S/No.	Guidance notes and standard specifications	Audit Question	Audit Protocol	<u>Clarifications</u>
1.1	The occupier's management with executive or site responsibility shall define and document its policy for safety including objectives for its commitment to safety. (CP79 - Section 1.2) Top management shall define and authorise the organisation's OSH policy and ensure that within the defined scope of its OSH management system is documented, implemented and maintained. (SS506: 2009 Requirements - 4.2e) Top management refers to the higher levels of the organisation's management. E.g. CEO, COO, Vice president or General Mangers in large organisations.	Is there a documented WSH policy authorised by the top management? Check for documented policy for the above requirement.		Auditor should check that OSH policy has been formally endorsed by top management, e.g. official signature.
1.2	perform and verify work affecting safety shall be defined and documented, particularly for personnel who need the organisational freedom and authority to: a) initiate action and to prevent the occurrence of any nonconformities relating to the practice, process and safety system	Does the WSH Policy clearly define the 1. responsibility 2. authority 3. interrelation of personnel who manage, perform and verify work affecting safety? Check policy for the above requirement.		Auditor should check document for: 1. Specification of responsibility of individuals. 2. Specification of Authority of the various personnel. For example, "Project staff are authorised to stop work for any unsafe work." 3. Updated Organisation chart
1.10	The OSH Policy is reviewed periodically to ensure that it remains relevant and appropriate to the organisation. (SS 506: 2009 Requirements 4.2h)	Is the WSH Policy periodically reviewed to ensure it remains relevant and appropriate to the project? Check for evidence on the regular review of WSH Policy.	DR	Auditors should check that the review is done at least once a year.
1.11	occupational injury and illness by establishing organisational structures that support the OHS policy, goals, and objectives.	Does the WSH Policy include the commitment to involve employees in WSH management? Check WSH policy for the above requirement.	DR	Auditors should check that policy clearly indicates how employees (supervisory personnel) are being involved in OSH management. "Involvement" includes communication, participation, consultation and feedback.

1.1	The OSH Policy shall provide a framework for setting and reviewing OSH Objectives. (SS 506 Requirements 4.2d)	Is the WSH policy linked with other policy documents of the project? Check documents for evidence that WSH Policy is a reference and framework for other project policies.	DR	Auditors should check for linkage/references to: - Quality management, - Environmental management, - Contractor management, - Training policies, - Procurement policies, or - HR policies
2.2	The organisation shall establish, implement and maintain a procedure for identifying and accessing the legal and other OSH requirements that are applicable to it. (SS506: 2009 Specification - 4.3.2)	Are the procedures which identify the legal and other WSH requirements implemented? Interview 3 personnel to confirm the procedure is implemented.	IP	Auditors to look for most updated ACOP, Acts, Statutory requirements from all government regulatory agencies, e.g. MOM, MOH, BCA, etc.
2.2	The organisation shall keep this information up-to-date. It shall communicate relevant information on legal and other requirements to its employees and other relevant interested parties. (SS506: 2009 Specification - 4.3.2) The occupier shall establish and maintain a list of all statutory requirements. (CP79 - Section 2.6)	Is there a comprehensive list of relevant legal and other WSH requirements that is made accessible to all relevant personnel? Check list for evidence and verify 3 samples for its location and accessibility.	DR	The list should include the most updated ACOP, Acts, Statutory requirements from all government regulatory agencies, e.g. MOM, MOH, BCA, etc.
2.2	The organisation shall keep this information up-to-date. It shall communicate relevant information on legal and other requirements to its employees and other relevant interested parties. (SS506: 2009 Specification - 4.3.2.2)	Are relevant personnel (e.g. direct employees, sub-contractor, suppliers, consultants) aware of the legal and other WSH requirements that they have to comply with? Interview minimum 3 relevant personnel for evidence on the above requirements.	ΙP	Auditors should verify if these personnel are aware of their legal requirements pertaining to their trade.
2.3	When establishing and reviewing its objectives, an organisation shall take into account the legal requirements and other requirements to which the organisation subscribes, and its OSH risks. It shall also consider its technological options, its financial, operational and business requirements, and the views of relevant interested parties. (SS506: 2009 Specification - 4.3.3)	Does the project target the high risk hazards identified during Risk assessment in the objectives? Verify documentation for evidence on the above requirements.	DR	Auditors should take reference to hazards identified in element 2.1.
2.3	The objectives shall be measurable, where practicable and consistent with the OSH policy, including the commitment to the prevention of injury and ill health, compliance with legal requirement and with other requirement to which the organisation subscribe, and to continual improvement. (SS506: 2009 Specification - 4.3.3)	Are set objectives challenging and realistic to ensure continual improvement? Verify documentation for evidence on the above requirement.	DR	Objectives set should be specific, measurable, achievable, relevant, and timely, such that progress against the attainment of the objectives can be measured more readily by the organisation (sometimes such objectives are referred to as being "SMART").

	3.1.4	continual improvement of OSH performance. Means of demonstration can include visiting and inspecting sites, participating in incident investigation, and providing resources in the context of corrective action, attendance and active involvement at OSH meetings, communicating the status of safety activities, and acknowledging good OSH performance. (SS506: 2009 Guidelines 4.4.1)	meeting for commitment towards continual improvement of WSH performance and interview for verification.		Auditors must ensure that there are continual improvement of OSH performance.
:		Top management shall demonstrate its commitment by: (a) ensuring the availability of resources essential to establish, implement, maintain and improve the OSH management system; (SS506: 2009 Requirements - 4.4.1)	Are the amount of resources required available to the project? Check documentations or reports and check if the resources are available to the project and interview min 3 safety personnel / committee for verification.		Examples of resources include: - safety budget & disbursement - adequate number of safety personnel - training facilities - team building - safety devices Auditors should interview at least 3 personnel from different functional levels.
		oversee the OHSMS and ensure that it functions properly. (UAI - COMMIT04)	Is a member of the top management appointed with particular responsibility for ensuring that the WSH management system is properly implemented and performing to requirements in all locations and spheres of operation within the project? Check documentation for implementation.	DR	Top management shall include: - Project Directors - Project Managers
		tasks that can impact on OSH is (are) competent on the basis of appropriate education, training or experience, and shall retain associated records. (SS506: 2009 Requirements - 4.4.2)	Does the procedure to check on the competence of person(s) under the control of the project, assess the education of the individual prior to performing tasks which can impact WSH? Check procedures for evidence.		Some tasks which can impact OSH include: - performing risk assessment - performing exposure assessments - performing audits - performing behaviour observations - performing incident investigations - performing tasks identified by risk assessment that can introduce hazards. The procedure should assess that the individual has the necessary academic qualifications for performing the tasks.

3.2.7	tasks that can impact on OSH is (are) competent on the basis of appropriate education, training or experience, and shall retain associated records. (SS506: 2009 Requirements - 4.4.2)	Does the procedure to check on the competence of person(s) under the control of the project, assess the training of the individual? Check procedures for evidence.		The procedure should assess that the individual has minimally undergone mandatory training stipulated for performing the tasks.
3.2.16	education, training or experience, and shall retain associated records. (SS506: 2009 Requirements - 4.4.2)	For person(s) performing tasks impacting WSH, was there assessment on the competence in terms of education, training or experience? Check with the project manager what he considered when assigning the 3 site personnel (as stated above) the work that they are assigned.	ΙP	Auditors should check that the project management personnel is able to explain the procedures in appointing the competent personnel.
3.2.22		Does training cover workers' rights in terms of whistle blowing and WSH? Check documentation to see if training cover worker's rights.	DR	"Whistle blowing" refers to reporting of malpractices to management or authorities.
3.2.24	effectiveness can be determined and documented. (UAI - TRAIN07)	After training has been conducted, is there a follow-up on-the-job evaluation of the effectiveness of the training? Check for evidence of a follow-up evaluation of the effectiveness of training.	D.P.	Auditors should check for the subsequent evaluation of the effectiveness of the training, and not the assessment component that comes with the training.
3.3.6	Except where prohibited by law or collective bargaining agreements, the organisation shall facilitate the formation of a health and safety committee comprised of employees from different levels of the organisation. (UAI - EMPLOY05) The occupier shall set up a safety committee. The safety committee shall address safety issues and ensure a safe working environment for all personnel. The committee shall include: a) the chairman who shall be the most senior manager on site b) the secretary who shall be the safety officer c) sufficient representatives from all trades to ensure all aspects of the work operations are adequately covered. (CP 79 - Section 4.3)	Has a WSH committee been formed to allow personnel of all levels to work on WSH issues together? Check for WSH committee.		- The WSH Committee structure should follow that as described in CP79 Section 4.3 If there is no WSH Committee formed due to the small number of workers on site, there should be documentation stating that a WSH Committee will be formed once the site reaches more than 50 workers.

3.3.19	affect their OSH, the organisation should take into account of the following:	Does the procedures for consultation with contractors include new or unfamiliar hazards and the respective controls? Check procedures for evidence.		- New or unfamiliar hazards include: - introduction of the next stage of construction, e.g., super-structure works following the completion of sub-structure works New process and/or technology of construction adopted by the contractor, e.g Usage of new formwork structure recently purchased - Changes in environment.
3.3.30	For visitors, communication can include warning signs and security barriers, as well as verbal or written communication. Information that should be communicated includes: - OSH requirements relevant to their visit - evacuation procedures and responses to alarms - traffic controls - access controls and escort requirements - any PPE that needs to be worn (e.g. safety glasses). (SS506: 2009 Guidelines - 4.4.3.2.3)	Does communication to visitors include WSH requirements relevant to their visits such as PPE that needs to be worn, traffic controls, access controls and escort requirements? Interview visitor management personnel / Verify visitor records to confirm. Was auditor informed of the same when visiting the site?	DR/IP	"Visitor management personnel" refers to the persons who attends to and communicate to the visitors on safety matters.
	For visitors, communication can include warning signs and security barriers, as well as verbal or written communication. Information that should be communicated includes: - OSH requirements relevant to their visit - evacuation procedures and responses to alarms - traffic controls - access controls and escort requirements - any PPE that needs to be worn (e.g. safety glasses). (SS506: 2009 Guidelines - 4.4.3.2.3)	Does communication to visitors include evacuation procedures and responses to alarms? Interview visitor management personnel / Verify visitor records to confirm. Was auditor informed of the same when visiting the site?	DR/IP	"Visitor management personnel" refers to the persons who attends to and communicate to the visitors on safety matters.
3.4.7	documents that contains a description of the OHSMS, the OHS policy, and	Are the manual format and content relevant and appropriate to the size, nature and complexity of the project? Verify adequacy of WSHMS documentation.		Auditors should make professional judgement, for e.g., the OSHMS manual should not be limited to only CP79 for guidance.

3	3.6.4	The organisation shall determine those operations and activities that are associated with identified hazard(s) where the implementation of controls is necessary to manage the OSH risk(s). This shall include the management of change (see 4.3.1). For those operations and activities, the organisation shall implement and maintain: d) documented procedures, to cover situations where their absence could lead to deviations from the OSH policy and the objectives; and e) stipulated operating criteria where their absence could lead to deviations from the OSH policy and objectives. (SS506: 2009 Requirements - 4.4.6)	Are there documented procedures and stipulated operating criteria for high-risk activities where their absence could lead to deviations from the WSH policy and the objectives? Check procedures.	DR	High risk activities would minimally include those activities listed in WSH (Construction) Regulations.
3.	6.33	The occupier shall establish and maintain procedures for the safe execution of works. These procedures shall be documented as work procedures, method statements or permit-to-work system.(CP 79 - Section 2.2) Establishment of procedures for use of hazardous substances and chemicals (CP 79 - Section 12.3)	Is the permit-to-work system implemented for all high risk work activities? Verify 3 permits implemented on the day of audit.	DR	Auditors should minimally check for suitability of the checklists, and that they are correctly filled and signed.
3.	6.44	The organisation shall determine those operations and activities that are associated with identified hazard(s) where the implementation of controls is necessary to manage the OSH risk(s). This shall include the management of change (see 4.3.1). (SS506: 2009 Requirements - 4.4.6)	Are there procedures established and maintained for reviewing the design of worksite, process, installations, machinery, operating procedures and work project to eliminate or reduce risk at source? Check for document for review of design.	DR	Process means: - A series of operations performed in the making or treatment of a product. E.g., excavation process, strutting process, etc. Design of worksite can include the following, for e.g.: - site layout, site traffic management, storage management, access and layout of machinery and equipment, site utilities plans, etc.
3.		The organisation shall determine those operations and activities that are associated with identified hazard(s) where the implementation of controls is necessary to manage the OSH risk(s). This shall include the management of change (see 4.3.1). For those operations and activities, the organisation shall implement and maintain: a) operational controls, as applicable to the organisation and its activities; the organisation shall integrate those operational controls into its overall OSH management system; b) controls related to purchase goods, equipment and services; c) controls related to contractors and other visitors to the workplace; d) documented procedures, to cover situations where their absence could lead to deviations from the OSH policy and the objectives; and e) stipulated operating criteria where their absence could lead to deviations from the OSH policy and objectives. (SS506: 2009 Requirements - 4.4.6)	Following the installation or implementation of new processes or operations, is the effectiveness of WSH controls evaluated? Check documentation of evaluation for the latest 3 processes, e.g. minutes of discussion / evaluation of process.	DR	New processes or operations can include: - Any construction process or operation that is commencing in the near future. Such as excavation, formwork, reinforcement, concreting, window, brickworks and the like.

	The organisation shall establish, implement and maintain a procedure(s) for dealing with actual and potential nonconformity(ies) and for taking corrective action and preventive action. The procedure(s) shall define requirements for: a) identifying and correcting nonconformity(ies) and taking action(s) to mitigate their OSH consequences; b) investigating nonconformity(ies), determining their cause(s) and taking actions in order to avoid their recurrence; c) evaluating the need for action(s) to prevent nonconformity(ies) and implementing appropriate actions designed to avoid their occurrence; d) recording and communicating the results of corrective action(s) and preventive action(s) taken; and e) reviewing the effectiveness of corrective action(s) and preventive action(s) taken. Where the corrective action and preventive action identifies new or changed hazards or the need for new or changed controls, the procedure shall require that the proposed actions shall be taken through a risk assessment prior to implementation. Any corrective action or preventive action taken to eliminate the causes of actual and potential nonconformity(ies) shall be appropriate to the magnitude of problems and commensurate with the OSH risk(s) encountered. The organisation shall ensure that any necessary changes arising from corrective action and preventive action are made to the OSH management system documentation. (SS506: 2009 Guidelines - 4.5.3.2)	Does the organisation have a procedure(s) for dealing with actual and potential non-conformity(ies)? Non-conformity(ies) is a non-fulfilment of a requirement and includes any deviation from work standards, procedures, regulations etc. that could either directly or indirectly lead to injury or illness. Check documentation for the above requirement.	DR	Examples of potential non-conformity can include: - Material failure of a formwork structure - Collapse of a Kentledge setup due to weak ground foundations - Failure of fly jib on a mobile crane - Absence of fall prevention measures.
4.2.29	In determining the nature of the investigation, the resources needed, and the priority to be given to investigation of an incident, account should be taken of the actual outcome and consequences of the incident, and the frequency of such incident and their potential consequences. (SS506: 2009 Guidelines - 4.5.3.1)	Were adequate support and resources given by the management for incidents and non-conformities investigations? Sample 3 cases for the above requirement.	DR/ IP	Examples of "support" can include, but are not limited to: - interpreters for the workers - management chairing incidents investigations meetings - involvement of the line management Examples of "resources" include, but not limited to: - Technical and physical improvement - Subject matter experts and evaluations.
4.3.4	In determining the appropriate controls for records the organisation should take into account any applicable legal requirements, confidentiality issues (particularly those relating to personnel), storage/access /disposal/back-up requirements, and the use of electronic records. (SS506: 2009 Guidelines - 4.5.4)	Do the procedures in 4.3.1 specify which document and records should be considered confidential? Check procedures for evidence.	DR	Confidential document can include: - Employees medical records - Medical claims - Records of Data logger

4.4	4.20	programme. The organisation should consider conducting additional audits: - as changes occur in the hazards, or risk assessment,	Does the company initiate and conduct additional ad hoc audit activities? Check the audit records for such additional ad hoc audits.	DR	Additional ad hoc audit activities conducted as and when the following occurs: - as changes occur in the hazards, or risk assessment, - when indicated by the results of previous audits, - depending on the type of incidents or increased frequency of incidents, and/or - when circumstances indicate that they are necessary, for examples, complaints, non-conformities.
4.4	4.21	audit programme. The organisation should consider conducting additional audits: - as changes occur in the hazards, or risk assessment,	Does the company initiate and conduct additional ad hoc audit activities by independent parties? Check the audit records for such additional ad hoc audits.	DR	Company initiated ad hoc audit by independent parties includes: - Audits by technical subject matter experts - cross audits activities by different jobsites It does not refer to all the mandatory, certification, awards and clients audits conducted.