warning of the Operational Restriction.

      iv.   report satisfactory completion of any remedial work to the AE.

   e.   The completion of any inspections and remedial work arising from the Operational Restriction is to be noted in the Operating Record.

   f.   The AP is to ensure that copies of any inspection reports and details of any remedial work undertaken are:

      i.   placed in the Documents Register.

      ii.   forwarded to the AE, who may be required to forward copies to the issuing authority.

   g.   The termination of an Operational Restriction is to be noted in the Operating Record.

   h.   On termination:

      i.   the copy of the Operational Restriction held in the Documents

Register is to be overwritten with the word "CANCELLED" followed by the date of cancellation, countersigned by each of the APs and retained in the Document Register.

ii.   any Standing Instructions which incorporate the conditions of the Operational Restriction are to be withdrawn and replaced by new Standing Instructions.

i.   Any one receiving or discovering an Operational Restriction is to advise the AP. Unless the Operational Restriction has already been advised and copied to the AE, the AP is to forward a copy to the AE.

j.   Any AE receiving or discovering an Operational Restriction without any indication of it having been advised to DIO is to forward a copy as soon as is practicable to the appropriate SAA at DIO.

5   MEASURING PERFORMANCE

5.1   Active Monitoring

5.1.1 Active monitoring is the review of activities to ensure that they are being undertaken correctly and will take the following form:

a.   Continuous monitoring.

b.   SAA review of AEs.

c.   SSC reviews.

d.   Review of AE Audit reports.

5.1.2 Continuous Monitoring

a.   Monitoring is a continual informal process to be undertaken by the CSAA, SAAs, DSAAs, AEs, APs, SSCs and SkPs. Its purpose is to observe the implementation of the processes and procedures required by JSP 375 Volume 3. It serves, with audit and review, to assure the Secretary of State for Defence that their Health and Safety policy is being fully and correctly implemented.

b.   Where monitoring identifies a deficiency in the implementation of the processes or procedures a formal review is to be undertaken and reported appropriately.

c.   Where monitoring identifies best practice this should be communicated throughout the JSP 375 Volume 3 community.

5.1.3 SAA Review of AEs

a.   In order to provide the necessary assurance that the AE audit process is being undertaken in an effective and consistent manner across the estate the SAAs will undertake a programme of reviews.

b.   These reviews will be a structured review of the audit process of each AE appointment over a four year period and will be undertaken in parallel to the AE undertaking an Audit.

c.   A programme of reviews will be produced and maintained by the CSAA and progress against the programme will be reported on the Assurance Dashboard (see Section 6.1).

d.   The review will focus on providing assurance that the AE Audits are in themselves providing an appropriate level of assurance as to the state of implementation of JSP 375 Volume 3 and to enable identification of areas of strength, opportunities for improvement and dissemination of good practice.

e.   Within 28 days of completion of a review the SAA/DSAAs are to produce a report of the review which is to be forwarded to the CSAA, the CAE and AE. Significant issues are to be reported directly to the CSAA and CAE prior to the issue of the report where appropriate.

f.   The CSAA is responsible for the standard process and report within DIO Professional and Technical Services.

5.1.4 Review of AE Audit Reports

a.   Each of the AE audit reports produced for the estate are sent to DIO in order to populate the Assurance Dashboard.

b.   The SAA/DSAAs will review each of the audit reports which are deemed to be 'unsafe' or 'safe with caveats' within 28 days of receipt.

c.   The SAA/DSAAs will review at least 5% of the audit reports deemed to be 'safe' as a percentage over a 12 month period.

d.   Where appropriate the SAA/DSAA is to provide feedback to the CAE and AE.

e.   The review of AE Audit Reports is to be reported on the Assurance Dashboard

5.2   Reactive Monitoring

5.2.1 Reactive monitoring is the review of activities after an accident, incident or dangerous occurrence in order that the causation can be identified and steps put in place to minimise the likelihood of reoccurrence. Reactive monitoring will take the form of inspections.

5.2.2 Inspections can be 'ad-hoc' or investigations undertaken by an SAA, DSAA, CAE or AE in response to a particular trigger.

a.   These triggers include but are not limited to:

i.   review of AE audit report.

ii.   accident or incident report.

iii.   continuous monitoring.

iv.   SAA review.

     v.   concerns being directly raised.

     vi.   near miss reporting.

     vii.   dangerous occurrence reporting.

     viii.   enforcement authority action.

     ix.   accident data review.

b.   There is no set format for the output of an inspection; however a written report is required to be produced within 28 days of the inspection taking place. The inspection report is to be submitted to the appropriate authority (who will determine the appropriate circulation).

c.   The CSAA will maintain a log of all SAA inspection reports for 'Learning from Experience' purposes and will share pertinent information at the CAE Steering Group.

d.   The CAE will maintain a log of all AE inspection reports for 'Learning from Experience' purposes and will share pertinent information at the CAE Steering Group.

5.2.3 Incident Reporting

a.   All incidents[18] which occur on the defence estate should be considered for reporting against the criteria defined by the MOD IRIS System (see Defence Intranet). Those which fall under the requirements of IRIS should be reported through the appropriate Focal Point. This process satisfies the requirements of the Reporting of Injuries, Diseases and Dangerous Occurrences Regulations (RIDDOR).

b.   In parallel to this process the AP should immediately notify the AE who is to assess the magnitude of the risk posed by the incident. Those assessed as having a high risk are to be reported immediately and directly to the CSAA, relevant SAA and the DIO Chief Environmental and Safety Officer (DE CESO); those of lower risk are to be e-mailed to the relevant SAA at defects@de.mod.uk within five days of being identified.

c.   For all incidents, irrespective of the level of risk, the AE/AP is to notify the Site Estate Team Leader (SETL) (for Regional Prime Contracts) or the DIO Manager (for other forms of DIO contract).

d.   Notwithstanding the requirements of the paragraphs above, the DIO CESO is to be notified immediately of the occurrence of any incident that has prompted the involvement of the enforcing authority.

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[18] Safety and environmental incidents including accidents and near misses.

6.   REVIEWING PERFORMANCE

6.1   Assurance Dashboard

6.1.1 In order to provide the necessary assurance of the implementation of JSP 375 Volume 3 an 'Assurance Dashboard' is used to capture data from a number of sources and represent it graphically. This dashboard is provided to the DIO Executive Committee (DIO EC) on a quarterly basis. At the same time the dashboard will be circulated to the Deputy Hd Ops (EM) for visibility.

6.1.2 The majority of the data to populate the dashboard is generated automatically from the AE Audit Reports. The Assurance Dashboard relies on the completion of the Audit Reports in line with the AE Audit Report Template which is a Microsoft Excel® workbook and is available in electronic format from the CSAA.

6.1.3 The Assurance Dashboard represents each delivery area and is split into a number of Key Performance Indicators (KPIs). These KPIs are split into four 'pillars' of assurance:

   a.   Competence; provides assurance that the key positions within the JSP are filled with competent individuals i.e. SAA, DSAA, AE and AP

   b.   Coverage; provides assurance that all areas/sites which are required to use the JSP are subject to the Audit process undertaken on behalf of the Department by the network of AEs.

   c.   Application; provides assurance through the AE Audit Function, the SAA targeted review of AE Reports, the Discipline Specific Working Groups etc that the various elements of the JSP are being implemented in a consistent manner.

   d.   Action Reporting; provides assurance that appropriate actions are being identified and acted upon to ensure that the highest standards are maintained in terms of the systems applied in these 'high hazard' areas.

6.2   JSP 375 Volume 3 Assurance Statement to Functional Safety Board (OHSEB)

6.2.1 The CSAA will utilise the data from the Assurance Dashboard to provide the necessary assurance statement for inclusion in the DIO assurance statement which is submitted to the OHSEB on an annual basis.

6.3   CAE Steering Group

6.3.1 The CAE Steering group is to be held on a quarterly basis and is to be chaired by the CSAA.

6.3.2 The Terms of Reference for the CAE Steering Group are held by the CSAA.

6.3.3 The CAE Steering Groups aims are to:

   a.   share best practice.

   b.   'Learn From Experience' (LFE).

   c.   highlight areas for improvement associated with JSP 375 Volume 3.

      d.   task the Working Groups for the consideration of specific issues and or deliverables.

6.4   Working Groups (WGs)

6.4.1 The CSAA/SAAs are responsible for forming and managing WG. The CSAA WG having responsibility for Chapters 1 & 2, and the SAAs WGs for the chapter specific to their individual discipline. The purpose of the WG is to maintain and develop the relevant chapter(s) of JSP 375 Volume 3, and to assist the SAA in the development and incorporation of feedback (good practice and lessons learnt – Section 6.5.7).

6.4.2 The WGs will have functional responsibility to the CSAA/CAE Forum. The CSAA/CAE Forum will also have the authority to task the WGs as and when required.

6.4.3 WGs' primary function is to:

      a.   identify and resolve problems with the practical implementation of the regulations such as mistakes, inaccuracies, poor description, misinterpretations within the pre-printed documentation, ranging from the regulations themselves through to the safety documentation and proposing associated changes in the rules and procedures.

      b.   identify areas where it appears that these rules and procedures are failing to control the danger in line with UK legislation and propose amendments to address the shortfall.

      c.   identifying areas of emerging good/exemplar practice and proposing associated changes in the rules and procedures.

      d.   identifying and responding to changes in UK legislation, discussing the impact of these changes and confirming what if anything requires changing in JSP 375 Volume 3.

6.4.4 The CSAA/SAA or their nominated representative is to chair the WG. The SAAs are responsible for identifying those individuals who sit as the core WG. For the CSAA WG the members of the core WG are to be nominated by the representatives of the CSAA/CAE Forum.

6.4.5 To ensure that any proposed changes to an individual chapter have no adverse effect on another section, and to maintain a unified standard where appropriate, the CSAA/SAA or nominated representative are to table the changes at the CSAA/CAE Forum. The CSAA/CAE Forum will if appropriate task additional WGs to look at the proposed changes, with a view to either incorporating the changes, providing feedback on any areas of conflict or confirming that there is no conflict.

6.4.6 The frequency of the WG meetings will be set by the CSAA/SAAs and will be dependent on the current issues associated with the specific chapters.

6.4.7 Each WG should meet at least annually.

6.4.8 In addition to any proposed changes to the chapter(s), WGs are to provide guidance on the potential impact on resource for any proposed changes. The guidance will at this stage be subjective and should be qualitative. The statements required will be:

      a.   "Additional resource likely to be required".

      b.   "Less resource likely to be required".

  c. "No change to resource likely to be required".

6.5 Feedback Process

6.5.1 Feedback of information relating to either success or failure is an essential element in an assurance system; it allows confirmation that the systems remains fit for purpose and/or identifies areas where improvement may be required. This section describes the process of reporting any issues with the implementation, operation or compliance with JSP 375 Volume 3. Feedback of information from routine assurance visits reported during audit or monitoring is covered by Section 7.4 and for Working Groups at Section 6.4.

6.5.2 The following are considered as areas which require feedback:

  a. Dangerous Occurrence (as defined under RIDDOR). For Examples see L73 - A guide to the Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 1995 Schedule 2.

  b. An unsafe Act or Condition.

    i. Unsafe Act - Performance of a task or other activity that is conducted in a manner that may threaten the health and/or safety of an individual.

    ii. Unsafe Condition - A condition in the work place that is likely to cause property damage or injury.

  c. A Near Miss

    i. A near miss is an unplanned event that did not result in injury, illness, or damage - but had the potential to do so. Only a fortunate break in the chain of events prevented an injury, fatality or damage. Although human error is commonly an initiating event, a faulty process or system invariably permits or compounds the harm, and should be the focus of improvement.

  d. Failure to apply JSP 375 Volume 3. Examples are:

    i. Work being carried out without appropriate authority.
    ii. Equipment that can not be operated in compliance with the JSP.
    iii. Areas where the JSP can not be applied as to do so would result in an unsafe act or condition.
    iv. Areas where the JSP, when applied, prevent the activity from being undertaken.

  e. Errors, omissions or conflicts in JSP 375. Example are:

    i. Conflicts between the JSP and Statute or industry standards.

    ii. Typing errors or omissions in the JSP.

  f. Emerging good or exemplar practice.

6.5.3 For feedback resulting from serious incidents, unsafe acts, unsafe conditions, near misses or Dangerous Occurrences (as defined under RIDDOR) that occur on the defence estate, then the requirements detailed in Section 5.2.3 apply.

6.5.4 Where an incident transpires during a work activity the person carrying out the activity is to cease work and make safe, they are to report the incident to the MMO Site Manager, AP or SSC prior to leaving the point of work. Any safety documentation in force is to be cancelled and the activity is not to recommence without the written approval of the AP.

6.5.5 Any incident reported at Section 5.2.3 is to be formally investigated utilising the MMOs auditable system and a report submitted via the CAE to the SAA. The SAA will record and review all incident reports and action as appropriate.

6.5.6 The SAA will put in place a monitoring system that enables trends to be identified and the production of Safety Alerts, etc. and/or revisions to the chapter of the JSP 375 Volume 3 as appropriate.

6.5.7 Where an emerging good or exemplar practice is identified this is to be disseminated by the MMO to the SAA in a report via the CAE or directly by the CAE at the CSAA/CAE steering Group.

7   AUDITING

7.1   SSD&C Audit

7.1.1 Audits will be conducted by, or on behalf of, MOD SSD&C Safety Dep. DH at intervals determined by MOD SSD&C Safety Dep. DH and will include, but are not limited to:

    a.   DIO's monitoring and auditing processes.

    b.   Site audits and policy implementation.

7.2   CESO DIO Audit

7.2.1 Audits will be conducted by, or on behalf of, CESO DIO at intervals determined on a risk based approach to ensure that DIO's Health and Safety governance structures, processes and procedures are suitable and sufficient and are being applied.

7.2.2 Audits are to identify areas of potential risk and any non compliance. Items to be covered are, but not limited to:

    a.   competence.

    b.   assessments of AEs.

    c.   SAA Review of AEs.

    d.   AE Audits received and reviewed.

    e.   SAA Inspections.

  f. performance.

  g. JSP 375 Volume 3 maintenance and improvement.

  h. processes.

  i. Action Planning.

7.3 CSAA Audit

7.3.1 Audits will be conducted annually by the CSAA to provide assurance that the necessary processes to support the assurance model are in place and effective. These audits will focus on the CAEs. Items to be covered are, but not limited to:

  a. audit programmes.

  b. AP coverage.

  c. AE coverage and deputy arrangements.

  d. AE competence and development.

  e. management and control of training.

7.3.2 The output of the CSAA Audit will be recorded on a standard audit format which will also provide data for the population of the Assurance Dashboard.

7.3.3 The CSAA audit report will be circulated to the CAE and SAAs no later than 28 days after the completion of the audit. Should significant issues be identified the CSAA may raise these within the estate delivery area.

7.4 AE Audit

7.4.1 The purpose of the AE audit is to provide assurance of the competence of the APs and the application of JSP 375 Volume 3.

7.4.2 Additionally, the AE will confirm that the SSC is maintaining information/records and completed documentation/maintenance and that, records exist at the site level to support an adequate level of coordination in any specific discipline and as befits the level of activity and system risk.

7.4.3 In order that coverage is identified and maintained the CAE is to provide to the CSAA an audit programme detailing the principle locations, including the associated sites, for which an audit report will be produced and a statement to confirm that all sites within the scope of the delivery area are encompassed.

7.4.4 An audit report is to be produced, at least annually, for each principal location in accordance with the agreed CAE audit programme. Where the audit outcome deems it necessary the AE is to increase the frequency of audit to maintain assurance.

7.4.5 Scope – The audit will include the people, documentation together with a representative sample of the systems, installations and equipment (as detailed in Section 7.4.8). The method to achieve this is a combination of:

a.   Office based element – This inspection is to go into sufficient detail in order that the AE can provide the necessary assurance of compliance with the relevant chapter of JSP 375 Volume 3.

b.   Physical inspection element – This inspection is undertaken with the primary purpose of verifying the AP is operating in compliance with the relevant chapter of JSP 375 Volume 3. This may give rise to secondary 'Duty of Care' observations.

     i.   Primary Purpose – Is to verify:

         1)   AP familiarity.
         2)   AP competence.
         3)   AP control of work.
         4)   validation of documentation raised.

     ii.   Secondary Purpose – Is to maintain AE familiarity but, may give rise to 'Duty of care' observations such as:

         1)   safety related issues.
         2)   physical condition.
         3)   statutory compliance.

Where 'Duty of Care' observations are identified and are specific to the discipline they should be recorded in the audit report.

7.4.6 AE Audit Report

a.   The audit report is to record and demonstrate compliance with JSP 375 Volume 3.

b.   The report is to include both qualitative and quantitative assessment of the compliance.

c.   The use of a RAG system (Red, Amber, or Green) is to be applied to all qualitative and quantitative outcomes in the report.

7.4.7 Qualitative

a.   This is an assessment by the AE based on the findings of the audit and their professional opinion and is to answer the following two questions:

     i.   Is the system safe to continue?
This assessment is based on the applicability of the JSP, the standard of the equipment and installations, the compliance and application by the site(s) of the JSP and the competence of those individuals employed in managing compliance with the JSP.

     ii.   Is the Authorised Person safe to continue?
This assessment is based on the competence of the APs (their knowledge, experience, training and level of activity) and their application of and compliance with the JSP.

The resulting answer to each question is either:

<mark style="background-color: #00FF00">Safe to continue</mark>;
<mark style="background-color: #FFFF00">Safe to continue subject to caveats</mark>, or;
<mark style="background-color: #FF0000">Unsafe to continue</mark>.

b.   Where the outcome is other than safe to continue, the assessment is to be supported by a summary of the significant issues which resulted in the outcome and any caveats or interim control measures put in place.

7.4.8 Quantitative

a.   All elements reported on in the audit are to be subject to a quantitative assessment, the key areas are covered below, the definitive areas are identified in the audit report template:

   i.   Authorised Persons
   This section of the report is to cover the APs appointed for the site(s) and is to include, but not be limited to:

      1)   training.

      2)   resources.

      3)   logbook.

      4)   competency.

      5)   site & equipment familiarity.

      In addition a table is to be produced for each AP identifying the scope of the appointment, level of training and level of activity on the site(s).

   ii.   Safety Documentation
   This section of the report is to cover the documentation held or produced in support of compliance with the JSP and is to include, but not be limited to:

      1)   risk assessments.

      2)   method statements.

      3)   client approvals.

      4)   safety documentation.

      5)   operating records.

      6)   document registers.

      7)   demarcation agreements.

      8)   safety alerts & operational restrictions.

      9)   dangerous incidents / conditions / occurrences / practices, injuries and diseases.

   iii.   Designated Personnel
   This section of the report is to cover those personnel involved in the management and application of the JSP. It is to cover the Skilled Persons appointed for the site(s) and any site based personnel who have

delegated responsibility for the management of or compliance with the JSP and is to include, but not be limited to:

1) Skilled Persons.

2) Accompanying Safety Persons.

3) Operating Authorities.

4) Hazardous Area Managers.

5) Safe Systems Coordinator.

iv.   Safety Equipment
This section of the report is to cover safety equipment and control at the site(s) and is to include, but not be limited to:

1) access control.

2) signs, locks & locking devices.

3) safety key boxes and mimic panels.

4) test equipment and test probes.

5) RPE & PPE.

v.   Site, Systems, Installations & Equipment Documentation
This section of the report is to cover site, systems, installations & equipment documentation and control at the site(s) and is to include, but not be limited to:

1) as installed drawings inc. buried services.

2) operation and maintenance manuals.

3) maintenance records and certification.

4) statutory records and certification.

vi.   Site, Systems, Installations & Equipment Inspection
This section of the report is to cover site, systems, installations & equipment inspections carried out at the site(s) and are to detail the systems, installations and equipment inspected and the nature of the inspection.

vii.   Supporting Information
The report may include additional supporting information not included in this section, to support the findings and outcomes of the audit.

b.   The quantitative assessment provides a compliance 'score' against the requirements of JSP 375 Volume 3 and will be used for benchmarking.

7.4.9 Action Plan

a.   The report is to include two action plans:

i.   actions relating to compliance with JSP 375 Volume 3, which are to be assigned to the MMO.

ii.   actions relating to the infrastructure or site records, which are to be assigned to the SETL or appropriate establishment authority.

b.   The Action Plans are to include actions required as an outcome from the current audit, and actions not closed out from the previous audit report. The actions raised are to be SMART[19] and assigned to an individual or role, who has the resource, ability and authority to discharge the action.

7.4.10 Format and Distribution

a.   On completion of an audit, the AE is to complete a report of the findings. The format of the report is to be in accordance with the AE Audit Template as this allows the automatic population of the Assurance Dashboard. The report shall be submitted electronically to audits@de.mod.uk no later than 28 days after the completion of the audit.

b.   The AE audit template format is published as a Practitioner Guide for current contracts. For future contracts such as NGEC the AE audit template is to be a mandated requirement in order that the Assurance Dashboard can be fully populated.

7.4.11 AE Review

a.   Where the AE deems it appropriate they are to carry out an interim review of a site or Authorised Person. This can be either a desk exercise or a site visit, it is to include, but not be limited to a review of:

    i.   the current action plan.

    ii.   the level of familiarity & training of an Authorised Person.

b.   The requirement to carryout a review is to be considered where:

    i.   monitoring identifies deficiencies in the application or implementation of JSP 375.

    ii.   an incident, unsafe act, unsafe condition has occurred.

    iii.   an audit identifies it as necessary.

c.   Where a review identifies significant findings then it is to be documented and the CAE & MMO notified. In addition where the CAE considers it appropriate the SAA is to be notified of any findings.

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[19] Specific, Measurable, Attainable, Realistic, Timebound.

ANNEX A

Acknowledgements

This document has been produced by a joint Defence Infrastructure Organisation /
Ministry of Defence / Industry Working Group comprising representation from the
following contributing companies, organisations and individuals:

Atkins
Babcock
Carillion
Defence Infrastructure Organisation
Interserve
Serco
Turner Facilities Management Limited

Logbook

1. The logbook is intended to provide a record of attainment and experience of the individual both as a means of supporting a curriculum vitae and a means of demonstrating that site familiarity and appropriate personal development are being maintained.

2. The contents of the logbook are to include as a minimum:

    a.   a current work experience record which includes qualifications, work experience and training with specific reference to the relevant chapter(s) of JSP 375 Volume 3.

    b.   appropriate certificates (or copies thereof) of relevant training together with a record of all training undertaken and a programme for that required (including refresher training).

    c.   Letter of Appointment and licence or CofC as appropriate.

    d.   practical training and site familiarity records.

    e.   a chronological record of relevant experience.

    f.   simple diary records to record relevant day to day activities.

    g.   a record of assessments performed of others.

    h.   a chronological record of audits performed.

    i.   SAA or AE authentication's as appropriate.

3.   Where individuals hold more than one appointment a single logbook may be used to avoid duplicating core material (i.e. CV and training records) with sectioned elements for discipline specific information.

Learning Outcomes

Background and Awareness Training for MOD Safe System of Work Practitioners

This subject is made up of the following modules:
1. Overview of MOD & Defence Infrastructure Organisation and their relationship
2. MOD Safe Systems of Work including relevant legislation
3. Roles, Duties and Appointment of Safe System of Work Personnel
4. Principles of Risk Assessment
5. Principles and Purpose of the Audit Process
6. Behavioural & Structured Situational Interviewing

Module 1	Overview of MOD & Defence Infrastructure Organisation and their relationship

Outcomes – The delegate should be able to:

1. Describe the Health and Safety system in MOD.
2. Explain the relationship between MOD and Defence Infrastructure Organisation.
3. Describe the role of Defence Infrastructure Organisation.
4. Describe how the MOD Health and Safety system applies to Defence Infrastructure Organisation.
5. Name the types of Defence Infrastructure Organisation professional and technical documents and describe their relationship.

Module 2	MOD Safe Systems of Work including relevant Legislation

Outcomes – The delegate should be able to:

1. Explain the hierarchy of Health and Safety Legislation.
2. List the Health and Safety Regulations common to all disciplines.
3. Recall the outline requirements of each Regulation.
4. Explain the role of Approved Codes of Practice and Guidance.
5. Describe the relationship between legislation and MOD Safety Rules and Procedures.
6. Define the terms statutory, mandatory, practicable and reasonably practicable.

Module 3	Roles, Duties & Appointment of Safe Systems of Work Personnel

Outcomes – The delegate should be able to:

1. Describe the MOD Safe Systems of Work hierarchy.
2. State the roles of the Safe System of Work post holders.
3. Identify each of the various appointments and outline their duties.
4. State the duties of the Safe Systems of Work Co-ordinator.
5. State the duties of the Authorised Person.
6. Demonstrate understanding of the Skilled Person Appointment process.
7. Explain how the Skilled Person becomes the Person in Charge.
8. State the duties of a Person in Charge.

Module 4   **Principles of Risk Assessment**

Outcomes – The delegate should be able to:

1.   Recall the legal requirement for carrying out risk assessments.
2.   Define hazard and risk.
3.   Describe the methods of hazard identification.
4.   State the HSE 5 steps to risk assessment.
5.   Describe a simple method of assessing risk.
6.   Explain what a generic risk assessment is and its limitations.
7.   Use the 5 steps to produce a generic risk assessment.
8.   Discuss the generic risk assessment produced with regard to a task and identify any omissions or possible improvements.
9.   Explain the role of risk assessments in Safe Systems of Work.

Module 5   **Principles and Purpose of the Audit Process**

Outcomes – The delegate should be able to:

1.   State the JSP 375 Volume 3 Chapter 2 requirement for auditing.
2.   Define auditing in regard to Safe Systems of Work.
3.   Explain the purpose of auditing.
4.   Describe the audit process.
5.   Describe the roles of the auditor and auditee.
6.   Identify the outputs of the audit process.
7.   Illustrate the differences between auditing and monitoring.

Module 6   **Behavioural & Structured Situational Interviewing**

Outcomes – The delegate should be able to:

1.   Define Behavioural Interviewing.
2.   Define Structured Situational Interviewing.
3.   Explain the differences between Behavioural and Structured Situational Interviewing.
4.   Describe the interview process.
5.   Identify what needs to be done in preparation for an interview.
6.   Plan an interview.
7.   Prepare a list of discipline specific 'open' questions.
8.   Identify if the answer to the open question met the 3 requirements. (description/solution/outcome)
9.   Create a discipline specific situational scenario for an interview.
10.   Develop and record questioning during the interview.
11.   Prepare an interview report.
12.   Evaluate the candidate's suitability for appointment.
13.   Demonstrate the ability to plan, arrange and conduct either a Behavioural or Structured Situational interview or an interview based on a combination of both.