

A Guide to the
CONSTRUCTION SAFETY AUDIT
SCORING SYSTEM (ConSASS)
(updated Sep 2013)

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1. Introduction

1.1 Since 1994, every construction worksite with a contract sum S\$10 million or more is required by the law to implement a safety and health management system (SHMS). The Singapore Standard CP 79 provides guidance on the safety and health management system for construction worksites. A worksite with a contract sum of S\$30 million or more is required to appoint an approved independent external auditing organization to audit the SHMS of the worksite at least once every 6 months.

1.2 Although approved safety auditing organizations are required to adhere to an established audit protocol, the checklist used in the conduct of a safety audit differs from one audit organization to another. Furthermore, approved auditing organizations use their own scoring system to grade the performance of the implementation of SHMS at the worksites. The use of different checklists and a lack of a standardised scoring system pose challenges when differentiating worksites in term of their effectiveness and implementation of SHMS.

1.3 The Construction Safety Audit Scoring System (ConSASS) intends to overcome these challenges by providing a standardised checklist and scoring system. With the unified system, ConSASS provides an easy cross comparison between worksites in term of their effectiveness in managing safety and health risks at work. This will motivate the contractors to strive for improvement in managing safety and health risks at their worksites.

1.4 Besides standardisation, ConSASS is able to profile the maturity levels of each element of the SHMS in a worksite. With availability of the maturity profile of each element, the management of the worksite could focus its attention to elevate the weaker elements in order to improve the overall maturity of their SHMS to manage safety and health risk. It also allow Developers/ Clients to assess and compare the capabilities of the contractors in managing WSH risks before awarding the contracts.

1.5 Since Aug 2011, all construction worksites with contract sum of S\$30 million or more are required to have their mandatory SHMS audits conducted based on the ConSASS audit checklist. Upon completion of the ConSASS Audit, the audit scores and the supporting audit documents will be required to be submitted through the WSH eServices located in the MOM website.

2. Objectives

- 2.1. The objectives of the **Construction Safety Audit Scoring System (ConSASS)** are to provide:
- (a) a unified assessment method in term of standardisation of audit checklist and adoption of a common audit scoring system. This would enhance the consistency in the auditing process and allow cross comparison of worksites in terms of the capabilities in managing safety and health risk.
 - (b) a mechanism to profile the maturity level for each element of the SHMS in a worksite. With availability of the maturity profile, the management of the worksite could systematically focus its attention to improve the weaker elements in order to elevate the overall maturity of their SHMS to manage safety and health risk. .

3. Scope

- 3.1. ConSASS was developed primarily for auditing of the safety and health management system of worksites. Due to its versatility, ConSASS can also be used for auditing safety & health management system at the corporate level.

4. Basic Features of the ConSASS

- 4.1 Central to the ConSASS is the audit checklist and score card that are used for evaluation of the effectiveness and maturity level of the company's OSHMS.

The Audit Checklist

- 4.2 The audit checklist of ConSASS is derived from audit questionnaires from
- SS506: Singapore Standards for Occupational Safety and Health Management System. (The equivalence of OHSAS 18001.)
 - CP 79: Code of practice for safety management systems for construction worksites
 - The Universal Assessment Instrument (UAI) published by the American Industrial Hygiene Association (AIHA)

4.3 The consolidation provides auditors the convenience of using this one checklist to fulfill its primary function of assessing the company's OSHMS, *for SS506: Part 1* certification or *worksite* regulatory compliance-

4.4 The Deming's Plan-Do-Check-Act (PDCA) cycle has been used as a model for management system implementation in ISO's quality and environmental *systems, and safety* and health management system in OHSAS 18001/SS 506. The questions in the checklist are therefore structured along PDCA cycle as follows:

- OSH Policy (Plan)
- Planning (Plan)
- Implementation and operation (Do)
- Checking and corrective action (Check)
- Management review (Act)

4.5 The questions in the checklist are also grouped into bands, from Band I to IV, with each increasing Roman numeral reflecting the increasing level of maturity of the elements being audited. In general, the individual bands evaluates the following:

- Band 1: Whether the OSHMS has a particular provision;
- Band 2: Whether the content of the particular provision is sufficiently comprehensive;
- Band 3: Whether the particular provision is well-implemented on site; and
- Band 4: Best practices

Where there are similar questions in Band II and III, note that the respective audit protocols would be different.

The Score Card

4.6 The score card is a 'final report card' which will tabulate the results obtained from the different OSHMS elements audited. Its purpose is to allow for quick and easy visualization of the maturity of the different elements in the OSHMS and thus, provides company management or responsible personnel an idea of resource allocation in order to strengthen weak areas or elements in the system.

5. Instructions on the Use of ConSASS

The Audit Checklist

- 5.1. There are altogether approximately 350 questions in the checklist. The checklist is organised in a table format containing the following:
- Question Serial Number
 - Guidance notes and Standard Specifications
 - The audit question with audit instructions
 - DR/IP/PI - Audit methods that the auditor may adopt in verifying the question (DR - Document Review, IP - Interview of personnel, PI - Physical Inspection)
 - "Yes", "No" or "N/A" Checkbox for entering the audit outcome.
 - Auditor's Remarks - Auditors may use this column to take down notes or input further comments they might have
- 5.2. Appendix 1a provides further clarifications to selected questions in the Audit Checklist.

A Banding System

5.3. The questions for each element of the OSHMS are banded I to IV to reflect the increasing level of maturity of the element. In order to pass a certain band, the contractor's OSHMS element being audited needs to satisfy at least 70%¹ of the questions within that band. The purpose of using a banding system to reflect the audit results rather than a quantitative score is to keep the 'calculation' simple. The banding approach will also not give the misimpression that the assessment is an exact science. Another advantage to simple step levels is that they allow the contractors to see the maturity levels of the different OSHMS elements audited and their improvement areas.

5.4. Auditors are required to audit each element of the OSHMS up till and including the Band III questions. Thereafter, Auditors may stop auditing the element should it fail to satisfy at least 70% of the questions within any of the first three bands. Please refer to Example 1.

¹Based on ANSI/ASQ Z1.4 Sampling Procedures and Tables for Inspection by Attributes

Example 1:

An auditor was auditing the element '3.2 – Training, Awareness and Competence' of the OSHMS established by construction company ABC.

He starts by asking questions in band I and verified that the OSHMS was able to satisfy 3 questions in the band. (There are altogether 4 questions in the band). The percentage attained would be:

$$\frac{\text{No. of questions satisfied}}{\text{No. of questions in the band}} \times 100\% = \frac{3}{4} \times 100\% = 75\%$$

He proceeds to check the questions in Band II. This time, the OSHMS was able to satisfy 6 questions in Band II. (There are altogether 10 questions in Band II). The percentage attained would be:

$$\frac{\text{No. of questions satisfied}}{\text{No. of questions in the band}} \times 100\% = \frac{6}{10} \times 100\% = 60\%$$

He proceeds to check the questions in Band III. This time, the OSHMS was able to satisfy 5 questions in Band III. (There are altogether 7 questions in Band III). The percentage attained would be:

$$\frac{\text{No. of questions satisfied}}{\text{No. of questions in the band}} \times 100\% = \frac{5}{7} \times 100\% = 71\%$$

At this point he stops auditing the element since it did not score at least 70% within each of the first three bands (Band II scored 60%). The grade for this element is Band I, this being the highest band before the band which did not attain at least 70%.

Audit Instructions

5.5. Each audit question is accompanied with an instruction. The instructions are in red print below every question in the checklist. Auditors are to adhere to the instructions to minimize discrepancies in their audit methods.

5.6. In line with industry practice, the audit protocol comprises three key components: document review, personnel interview and physical inspection.

5.7. Where an audit question requires evidence gathering, a minimum sampling size of three is recommended. This is to keep the sampling size small yet credible. The passing criterion is at least two out of the three sampled are able to meet the intent of the question. Refer to Example 2 for illustration.

Example 2:

In auditing the element '2.1 - Hazard identification, risk assessment and risk control' of the OSHMS, question 2.1.20 in band III asked Verify that the risk assessment for the 3 critical/high risk activities are site specific and relevant to the works.

The audit instructions given were - Check 3 risk assessments and site for evidence.

In adhering to the instructions, the auditor identified 3 critical/high risk activities: Excavation, Piling and Formwork.

He then checks if risk assessment for the 3 critical/high risk activities are site specific and relevant to the works.

In his checks, the auditor found that the Excavation site do not address a risk identified in the risk assessment. Hence, 2 out of the 3 samples passed. Because 2 out of 3 is the majority, the system is considered to have satisfied this particular question.

5.8. If auditors opined that certain questions require a larger sampling size, he or she may proceed to do so. The general passing criterion is then 70% of the sample population.

5.9. There may also be cases or circumstances where the sample size does not exceed two. In such circumstances, the auditor is required to conduct a 100% sample check and all the samples must meet the passing criteria in order to be considered satisfying the question.

5.10. Where evidence required is not applicable at the time of the audit. Auditors are to indicate "N/A" in the audit outcome checkbox, and state the reasons in the Auditor's Remarks column.

The Score Card

5.11. The score card is a 'final report card' which will tabulate the results obtained from the different OSHMS elements audited. It provides a profile of the maturity level of the OSHMS elements in a company.

5.12. Auditors are required to shade on the card the highest band attained (the first highest passing band) for every element and fill in the necessary particulars; including the company being audited, dates of audit, the name of the lead auditor in the audit team and his/her signature.

5.13. Auditors are required to input the percentage scores on the card for the Bands which were audited. The last two rows are for the auditors to input the overall score of the audit. The results provide the company management or responsible personnel an indication of 'how

much more' is required to improve the element in the failed band. To view an example of a completely filled score card, please see Example 3.

Example 3:

S/No.	System Elements	BAND			
		I	II	III	IV
1	OSH Policy	100%	100%	100%	100%
2.1	Planning for hazard identification, risk assessment and risk control	100%	75%	60%	-
2.2	Legal and other requirements	100%	100%	100%	100%
2.3	Objectives	100%	100%	50%	-
2.4	OSH Management Programme(s)	100%	100%	80%	50%
3.1	Structure and responsibility	100%	100%	100%	100%
3.2	Training, Awareness & Competence	75%	60%	71%	-
3.3	Consultation and communication	100%	62%	73%	
3.4	Documentation	100%	100%	100%	100%
3.5	Document and data control	100%	100%	100%	100%
3.6	Operational control	100%	76%	88%	33%
3.7	Emergency preparedness and response	100%	70%	88%	100%
4.1	Performance measurement and monitoring	100%	89%	100%	60%
4.2	Accidents, incidents, non-conformances and corrective and preventive action	100%	83%	67%	
4.3	Records and records management	100%	100%	100%	100%
4.4	Audit	100%	75%	83%	67%
4.5	Management review	100%	83%	80%	50%
No of Total element score 70% and above		17 / 17	15 / 17	12 / 17	7 / 17
% of Total element score 70% and above:		100%	88%	71%	41%
<p>Taking the scenario from Example 1, the auditor indicates on the score card that Element 3.2 - 'Training, Awareness & Competence' attained Band I by shading and scored 60% in Band II (the score in the failed band). The auditor continues to audit up til Band III. Company management can then see that there's another 10% to satisfy, before it can pass Band II. Preparations can then be made to improve the areas that failed.</p>					

6. Sampling Strategies

6.1 Appropriate audit sampling is critical and yet, can be a tricky issue. Wrong conclusions are drawn if the samples are inaccurate or do not reflect the true state of the situations.

Interview Sampling

6.2 In selecting staff for interviews, auditors should cover a wide range of representation from different levels of the organizational hierarchy: company management, line management, workers, OSH personnel and even subcontractors and suppliers.

6.3 To make the interview process more efficient, an interview sheet has been developed (Appendix 3) to assist auditors in the interview. The questions in the interview sheet are drawn from the main checklist. The interview sheet has taken into consideration that in certain circumstances that the interview questions are only applicable to a specific group of staff (e.g. Management staff). In this case, the entry box for other groups in the form will be blanked off. For illustration, please refer to the Example 4 below.

Example 4

	Training, awareness and competence	Emergency Preparedness and Response
S/No.	3.2.16	3.7.19
Band	III	III
Specification	(SS506 : 2009 Requirements - 4.4.2)	UAI - EMERG05
Audit Question	<p>For person(s) performing tasks impacting WSH, was there assessment on the competence in terms of education, training or experience?</p> <p><i>Check with the project manager what he considered when assigning the 3 site personnel (as stated above) the work that they are assigned.</i></p>	<p>Are personnel aware of and understand emergency response procedures and their responsibilities in the event of emergencies</p> <p><i>Interview minimum 3 relevant personnel</i></p>
Audit Methods	IP	IP
Management (Manager, Department /Section Heads, etc)	<i>Chong Jung Chan (General Manager) says the appointed WSHD will need to have at least 3 years of working experience and to be certified by WSH Council as a WSHD.</i>	<i>Dylan Sim (Manager) is aware of his duties accordingly to SOP in the case of fire evacuation.</i>
OSH Persons and WSH Committee member		N.A
Line Management (Supervisors, Engineers, Team Leaders etc)		<i>Yong Bak Kim (Supervisor) can recite his duties accordingly to SOP in the case of fire evacuation.</i>
Employees (Workers)		<i>Lee Bek Chuan (crane operator) not sure of the evacuation procedures and where to go.</i>
Others (Contractors, Supplier, Visitors, etc)		
<p>Under Element 3.6 - Operational Control, question 3.2.16 requires an interview of a management staff. Hence, the other staff groups are blanked out as they do not apply. The boxes provided allow auditors to input information and conclusions they've drawn from the interview.</p> <p>Under Element 3.7 - Emergency Preparedness and Response, question 3.7.19 requires an interview of minimum 3 employees about their awareness in the emergency response procedures and their responsibilities in the event of emergencies. The auditor chose representations from 3 different groups - a supervisor, crane operator and manager.</p>		

7. A Note on Corporate Audit

7.1. If ConSASS is used for corporate audit, the following points should be noted when selecting worksites for verification of OSHMS implementation.

7.2. Auditors have to be cautious in selecting sites that truly reflect the effective translation of the corporate system onto the site. A means of selecting appropriate sites to audit would be to review past records. Checking the various sites' accident or near-miss records may reveal how well the system is implemented.

7.3. Another point to consider in the selection criteria would be the activity level in the sites. An audit that is conducted during the high activity period has greater possibilities of detecting non-conformances or inconsistencies in work practices compared to one that is conducted during low activity periods.

7.4. Different phases of construction introduce different hazards into the site. Hence, auditors may also choose to sample sites operating at different phases of construction (E.g. worksite A building foundation and worksite B constructing the superstructure.) in order to audit the implementation of OSHMS in managing OSH risks arising from works carried out in the various phases.

Construction Safety Audit Scoring System (ConSASS) Audit Checklist

Dated: 12 Apr 2013

BAND	S/No.	Guidance notes and standard specifications	Audit Question	DR/IP/PI	Results			Auditor's Remarks
					Yes	No	NA	
II	1.5	<p>Top management shall define and authorise the organisation's OSH policy and ensure that within the defined scope of its OSH management system it :</p> <p>a) is appropriate to the nature and scale of the organisation's OSH risks;</p> <p>b) includes a commitment to prevention of injury and ill health and continual improvement in OSH management and OSH performance;</p> <p>c) includes a commitment to at least comply with applicable legal requirements and with other requirements to which the organisation subscribes that relate to its OSH hazards;</p> <p>d) provides the framework for setting and reviewing OSH objectives;</p> <p>e) is documented, implemented and maintained;</p> <p>f) is communicated to all persons working under the control of the organisation with the intent that they are made aware of their individual OSH obligations;</p> <p>g) is available to interested parties</p> <p>h) is reviewed periodically to ensure that it remains relevant and appropriate to the organisation.</p> <p>(SS506 : 2009 Requirements - 4.2)</p> <p>The safety policy shall be relevant to the occupier's organisational goals and the expectations and needs of the industry.</p> <p>(CP79 - Section 1.2)</p>	<p>Does the WSH Policy include a commitment to prevention of injury and ill health and continual improvement in WSH management and WSH performance?</p> <p>Check policy for the above requirement.</p> <p><i>Continual improvement is the process of enhancing the implementation of WSHMS to achieve improvement in WSH performance.</i></p>	DR				
	1.6	<p>Top management shall define and authorise the organisation's OSH policy and ensure that within the defined scope of its OSH management system it :</p> <p>a) is appropriate to the nature and scale of the organisation's OSH risks;</p> <p>b) includes a commitment to prevention of injury and ill health and continual improvement in OSH management and OSH performance;</p> <p>c) includes a commitment to at least comply with applicable legal requirements and with other requirements to which the organisation subscribes that relate to its OSH hazards;</p> <p>d) provides the framework for setting and reviewing OSH objectives;</p> <p>e) is documented, implemented and maintained;</p> <p>f) is communicated to all persons working under the control of the organisation with the intent that they are made aware of their individual OSH obligations;</p> <p>g) is available to interested parties</p> <p>h) is reviewed periodically to ensure that it remains relevant and appropriate to the organisation.</p> <p>(SS506 : 2009 Requirements - 4.2)</p> <p>The safety policy shall be relevant to the occupier's organisational goals and the expectations and needs of the industry.</p> <p>(CP79 - Section 1.2)</p>	<p>Does the WSH Policy include a commitment to at least comply with applicable legal requirements and with other requirements to which the project subscribes that relate to its WSH hazards?</p> <p>Check that the policy includes the above requirement, eg. compliance with WSH Acts and Regulations.</p>	DR				
	1.7	<p>The occupier shall identify resource requirements and provide adequate resources, including the assignment of trained personnel for management performance of work and verification activities including safety audits and reviews.</p> <p>(CP 79 - Section 1.3.2)</p>	<p>Does the WSH Policy include the commitment to provide sufficient and appropriate resources?</p> <p>Check policy for the above requirement and interview personnel for verification.</p>	DR & IP				
III	1.8	<p>The OSH Policy is communicated to all persons working under the control of the organisation with the intent that they are made aware of their individual OSH obligations.</p> <p>(SS 506 Requirements 4.2f)</p>	<p>Is the WSH Policy communicated to all persons working under the control of the project with the intent that they are made aware of their individual WSH obligations?</p> <p>Interview 3 personnel to check if they are aware of the WSH Policy and their WSH obligations/ responsibilities.</p>	IP				

Final Score: / 6

Construction Safety Audit Scoring System (ConSASS) Audit Checklist

Dated: 12 Apr 2013

BAND	S/No.	Guidance notes and standard specifications	Audit Question	DR/IP/PI	Results			Auditor's Remarks
					Yes	No	NA	
III	1.9	The OSH Policy is available to interested parties. (SS 506 Requirements 4.2g)	Is the WSH Policy available to interested parties? <i>Check for evidence- either WSH Policy is disseminated to employees, sub-contractors, or posted on a website or notice board.</i>	PI				
III	1.10	The OSH Policy is reviewed periodically to ensure that it remains relevant and appropriate to the organisation. (SS 506 Requirements 4.2h)	Is the WSH Policy periodically reviewed to ensure it remains relevant and appropriate to the project? <i>Check for evidence on the regular review of WSH Policy.</i> <i>N.B: Refer to Appendix 1A in the ConSASS Guidebook for further clarifications</i>	DR				Final Score: / 3
IV	1.11	Senior management should demonstrate its commitment to eliminating occupational injury and illness by establishing organisational structures that support the OHS policy, goals, and objectives. (UAI - COMMIT03 CRITERION02)	Does the WSH Policy include the commitment to involve employees in WSH management <i>Check WSH policy for the above requirement.</i> <i>N.B: Refer to Appendix 1A in the ConSASS Guidebook for further clarifications</i>	DR				
IV	1.12	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? <i>Check documents for evidence that WSH Policy is a reference and framework for other project policies.</i> <i>N.B: Refer to Appendix 1A in the ConSASS Guidebook for further clarifications</i>	DR				Final Score: / 2
2			Planning					
2.1			Planning for hazard identification, risk assessment and risk control					
I	2.1.1	The organisation shall establish, implement and maintain a procedure(s) for the ongoing hazard identification, risk assessment, and determination of necessary controls. (SS506 : 2009 Specifications - 4.3.1)	Does the project have a risk management (i.e. include hazard identification and risk assessment) procedure? <i>Check procedure for evidence.</i>	DR				
I	2.1.2		Does the project establish a Risk management/Risk assessment team? <i>Check project chart / appointment letters / Risk assessment for evidence.</i>	DR				Final Score: / 2
II	2.1.3	The procedure(s) for hazard identification and risk assessment shall take into account: a) routine and non-routine activities; b) activities of all persons having access to the workplace (including contractors and visitors); c) human behaviour, capabilities and other human factors; d) identified hazards originating outside the workplace capable of adversely affecting the safety and health of persons under the control of the organisation within the workplace; e) hazards created in the vicinity of the workplace by work-related activities under the control of the organisation; f) infrastructure, equipment and materials at the workplace, whether provided by the organisation or others; (SS506: 2009 Specification - 4.3.1)	Does the procedure for hazard identification and risk assessment take into account: a) routine and non-routine activities? <i>Check procedures for evidence.</i>	DR				

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BAND	S/No.	Guidance notes and standard specifications	Audit Question	DR/IP/PI	Results			Auditor's Remarks
					Yes	No	NA	
II	2.1.4	The procedure(s) for hazard identification and risk assessment shall take into account: a) routine and non-routine activities; b) activities of all persons having access to the workplace (including contractors and visitors); c) human behaviour, capabilities and other human factors; d) identified hazards originating outside the workplace capable of adversely affecting the safety and health of persons under the control of the organisation within the workplace; e) hazards created in the vicinity of the workplace by work-related activities under the control of the organisation; f) infrastructure, equipment and materials at the workplace, whether provided by the organisation or others; (SS506: 2009 Specification - 4.3.1)	Does the procedure for hazard identification and risk assessment take into account: b) activities of all persons having access to the workplace (including contractors and visitors)? Check procedures for evidence.	DR				
II	2.1.5	The procedure(s) for hazard identification and risk assessment shall take into account: a) routine and non-routine activities; b) activities of all persons having access to the workplace (including contractors and visitors); c) human behaviour, capabilities and other human factors; d) identified hazards originating outside the workplace capable of adversely affecting the safety and health of persons under the control of the organisation within the workplace; e) hazards created in the vicinity of the workplace by work-related activities under the control of the organisation; f) infrastructure, equipment and materials at the workplace, whether provided by the organisation or others; (SS506: 2009 Specification - 4.3.1)	Does the procedure for hazard identification and risk assessment take into account of: d) identified hazards originating outside the workplace capable of adversely affecting the safety and health of persons under the control of the project within the workplace; Check procedures for evidence.	DR				
II	2.1.6	The procedure(s) for hazard identification and risk assessment shall take into account: a) routine and non-routine activities; b) activities of all persons having access to the workplace (including contractors and visitors); c) human behaviour, capabilities and other human factors; d) identified hazards originating outside the workplace capable of adversely affecting the safety and health of persons under the control of the organisation within the workplace; e) hazards created in the vicinity of the workplace by work-related activities under the control of the organisation; f) infrastructure, equipment and materials at the workplace, whether provided by the organisation or others; (SS506: 2009 Specification - 4.3.1)	Does the procedure for hazard identification and risk assessment take into account: e) hazards created in the vicinity of the workplace by work-related activities under the control of the project? Check procedures for evidence.	DR				
II	2.1.7	The procedure(s) for hazard identification and risk assessment shall take into account: a) routine and non-routine activities; b) activities of all persons having access to the workplace (including contractors and visitors); c) human behaviour, capabilities and other human factors; d) identified hazards originating outside the workplace capable of adversely affecting the safety and health of persons under the control of the organisation within the workplace; e) hazards created in the vicinity of the workplace by work-related activities under the control of the organisation; f) infrastructure, equipment and materials at the workplace, whether provided by the organisation or others; (SS506: 2009 Specification - 4.3.1)	Does the procedure for hazard identification and risk assessment take into account: f) infrastructure, equipment and materials at the workplace, whether provided by the project or others? Check procedures for evidence.	DR				

Construction Safety Audit Scoring System (ConSASS) Audit Checklist

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BAND	S/No.	Guidance notes and standard specifications	Audit Question	DR/IP/PI	Results			Auditor's Remarks
					Yes	No	NA	
II	2.1.8	The procedure(s) for hazard identification and risk assessment shall take into account: g) changes or proposed changes in the organisations, its activities, or materials; h) modifications to the OSH management system, including temporary changes, and their impacts on operations, processes, and activities; i) any applicable legal obligations relating to risk assessment and implementation of necessary controls; and j) the design of work areas, processes, installations, machinery/ equipment, operating procedures and work organisations, including their adaption to human capabilities. (SS506 : 2009 Specification - 4.3.1)	Does the procedure for hazard identification and risk assessment take into account: g) changes or proposed changes in the projects, its activities, or materials? and h) modifications to the WSH management system, including temporary changes, and their impacts on operations, processes, and activities? <i>Check procedure for evidence.</i>	DR				
II	2.1.9	The procedure(s) for hazard identification and risk assessment shall take into account: g) changes or proposed changes in the organisations, its activities, or materials; h) modifications to the OSH management system, including temporary changes, and their impacts on operations, processes, and activities; i) any applicable legal obligations relating to risk assessment and implementation of necessary controls; and j) the design of work areas, processes, installations, machinery/ equipment, operating procedures and work organisations, including their adaption to human capabilities. (SS506 : 2009 Specification - 4.3.1)	Does the procedure for hazard identification and risk assessment take into account: i) any applicable legal obligations relating to risk assessment and implementation of necessary controls? <i>Check procedure for evidence.</i>	DR				
II	2.1.10	The procedure(s) for hazard identification and risk assessment shall take into account: g) changes or proposed changes in the organisations, its activities, or materials; h) modifications to the OSH management system, including temporary changes, and their impacts on operations, processes, and activities; i) any applicable legal obligations relating to risk assessment and implementation of necessary controls; and j) the design of work areas, processes, installations, machinery/ equipment, operating procedures and work organisations, including their adaption to human capabilities. (SS506 : 2009 Specification - 4.3.1)	Does the procedure for hazard identification and risk assessment take into account: j) the design of work areas, processes, installations, machinery/ equipment, operating procedures and work organisations, including their adaption to human capabilities? <i>Check procedure for evidence.</i>	DR				
II	2.1.11	The organisation's methodology for hazard identification and risk assessment shall be: a) be defined with respect to its scope, nature and timing to ensure it is proactive rather than reactive; and b) provide for identification, prioritisation and documentation of risks, and the application of controls, as appropriate. (SS506: 2009 Specification - 4.3.1)	Is the project's methodology for hazard identification and risk assessment defined with respect to its scope, nature and timing to ensure it is proactive rather than reactive? <i>Check procedures for evidence.</i>	DR				
II	2.1.12	The organisation's methodology for hazard identification and risk assessment shall be: a) be defined with respect to its scope, nature and timing to ensure it is proactive rather than reactive; and b) provide for identification, prioritisation and documentation of risks, and the application of controls, as appropriate. (SS506: 2009 Specification - 4.3.1)	Does the project's methodology for hazard identification and risk assessment provide for prioritisation of risks? <i>Check procedures for evidence.</i>	DR				
II	2.1.13	The organisation's methodology for hazard identification and risk assessment shall be: a) be defined with respect to its scope, nature and timing to ensure it is proactive rather than reactive; and b) provide for identification, prioritisation and documentation of risks, and the application of controls, as appropriate. (SS506: 2009 Specification - 4.3.1)	Does the project's methodology for hazard identification and risk assessment provide for documentation of risks? <i>Check procedures for evidence.</i>	DR				

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BAND	S/No.	Guidance notes and standard specifications	Audit Question	DR/IP/PI	Results			Auditor's Remarks
					Yes	No	NA	
II	2.1.14	The organisation's methodology for hazard identification and risk assessment shall be: a) be defined with respect to its scope, nature and timing to ensure it is proactive rather than reactive; and b) provide for identification, prioritisation and documentation of risks, and the application of controls, as appropriate. (SS506: 2009 Specification - 4.3.1)	Does the project's methodology for hazard identification and risk assessment provide for the application of controls as appropriate? <i>Check procedures for evidence.</i>	DR				
II	2.1.15		Does the Risk Management procedure include the review of Risk assessment? <i>Check procedures for evidence.</i>	DR				Final Score: / 13
III	2.1.16		Is there a risk registry kept at the worksite? <i>Check documents for evidence?</i>	DR				
III	2.1.17		Does the project have a trained Risk assessment/Risk management team leader to do Risk assessment? <i>Check for training records of the Risk assessment/ Risk management team leader.</i>	DR				
III	2.1.18		Are the Risk assessment/ Risk management team members trained/briefed on Risk Management? <i>Check training/briefing records of 50% of the team members or conduct interviews.</i>	DR/IP				
III	2.1.19	The organisation shall establish, implement and maintain a procedure(s) for the ongoing hazard identification, risk assessment, and determination of necessary controls. The procedure shall take into account of routine and non-routine activities. (SS506: 2009 Requirements - 4.3.1)	Is risk assessment conducted for all the work activities seen, whether routine or non-routine? <i>Verify documents with 3 current on-site activities.</i>	PI & DR				
III	2.1.20	The organisation shall document and keep the results of identification of hazards, risk assessments and determined controls up-to-date. (SS506: 2009 Requirements - 4.3.1)	Are conducted risk assessment dated and signed by the risk assessment team? <i>Sample risk assessment of 3 current work activities that include high risk activities which require PTW under the WSH (CN) Regs for evidence.</i>	DR				
III	2.1.21	The organisation shall document and keep the results of identification of hazards, risk assessments and determined controls up-to-date. (SS506: 2009 Requirements - 4.3.1)	Are risk assessment site specific and relevant to the works. <i>Check risk assessments of 3 critical/ high risk activities and site for evidence.</i>	PI & DR				
III	2.1.22	The organisation shall document and keep the results of identification of hazards, risk assessments and determined controls up-to-date. (SS506: 2009 Requirements - 4.3.1)	Are risk assessment comprehensive (i.e. includes the required steps associated with the works)? <i>Check 3 risk assessments and site for evidence.</i>	PI & DR				
III	2.1.23	The organisation shall document and keep the results of identification of hazards, risk assessments and determined controls up-to-date. (SS506: 2009 Requirements - 4.3.1)	Does the risk assessment identify all foreseeable risks and hazards associated with the works? <i>Check 3 risk assessments and site for evidence.</i>	PI & DR				
III	2.1.24	When determining controls, or considering changes to existing controls, consideration shall be given to reducing the risks according to the following hierarchy: a) elimination b) substitution c) engineering controls d) signage/ warnings and/ or administrative controls; and e) personal protective equipment. (SS506 : 2009 Requirements - 4.3.1)	Was the hierarchy of risk controls followed in the risk assessment for critical activities? <i>Sample 3 risk assessments for evidence. Verify that PPE is chosen as the last resort after other options are considered, or PPE is not considered at all.</i>	DR				
III	2.1.25		Are legal obligations taken into account in the SWP and other control measures stated in the risk assessment for the critical work activities? <i>Sample 3 risk assessment for evidence.</i>	DR				
III	2.1.26		Are SWP and other control measures stated in the risk assessment for the critical work activities being implement on site? <i>Check the implementation of the 3 risk assessment control measures on site.</i>	PI & DR				

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					Yes	No	NA	
III	2.1.27	The organisation's methodology for hazard identification and risk assessment shall provide for the monitoring of required actions to ensure both the effectiveness and timeliness of their implementation. (SS506 : 2009 Specification - 4.3.1)	Does the procedure for hazard identification and risk assessment provide for the monitoring of required actions to ensure both the effectiveness and timeliness of their implementation? <i>Check procedures for evidence.</i>	DR/PI/IP				
III	2.1.28	The organisation's methodology for hazard identification and risk assessment shall provide for the monitoring of required actions to ensure both the effectiveness and timeliness of their implementation. (SS506 : 2009 Specification - 4.3.1)	Is the RA implementation person(s) who lead the implementation of the control measure or SWP specified? <i>Sample 3 risk assessment for evidence.</i>	DR				
III	2.1.29	The organisation's methodology for hazard identification and risk assessment shall provide for the monitoring of required actions to ensure both the effectiveness and timeliness of their implementation. (SS506 : 2009 Specification - 4.3.1)	Are the workers involved in the risk assessment able to state out the control measures for controlling hazards for the activity they are involved in? <i>interview at least 1 worker involved in the 1 of 3 risk assessment sampled</i>	IP				
III	2.1.30	The organisation's methodology for hazard identification and risk assessment shall provide for the monitoring of required actions to ensure both the effectiveness and timeliness of their implementation. (SS506 : 2009 Specification - 4.3.1)	Is the risk assessment reviewed when the following conditions are met: - when an accident occurs; or - where there is a significant change in work practices or procedures. <i>Check documents for evidence.</i>	DR				Final Score: / 15
IV	2.1.31	OHS design considerations shall include input from employees, supervisors, and managers who will be involved with the process or operation when implemented. (UAI - DESIGN03)	Are the risk associated with the temporary work designs mitigated? <i>Check document for evidence (eg: Safety and health risk register or Design for Safety risk register, minutes of discussion on Temporary work designs)</i>	DR				
IV	2.1.32	OHS design considerations shall include input from employees, supervisors, and managers who will be involved with the process or operation when implemented. (UAI - DESIGN03)	Are the risk associated with the permanent work designs mitigated? <i>Check document for evidence (eg: Safety and health risk register or Design for Safety risk register, minutes of discussion on risk associated with permanent work designs.)</i>	DR				
IV	2.1.33	The organisation shall ensure that the OSH risks and determined controls are taken into account when establishing, implementing and maintaining its OSH management system. (SS506: 2009 Requirements - 4.3.1)	Are the WSH risks and determined controls taken into consideration when establishing, implementing and maintaining its WSH management system? (eg. Controls listed in checklists, permits for checking) <i>Check document for evidence.</i> <i>N.B: Refer to Appendix 1A in the ConSASS Guidebook for further clarifications</i>	DR				Final Score: / 3
2.2			Legal and other requirements					
I	2.2.1	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 there procedures for identifying and accessing legal and other WSH requirements (e.g. codes of practice) that are applicable? <i>Check procedures for evidence.</i>	DR				Final Score: / 1
II	2.2.2	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)	Does the procedure identify the relevant personnel to update the legal and other WSH requirements applicable to the project? <i>Check procedures for evidence.</i>	DR				
II	2.2.3	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)	Does the procedure identify the frequency to which the legal requirements and other WSH requirements are updated? <i>Check procedures for evidence.</i>	DR				
II	2.2.4	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)	Does the procedure include the updating of all the SWPs/RA and other WSH documentation to the prevailing legal requirements? <i>Check procedures for evidence.</i>	DR				Final Score: / 3

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BAND	S/No.	Guidance notes and standard specifications	Audit Question	DR/IP/PI	Results			Auditor's Remarks
					Yes	No	NA	
III	2.2.5	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. <i>N.B: Refer to Appendix 1A in the ConSASS Guidebook for further clarifications</i>	IP				
	2.2.6	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. <i>N.B: Refer to Appendix 1A in the ConSASS Guidebook for further clarifications</i>	DR				
	2.2.7	The organisation shall ensure that these applicable legal requirements and other requirements to which the organisation subscribes are taken into account in establishing, implementing and maintaining its OSH management system. (SS506 : 2009 Specification - 4.3.2)	Are the relevant WSH requirements up-to-date? Sample 3 relevant documents for the above requirements.	DR				
Final Score: / 3								
IV	2.2.8	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 evidences on the above requirements. <i>N.B: Refer to Appendix 1A in the ConSASS Guidebook for further clarifications</i>	IP				
	Final Score: / 1							
2.3			Objectives					
I	2.3.1	The organisation shall establish, implement and maintain documented occupational safety and health objectives, at each relevant function and level within the organisation. (SS506 : 2009 Specification - 4.3.3)	Are there established, implemented and maintained WSH objectives? Check procedure on the above requirement.	DR				
	2.3.2	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 the established objectives measurable and consistent with the WSH policy to achieve continual improvement? Verify documentation for evidence on the above requirement.	DR				
	2.3.3	The process of setting and reviewing objectives,and implementing programmes to achieve them, provides a mechanism for the organisation to continually improve its OSH management system and to improve its OSH performance (SS 506: 2009 Guidelines 4.3.3.1)	Are there procedures for the development and reviewing of WSH goals and objectives that are: 1. specific 2.measurable 3. achievable 4. relevant 5. Timely Check procedures for evidence.	DR				
Final Score: / 3								
II	2.3.4	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 interested parties. (SS506 : 2009 Specification - 4.3.3)	Does the project take into account the legal requirements and its WSH risks while establishing and reviewing the objectives? Check procedure and verify documentation on the above requirements	DR				

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					Yes	No	NA	
II	2.3.5	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? <i>Verify documentation for evidences on the above requirements.</i> <i>N.B: Refer to Appendix 1A in the ConSASS Guidebook for further clarifications</i>	DR				
II	2.3.6	The organisation shall develop OHS performance variables that correspond with the organisation's OHS hazards and risks and its goals and objectives. (UAI - PERFORM01)	Does the project record and maintain the WSH performance variables such as lost-workday injury case rates and injury incidence rates? <i>Verify documentation for evidences on the above requirements.</i>	DR				
II	2.3.7	The OHS goals and objectives shall be well-known throughout the organisation. (UAI - GOAL06)	Are site personnel aware of and understand the WSH goals and objectives relevant to their work activities, responsibilities, and/or authority? <i>Interview minimum 3 site personnel for evidences on the above requirements.</i>	IP				
Final Score: / 4								
III	2.3.8	The process of setting and reviewing objectives, and implementing programmes to achieve them, provides a mechanism for the organisation to continually improve its OSH management system and to improve its OSH performance (SS 506 specification 4.3.3.1)	Are the WSH objectives set: 1. specific 2. measurable 3. achievable 4. relevant 5. Timely <i>Verify objectives for evidences on the above requirements.</i>	DR				
III	2.3.9	The OHS objectives shall be measurable. (UAI - GOAL05)	Are the quantified goals and objectives determined based on available statistics or facts? <i>Verify goals and objectives for evidences on the above requirements.</i>	DR				
III	2.3.10	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 take into account the following factors and issues while establishing and reviewing the objectives: 1. Technological options 2. Financial, Operational and business requirements <i>Verify documentation for evidence on the above requirement.</i>	DR				
III	2.3.11	The OHS goals and objectives shall be well-known throughout the organisation. (UAI - GOAL06)	Have the WSH goals and objectives been cited in annual reports, action plans, personnel performance review criteria, and/or other relevant documents? <i>Verify documentation for evidences on the above requirement.</i>	DR				
Final Score: / 4								
IV	2.3.12	It is also advisable that the organisation records the background and reasons for setting the objectives, in order to facilitate their future review. (SS 506 Guidelines n - 4.3.3.1)	Does the project record the background and reasons for setting up the WSH objectives? <i>Verify documentation for evidences on the above requirement.</i> (e.g. check management review minutes; WSH committee minutes; reference from WSHMS manual; corporate direction; client inputs, etc)	DR				

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					Yes	No	NA	
IV	2.3.13	Objectives that are specific, measurable, achievable, relevant and timely can enable progress against the attainment of the objectives to be measured more readily by the organisation. (SS 506 : 2009 Guidelines -4.3.3.1)	In case objectives are not met, does project reestablish the WSH programme and implement it to achieve the set objectives? <i>Verify documentation for evidences on the above requirement.</i>	DR				
IV	2.3.14	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? <i>Verify documentation for evidences on the above requirement.</i> <i>N.B: Refer to Appendix 1A in the ConSASS Guidebook for further clarifications</i>	DR				
IV	2.3.15	During the establishment of the OSH objectives, it is useful to consider information or data from sources external to the organisation,e.g. from contractors or other interested parties. (SS 506 : 2009 Guidelines 4.3.3.1)	In establishing the WSH objectives, does project consider input from the external sources (e.g. Contractors & interested Parties)? <i>Verify documentation for evidences on the above requirement.</i>	DR				Final Score: / 4
2.4			OSH Management Programme(s)					
I	2.4.1	The organisation shall establish and maintain (an) OSH management programmes (s) for achieving its objectives. The objectives shall be measurable, where practicable, and consistent with the OSH policy, including the commitments to the prevention of injury and ill health, to compliance with applicable legal requirements and with other requirements to which the organisation subscribes, and to continual improvment. (SS506 Requirements- 4.3.3) A programme is an action plan for achieving all the OSH objectives, or individual OSH pbjectives. For complex issues more formal project plan can also be developed as part of the programmes (s). (SS506: 2009 Guidelines - 4.3.3.2)	Are WSH management programme(s) established and maintained for achieving all its objectives? <i>Verify documentation for evidences on the above requirement.</i>	DR				Final Score: / 1
II	2.4.2	The organisation shall establish, implement and maintain a programme (s) for achieving its objectives. Programme(s) shall include as a minimum: (a) Designation of responsibility and authority for achieving objectives at relevant functions and levels to the organisation; and (b) The means and time-frame by which the objectives are to be achieved. (SS506 : 2009 Requirements 4.3.3)	Does the management programme(s) include the designated responsibility and authority for achievement of the objectives at relevant functions and levels of the project. <i>Verify relevant functions and levels of the project for evidences on responsibility and authority for achievement of the objectives.</i>	DR/IP				
II	2.4.3	The organisation shall establish, implement and maintain a programme (s) for achieving its objectives. Programme(s) shall include as a minimum: (a) Designation of responsibility and authority for achieving objectives at relevant functions and levels to the organisation; and (b) The means and time-frame by which the objectives are to be achieved. (SS506: 2009 Requirements 4.3.3)	Does the management programme(s) include the means (e.g. risk controls, promotion campaign) and time-frame by which objectives are to be achieved. <i>Verify documentation for evidences on risk controls (minimum), promotion campaign or other means.</i>	DR/IP				
II	2.4.4	The OSH Programme should be communicated (eg via training and / or group briefing sessions, etc) to relevant personnel. (SS 506 Guidelines 4.3.3.2)	Are the WSH Programme made known and available to all relevant personnel? <i>Check for documentation / Interview relevant personnel for inputs / Physical display for evidence</i>	DR/IP/PI				Final Score: / 3

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					Yes	No	NA	
III	2.4.5	In considering the means necessary to establish the programme (s) the organisation should examine the resources required (financial, human, infrastructure) and the tasks to be performed. Depending on the complexity of the programme established to achieve a particular objective, the organisation should assign responsibility, authority, and completion dates for individual tasks to ensure that the OSH objective can be accomplished within the overall timeframe. <i>SS506 : 2009 Guidelines 4.3.3.2</i>	Are resources delegated to ensure the programme are met? <i>Check document for evidence / Interview designated personnel for inputs.</i>	DR/IP				
III	2.4.6	The organisation shall develop and maintain a document and record management system that supports OHSMS formulation, implementation, and evaluation activities. <i>(UAI - DOC01)</i>	Are the process of development of the management programme(s) documented? <i>Verify documentation for evidences on requirement.</i>	DR				
III	2.4.7	The organisation shall have a mechanism to ensure that competent and qualified personnel are involved in OHSMS formulation, implementation, and evaluation activities. <i>(UAI - EXPERT01)</i>	Did the project determine and provide the competent and qualified personnel necessary to implement the management programme? <i>Check documents and interview designated personnel for inputs.</i>	DR&IP				
Final Score: / 3								
IV	2.4.8	The OSH management programme(s) shall be reviewed at regular and planned intervals, and adjusted as necessary, to ensure that the objectives are achieved. <i>SS506 Requirements 4.3.3</i> Reviews of programme(s) need to be conducted regularly, and the programme(s) adjusted or modified where necessary. This can be part of management review, or more frequently. <i>SS506 : 2009 Guidelines 4.3.3.2</i>	Are the WSH management programme(s) reviewed at regular and planned intervals? <i>Verify documentation for evidences on regular and planned review.</i>	DR				
IV	2.4.9	OSHMS planning and development functions shall be initiated when deficiencies are found that indicate design changes are necessary. <i>(UAI - PLAN02)</i>	Are reviews and rectification actions taken whenever objectives are not met within the stipulated timeframe? <i>Verify documentation for evidences on require actions implemented within the stipulated timeframe.</i>	DR				
Final Score: / 2								
3			Implementation and operation					
3.1			Structure and responsibility					
I	3.1.1	Top management shall demonstrate its commitment by defining roles, allocating responsibilities and accountabilities, and delegating authorities, to facilitate effective OSH management; roles, responsibilities, accountabilities, and authorities shall be documented and communicated <i>(SS506: 2009 Requirements - 4.4.1)</i>	Are the roles, responsibilities and authorities of personnel who manage, perform and verify activities having an effect on the WSH risks of the project's activities, facilities and processes defined? <i>Verify documentation for evidences on the above requirement.</i>	DR				
Final Score: / 1								
II	3.1.2	The organisation shall ensure that persons in the workplace take responsibility for aspects of OSH over which they have control, including adherence to the organisation's applicable OSH requirements. <i>(SS506 : 2009 : Guidelines : 4.4.1)</i>	Are the roles, responsibilities and authorities communicated to and understood by the personnel with WSH responsibilities? <i>Interview minimum 3 personnel and see if they know and understand the roles, responsibilities and authorities.</i>	IP				

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					Yes	No	NA	
II	3.1.3	Top management shall demonstrate its commitment by ensuring the availability of resources essential to establish, implement, maintain and improve the OSH management system; <i>SS506 : 2009 : Guidelines 4.4.1</i>	Are necessary resources (in particular human resources) identified for the implementation, control and improvement of the WSH management system? (Amount of resources needed must be clearly identified) <i>Check documentation for clear identification of resources.</i>	DR				Final Score: / 2
III	3.1.4	All managers should provide visible demonstration of their commitment to 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. <i>(SS506: 2009 : Guidelines 4.4.1)</i>	Are there clear evidence that the Management appointee / Project manager is committed to continual improvement of WSH performance? <i>Check endorsed policy and minutes of meeting for commitment towards continual improvement of WSH performance and interview for verification.</i> <i>N.B: Refer to Appendix 1A in the ConSASS Guidebook for further clarifications</i>	DR & IP				
III	3.1.5	All those with management responsibility shall demonstrate their commitment to the continual improvement of OSH performance. <i>(SS506: 2009 Requirements - 4.4.1)</i>	Are there clear evidence that the Line Management are committed to continual improvement of WSH performance? <i>Check endorsed policy and attendance records of meetings for commitment towards continual improvement of WSH performance and interview for verification.</i>	DR & IP				
III	3.1.6	The organisation shall ensure that persons in the workplace take responsibility for aspects of OSH over which they have control, including adherence to the organisation's applicable OSH requirements. <i>(SS506: 2009 Requirements - 4.4.1)</i>	Are the roles, responsibilities and authorities of personnel with WSH responsibilities known and understood within the project? <i>Interview minimum 3 personnel and see if they know and understand the roles of personnel with WSH responsibilities.</i>	IP				
III	3.1.7	The role and responsibilities of any specialist OSH function within the organisation should be appropriately defined to avoid ambiguity with those of management at all levels (as managers would usually be expected to have responsibility for ensuring that OSH is managed effectively in their area of control). This should include arrangements to resolve any conflicts between OSH issues and operational considerations including, where appropriate, escalation to a higher level of management. <i>SS506 : 2009 : Guidelines 4.4.1</i>	Are the roles, responsibilities and authorities of personnel who manage, perform and verify activities having an effect on the WSH risks of the project's activities, facilities and processes documented? <i>Check the procedure for definition and documentation.</i>	DR				
III	3.1.8	The organisation shall appoint a member (s) of top management with specific responsibility for OSH, irrespective of other responsibilities, with defined roles and authority for: (a) ensuring that OSH management system is established, implemented and maintained in accordance with this SS506 Standard; and (b) ensuring that reports on the performance of the OSH management system are presented to top management for review and used as a basis for improvement of the OSH management system. <i>(SS506 : 2009 Requirements - 4.4.1)</i>	Does the management appointee ensure that the WSH management system requirements are established, implemented and maintained? <i>Check documentation for the above measure and interview relevant personnel for verification</i>	DR & IP				

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					Yes	No	NA	
III	3.1.9	The organisation shall appoint a member (s) of top management with specific responsibility for PSH, irrespective of other responsibilities, with defined roles and authority for ensuring that reports on the performance of the OSH management system are presented to top management for review and used as a basis for improvement of the OSH management system. (SS506: 2009 Requirements - 4.4.1)	Does the management appointee/ Project Manager ensure that reports on the performance of the WSH management system are presented to top management for review and as a basis for improvement of the WSH management system <i>Check documentation for the above requirement.</i>	DR				
III	3.1.10	Senior management shall ensure that appropriate authority has been delegated to personnel who have OHS responsibilities and are accountable for OHS performance. (UAI - ACCOUNT02)	Do personnel with WSH responsibilities perform their duties as per job description? <i>Check documentation for implementation or conduct a physical inspection for at least 3 critical responsibilities.</i>	DR/PI				
III	3.1.11	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 supplied by the project? <i>Check documentations or reports and check if the resources are supplied by the project and interview min 3 safety personnel / committee for verification.</i> <i>N.B: Refer to Appendix 1A in the ConSASS Guidebook for further clarifications</i>	DR & IP				
Final Score: / 8								
IV	3.1.12	The organisation shall define OHS roles and responsibilities of line personnel, technicians, support staff, etc. (UAI - ACCOUNT03)	Are the job descriptions of personnel with WSH responsibilities developed in relation to the risk assessment, SWP and WSH management programme? <i>Check job scope of at least 3 relevant personnel</i>	DR				
IV	3.1.13	Management shall ensure that appropriate authority has been delegated to personnel who have OHS responsibilities and are accountable for OHS performance. (UAI - ACCOUNT02)	Are there measures to ensure that personnel who have WSH responsibilities are given the appropriate authority to carry out their WSH duties? <i>Check documentation for the above measure and interview relevant personnel for verification.</i>	DR & IP				
IV	3.1.14	The organisation shall designate a management representative who will 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? <i>Check documentation for implementation.</i> <i>N.B: Refer to Appendix 1A in the ConSASS Guidebook for further clarifications</i>	DR				

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					Yes	No	NA	
IV	3.1.15	The organisation shall define OHS roles and responsibilities of line personnel, technicians, support staff, etc. (UAI - ACCOUNT03)	Is an assessment of WSH performance included in the performance evaluations of personnel with WSH responsibilities? Their performance should be evaluated based on the WSH goals and objectives that they are accountable for. <i>Check documentation for the inclusion of WSH performance in individual performance review.</i>	DR				Final Score: / 4
	3.2		Training, awareness and competence					
I	3.2.1	All employees shall be provided OHS training that informs them of potential occupational hazards and the means through which these potential hazards are controlled. (UAI - TRAIN01) The occupier shall be familiar with the statutory training requirements and ensure that all personnel possess relevant training qualifications. Such statutory training requirements shall include those as defined in the Factories Act and its subsidiary legislation. (CP 79 - Section 3.3.1) The occupier shall establish and maintain a list of all statutory training requirements. (CP 79 - Section 3.3)	Are all relevant legislative requirements in the prevailing WSH regulations, on training and competency adhered to? <i>Check for an updated list of statutory training requirements and sample 3 records for evidence of adherence.</i>	DR				
	3.2.2	The organisation shall ensure that any person(s) under its control performing 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)	Are there procedures to ensure the competence of the person(s) under the control of the project, such that he can perform tasks which impact WSH? <i>Check for procedures.</i>	DR				
I	3.2.3	The organisation shall identify training needs associated with its OSH risks and its OSH management system. It shall provide training or take other action to meet these needs, evaluate the effectiveness of the training or action taken, and retain associated records. (SS506 : 2009 Requirements - 4.4.2)	Are there procedures to identify training needs associated with its WSH risks and its WSH management systems? <i>Check for procedures.</i>	DR				
I	3.2.4	The organisation shall establish, implement and maintain a procedure(s) to make persons working under its control aware of: (a) the OSH consequences, actual or potential, of their work activities, their behaviour and the OSH benefits of improved personal performance; (b) their roles and responsibilities and importance in achieving conformity to the OSH policy and procedures and to the requirements of the OSH management system, including emergency preparedness and response requirements; and (c) the potential consequences of departure from specific procedures. (SS506 : 2009 Requirements - 4.4.2)	Are there procedures to make persons working under the control of the project aware of WSH issues from their work/ roles? <i>Check for procedures.</i>	DR				Final Score: / 4
	3.2.5	The organisation shall ensure that any person(s) under its control performing 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, include employees, contractors and subcontractors? <i>Check procedures for evidence.</i>	DR				
II	3.2.6	The organisation shall ensure that any person(s) under its control performing 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? <i>Check procedures for evidence.</i> <i>N.B: Refer to Appendix 1A in the ConSASS Guidebook for further clarifications</i>	DR				

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					Yes	No	NA	
II	3.2.7	The organisation shall ensure that any person(s) under its control performing 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? <i>Check procedures for evidence.</i> <i>N.B: Refer to Appendix 1A in the ConSASS Guidebook for further clarifications</i>	DR				
II	3.2.8	The organisation shall ensure that any person(s) under its control performing 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 experience of the individual? <i>Check procedures for evidence.</i>	DR				
II	3.2.9	The organisation shall identify training needs associated with its OSH risks and its OSH management system. It shall provide training or take other action to meet these needs, evaluate the effectiveness of the training or action taken, and retain associated records. (SS506 : 2009 Requirements - 4.4.2)	Does the procedure to identify training needs consider the roles and its associated responsibilities and authorities? <i>Check procedures for evidence.</i>	DR				
II	3.2.10	The organisation shall identify training needs associated with its OSH risks and its OSH management system. It shall provide training or take other action to meet these needs, evaluate the effectiveness of the training or action taken, and retain associated records. (SS506 : 2009 Requirements - 4.4.2)	Does the procedure to identify training needs take into account WSH risks? <i>Check procedures for evidence.</i>	DR				
II	3.2.11	The organisation shall identify training needs associated with its OSH risks and its OSH management system. It shall provide training or take other action to meet these needs, evaluate the effectiveness of the training or action taken, and retain associated records. (SS506 : 2009 Requirements - 4.4.2)	Does the procedure to identify training needs take into account individual capacities, such as literacy and language skills? <i>Check procedures for evidence.</i>	DR				
II	3.2.12	The organisation shall identify training needs associated with its OSH risks and its OSH management system. It shall provide training or take other action to meet these needs, evaluate the effectiveness of the training or action taken, and retain associated records. (SS506 : 2009 Requirements - 4.4.2)	Is there procedure to evaluate effectiveness of training by: (i) written or oral examination, or (ii) practical demonstration, or (iii) observation of behaviour change over time. <i>Check procedures for evidence.</i>	DR				
II	3.2.13	The organisation shall identify training needs associated with its OSH risks and its OSH management system. It shall provide training or take other action to meet these needs, evaluate the effectiveness of the training or action taken, and retain associated records. (SS506 : 2009 Requirements - 4.4.2)	Are the training records maintained? <i>Check for evidence.</i>	DR				
II	3.2.14	The organisation shall establish, implement and maintain a procedure(s) to make persons working under its control aware of: (a) the OSH consequences, actual or potential, of their work activities, their behaviour and the OSH benefits of improved personal performance; (SS506 : 2009 Requirements - 4.4.2)	Does the project's procedure(s) include making persons working under its control aware of the: i) WSH consequences of their work activities? ii) Importance of conforming to their WSHMS (including WSH policy and procedures)? and iii) Potential consequences of deviation from specific procedures? <i>Check procedures for evidence.</i>	DR				
Final Score: / 10								
III	3.2.15	The organisation shall ensure that any person(s) under its control performing 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)	Are person(s) performing tasks impacting WSH, are competent in terms of education, training or experience? <i>Check on 3 site personnel (including 1 subcontractor staff) to see if they are competent for their assigned work, in terms of education, training or experience.</i>	IP				

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					Yes	No	NA	
III	3.2.16	The organisation shall ensure that any person(s) under its control performing tasks that can impact on OSH is (are) competent on the basis of appropriate education, training or experience, and shall retain associated records. <i>(SS506 : 2009 Requirements - 4.4.2)</i>	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. <i>N.B: Refer to Appendix 1A in the ConSASS Guidebook for further clarifications</i>	IP				
III	3.2.17	The organisation shall identify training needs associated with its OSH risks and its OSH management system. It shall provide training or take other action to meet these needs, evaluate the effectiveness of the training or action taken, and retain associated records. <i>(SS506 : 2009 Requirements - 4.4.2)</i>	Does the procedure to identify training needs take into account of WSH risks? Interview the training facilitator to check if WSH risks are taken into account when identifying training needs.	IP				
III	3.2.18	The organisation shall identify training needs associated with its OSH risks and its OSH management system. It shall provide training or take other action to meet these needs, evaluate the effectiveness of the training or action taken, and retain associated records. <i>(SS506 : 2009 Requirements - 4.4.2)</i>	Do the training material or records assess individual's capacities such as literacy and language skills? Check training materials or records for evidence.	DR				
III	3.2.19	The organisation shall identify training needs associated with its OSH risks and its OSH management system. It shall provide training or take other action to meet these needs, evaluate the effectiveness of the training or action taken, and retain associated records. <i>(SS506 : 2009 Requirements - 4.4.2)</i>	Is the effectiveness of the training evaluated? Check for evidence that effectiveness of training is evaluated, either through records of written/ oral examination, records of practical demonstration, records of observation or certificate of successful completion.	DR				
III	3.2.20	The organisation shall establish, implement and maintain a procedure(s) to make persons working under its control aware of: (a) the OSH consequences, actual or potential, of their work activities, their behaviour and the OSH benefits of improved personal performance; <i>(SS506: 2009 Requirements - 4.4.2)</i>	Are persons working under the control of the project aware of the: i) WSH consequences of their work activities? ii) Importance of conforming to their WSHMS (including WSH policy and procedures)? and iii) Potential consequences of deviation from specific procedures? Interview 3 people (including 1 subcontractor) for evidence.	IP				
III	3.2.21	training in local OSH arrangements and hazards, risks and precautions to be taken and procedures to be followed, this training being provided before work commences. <i>(SS506 : 2009 Guidelines - 4.4.2 Process)</i> All supervisors / workers shall undergo in-house safety training before they are allowed to commence work. The training program shall include the safe work practices and in-house safety rules and regulations. <i>(CP 79 - Section 3.5 & 3.6)</i>	Are there induction training for new employees or personnel with new job scope to ensure that they are familiar with the necessary risk controls before they start work at worksite? Sample 3 records for induction training.	DR				
IV	3.2.22	All employees shall be provided OHS training that informs them of potential occupational hazards and the means through which these potential hazards are controlled. <i>(UAI - TRAIN01)</i>	Does training cover workers' rights in terms of whistle blowing and WSH? Check documentation to see if training cover worker's rights. <i>N.B: Refer to Appendix 1A in the ConSASS Guidebook for further clarifications</i>	DR				

Final Score: / 7

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					Yes	No	NA	
IV	3.2.23	The organisation shall ensure that any person(s) under its control performing 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)	Are workers effectively briefed and trained on the Risk Assessment? Interview 3 workers doing 3 different critical activities and see if they are able to list out the critical control measures listed in the RA.	IP				
IV	3.2.24	The organisation shall develop a means through which training system 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. N.B: Refer to Appendix 1A in the ConSASS Guidebook for further clarifications	DR				
IV	3.2.25	The training system shall include a means to maintain and track personnel training records and histories, and a mechanism to ensure that initial and refresher training is provided as necessary. (UAI - TRAIN06)	Is there a tracking system to maintain and track the training records of employees? Verify records for evidence.	DR				
IV	3.2.26	Ongoing and refresher training shall be provided. (UAI - TRAIN04)	Is there any refresher training for employees (excluding mandatory refresher training)? Verify records for evidence.	DR				
IV	3.2.27	The training system includes management training on how to manage the OHSMS and other important OSH issues. (UAI - TRAIN02) All management personnel shall undergo safety training which shall include safety policy, safety management system, safety organisation, statutory requirements on safety and their duties and responsibilities in safety. (CP 79 - Section 3.4)	Are top management trained in WSH management system to enable them to champion the WSH review and improvements? Check training records for top management.	DR				
3.3			Consultation and communication					Final Score: / 6
I	3.3.1	With regards to its OSH hazards and OSH management system, the organisation shall establish, implement and maintain a procedure(s) for: a) internal communication among the various levels and functions of the organisation; (SS506 : 2009 Specifications- 4.4.3.1a)	Does the project have procedures for internal communication of WSH hazards and WSH management system? Check for procedures.	DR				
I	3.3.2	With regards to its OSH hazards and OSH management system, the organisation shall establish, implement and maintain a procedure(s) for: b) communication with contractors and other visitors to the workplace; and (SS506 : 2009 Specifications- 4.4.3.1b)	Does the project have procedures for communication of WSH hazards and WSH management system with contractors, other visitors and affected external parties of the workplaces? Check for procedures.	DR				
I	3.3.3	With regards to its OSH hazards and OSH management system, the organisation shall establish, implement and maintain a procedure(s) for: c) receiving, documenting and responding to relevant communications from external interested parties. (SS506 : 2009 Specifications - 4.4.3.1c)	Does the project have procedures for receiving, documenting and responding to relevant communications on WSH hazards and WSH management system from external interested parties? Check for procedures.	DR				
I	3.3.4	The organisation shall establish, implement and maintain a procedure(s) for: a) participation of workers by their: - appropriate involvement in hazard identification, risk assessments and determination of controls; - appropriate involvement in incident investigation; - involvement in the development and review of OSH policies and objectives; - consultation where there are any changes that affect their OSH; and - representation on OSH matters Workers shall be informed about their participation arrangements, including who is their representative(s) on OSH matters. (SS506 : 2009 Specifications - 4.4.3.2a)	Does the project have a procedure on the participation of employees in WSH matters? Check for procedures.	DR				

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					Yes	No	NA	
I	3.3.5	The organisation shall establish, implement and maintain a procedure(s) for: b) consultation with contractors where there are changes that affect their OSH. The organisation shall ensure that, when appropriate, relevant external interested parties are consulted about pertinent OSH matters. (SS506: 2009 Requirements - 4.4.3.2b)	Does the project have a procedure on the consultation with contractors in WSH matters? <i>Check for procedures.</i>	DR				
I	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 chairmain 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? <i>Check for WSH committee.</i> <i>N.B: Refer to Appendix 1A in the ConSASS Guidebook for further clarifications</i>	DR				
	3.3.7	The occupier shall provide, erect and maintain safety bulletin boards at suitable locations for display of safety information such as safety policy, safety news, safety posters and other safety promotional materials. (CP 79 - Section 7.4)	Are safety bulletin boards provided and maintained at suitable locations? <i>Check safety bulletin boards for updated & relevant contents</i>	PI				
Final Score: / 7								
II	3.3.8	The organisation shall ensure that the OHSMS has a clearly defined and functioning communication system by which information, data, notifications and other required communications are transmitted in a timely manner to affected parties. (UAI - COMSYS01)	Does the communication system procedure define the manner in which information generated during health and safety meetings is used to affect WSHMS? <i>Check procedure for the above requirement.</i>	DR				
II	3.3.9	Information communication between the various levels and various functions of the organisation should include information: - relating to management's commitment to the OSH management system (e.g. Programmes undertaken and resources committed to improving OSH performance) - about OSH objectives and other continual improvement activities (SS506: : 2009 Guidelines- 4.4.3.2.2)	Does the internal communication procedure include information on management's commitment to the WSH management system and objectives? <i>Check procedures for evidence.</i>	DR				
II	3.3.10	Information communication between the various levels and various functions of the organisation should include information: - concerning the identification of hazards and risks (e.g. Information on process flows, material in use, equipment specifications and observation of work practices) - relating to process in eliminating OSH hazards and risks (e.g. status reports showing progress of projects that have been completed or are underway) (SS506:: 2009 Guidelines- 4.4.3.2.2)	Does the internal communication procedure include information on the identification of hazards and risks and the process of eliminating the hazards and risks? <i>Check procedures for evidence.</i>	DR				
II	3.3.11	Information communication between the various levels and various functions of the organisation should include information: - relating to incident investigation (e.g. The type of incidents that are taking place, factors that can contribute to the occurrence of incidents, results of incident investigations) (SS506: : 2009 Guidelines- 4.4.3.2.2)	Does the internal communication procedure include information relating to the findings arising from investigation of incidents? <i>Check procedures for evidence.</i>	DR				
II	3.3.12	The organisation should have arrangements in place to clearly communicate its OSH requirements to contractors. The procedure(s) should be appropriate to the OSH hazards and risks associated with the work to be performed. In addition to communicating performance requirements, the organisation should communicate the consequences associated with non-conformity with OSH requirements. (SS506: : 2009 Guidelines- 4.4.3.2.3)	Does the communication to contractors include the WSH performance requirements for contractors? <i>Check procedures for evidence.</i>	DR				
II	3.3.13	The organisation should have arrangements in place to clearly communicate its OSH requirements to contractors. The procedure(s) should be appropriate to the OSH hazards and risks associated with the work to be performed. In addition to communicating performance requirements, the organisation should communicate the consequences associated with non-conformity with OSH requirements. (SS506: : 2009 Guidelines- 4.4.3.2.3)	Does the communication to contractors include the consequence of non-conformity with WSH requirements? <i>Check procedures for evidence.</i>	DR				

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					Yes	No	NA	
II	3.3.14	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? <i>Check procedures for evidence.</i>	DR				
II	3.3.15	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? <i>Check procedures for evidence.</i>	DR				
II	3.3.16	The organisation shall establish, implement and maintain a procedure(s) for: a) participation of workers by their: - appropriate involvement in hazard identification, risk assessments and determination of controls; - appropriate involvement in incident investigation; - involvement in the development and review of OSH policies and objectives; - consultation where there are any changes that affect their OSH; and - representation on OSH matters Workers shall be informed about their participation arrangements, including who is their representative(s) on OSH matters. (SS506 : 2009 Guidelines- 4.4.3.2a)	Does the procedures for employees participation include getting workers involvement in hazard identification, risks assessments and determination of controls? <i>Check procedures for evidence.</i>	DR				
II	3.3.17	The organisation shall establish, implement and maintain a procedure(s) for: a) participation of workers by their: - appropriate involvement in hazard identification, risk assessments and determination of controls; - appropriate involvement in incident investigation; - involvement in the development and review of OSH policies and objectives; - consultation where there are any changes that affect their OSH; and - representation on OSH matters Workers shall be informed about their participation arrangements, including who is their representative(s) on OSH matters. (SS506 : 2009 Guidelines- 4.4.3.2a)	Does the procedures for employees participation include getting workers involvement in recommending improvements to WSH performance? <i>Check procedures for employees participation and means of communication.</i>	DR				
II	3.3.18	The organisation shall establish, implement and maintain a procedure(s) for: a) participation of workers by their: - appropriate involvement in hazard identification, risk assessments and determination of controls; - appropriate involvement in incident investigation; - involvement in the development and review of OSH policies and objectives; - consultation where there are any changes that affect their OSH; and - representation on OSH matters Workers shall be informed about their participation arrangements, including who is their representative(s) on OSH matters. (SS506 : 2009 Guidelines- 4.4.3.2a)	Does the procedures for worker participation include getting workers involvement in consultation on changes that affect WSH, eg. Introduction of new (forthcoming) equipment/ surroundings/ materials/ processes? <i>Check procedures for evidence.</i>	DR				

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					Yes	No	NA	
II	3.3.19	In considering the need for consultation with contractors on changes that can affect their OSH, the organisation should take into account of the following: - new or unfamiliar hazards (including those that can be introduced by contractor) - reorganisation - new or amended controls - changes in materials, equipment, exposures, etc - changes in emergency arrangements - changes in legal or other requirements. (SS506 : 2009 Guidelines 4.4.3.4)	Does the procedures for consultation with contractors include new or unfamiliar hazards and the respective controls? Check procedures for evidence. <i>N.B: Refer to Appendix 1A in the ConSASSS Guidebook for further clarifications</i>	DR				
II	3.3.20	In considering the need for consultation with contractors on changes that can affect their OSH, the organisation should take into account of the following: - new or unfamiliar hazards (including those that can be introduced by contractor) - reorganisation - new or amended controls - changes in materials, equipment, exposures, etc - changes in emergency arrangements - changes in legal or other requirements. (SS506 : 2009 Guidelines 4.4.3.4)	Does the procedures for consultation with contractors include changes in emergency arrangements? Check procedures for evidence.	DR				Final Score: / 13
III	3.3.21	The communication system shall include regular health and safety meetings where OHS issues are discussed, including potential modification of work practices and identification of new hazard and risks. (UAI - COMSYS05) The minutes of safety committee meetings shall be properly recorded and maintained. All decisions and follow-up actions shall be documented. (CP 79 - Section 4.3)	Have safety & health committee meeting and site coordination meetings been documented? Check for documentation (Legal requirements minimum).	DR				
III	3.3.22	The organisation shall ensure that the health and safety committee is a viable route for the expression of employee concerns and input into OHS issues. (UAI - EMPLOY06)	Does the WSH committee(s) meet on a periodic basis to discuss issues (at least monthly for WSH committee)? Check documentation for meeting frequency.	DR				
III	3.3.23	The safety and health committee participates in OHSMS formulation, implementation, and evaluation activities. (UAI - EMPLOY05 CRITERION06)	Does the WSH committee participate in implementation and evaluation of WSHMS? Check documentation for evidence.	DR				
III	3.3.24	The occupier shall establish and maintain programs to promote safety at the worksite. The promotion programmes are to demonstrate the management's commitment towards establishing and maintaining a safe working environment. (CP 79 - Section 7.2) The promotional activities shall include the following: a) display of safety policy b) display of incident statistics and pictures c) display of safety banners and posters d) distribution of safety handbooks and brochures e) participation in external safety activities f) conduct of in-house safety exhibition and safety talks g) demonstration of safe work procedures h) screening of safety videos or slides i) setting up of safety improvement teams j) demonstration of first-aid drills k) conduct of emergency drills and exercises The occupier shall ensure that all personnel participate in the safety promotional activities. (CP 79 - Section 7.3)	Does the project establish and maintain programs to promote safety at worksite? Check for programs established and maintained.	DR/ PI				

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					Yes	No	NA	
III	3.3.25	Information communication between the various levels and various functions of the organisation should include information: - relating to management's commitment to the OSH management system (e.g. Programmes undertaken and resources committed to improving OSH performance) - about OSH objectives and other continual improvement activities (SS506:: 2009 Guidelines- 4.4.3.2.2)	Does the internal communication include information on management's commitment to the WSH management system and objectives. Sample 3 communication documents (e.g. Circulars, minutes, internal training, management briefing to staff, etc) for evidence.	DR				
III	3.3.26	Information communication between the various levels and various functions of the organisation should include information: - concerning the identification of hazards and risks (e.g. Information on process flows, material in use, equipment specifications and observation of work practices) - relating to process in eliminating OSH hazards and risks (e.g. status reports showing progress of projects that have been completed or are underway) (SS506: : 2009 Guidelines- 4.4.3.2.2)	Does the internal communication include information on the identification of hazards and risks and the process of eliminating the hazards and risks? Sample 3 communication document (e.g. Circulars, minutes, internal training, management briefing to staff, etc) for evidence.	DR				
III	3.3.27	Information communication between the various levels and various functions of the organisation should include information: - relating to incident investigation (e.g. The type of incidents that are taking place, factors that can contribute to the occurrence of incidents, results of incident investigations) (SS506: Guidelines-4.4.3.2.2)	Does the internal communication include information relating to the findings arising from investigation of incidents? Sample 3 communications document (e.g. Circulars, minutes, internal training, management briefing to staff, etc) for evidence.	DR				
III	3.3.28	The organisation should have arrangements in place to clearly communicate its OSH requirements to contractors. The procedure(s) should be appropriate to the OSH hazards and risks associated with the work to be performed. In addition to communicating performance requirements, the organisation should communicate the consequences associated with non-conformity with OSH requirements. (SS506: : 2009 Guidelines 4.4.3.2.3)	Do communication to contractors include the WSH performance requirements for contractors? Interview 3 contractors to check that they are aware of their WSH performance requirements stipulated by the project.	IP				
III	3.3.29	The organisation should have arrangements in place to clearly communicate its OSH requirements to contractors. The procedure(s) should be appropriate to the OSH hazards and risks associated with the work to be performed. In addition to communicating performance requirements, the organisation should communicate the consequences associated with non-conformity with OSH requirements. (SS506: : 2009 Guidelines 4.4.3.2.3)	Does communication to contractors include the consequence of non-conformity with WSH requirements? Interview 3 contractors to check that they are aware of the consequence of non-conformity with WSH requirements stipulated by the project.	IP				
III	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? N.B: Refer to Appendix 1A in the ConSASS Guidebook for further clarifications	DR/IP				

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					Yes	No	NA	
III	3.3.31	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? <i>N.B: Refer to Appendix 1A in the ConSASS Guidebook for further clarifications</i>	DR/IP				
III	3.3.32	Workers shall be informed about their participation arrangements, including who is their representative(s) on OSH matters. (SS506: 2009 : Guidelines- 4.4.3.2)	Are employees aware of their employee WSH representative(s) and specified management appointee? Obtain the names of representatives from management and verify with these employees.	IP				
III	3.3.33	The organisation shall establish, implement and maintain a procedure(s) for: a) participation of workers by their: - appropriate involvement in hazard identification, risk assessments and determination of controls; - appropriate involvement in incident investigation; - involvement in the development and review of OSH policies and objectives; - consultation where there are any changes that affect their OSH; and - representation on OSH matters Workers shall be informed about their participation arrangements, including who is their representative(s) on OSH matters. (SS506: 2009 Guidelines- 4.4.3.2a)	Does the implementation of employees participation include getting employees involvement in hazard identification, risks assessments and determination of controls? Interview 3 relevant personnel to confirm they were involved in hazard identification, risks assessments and determination of controls.	IP				
III	3.3.34	The organisation shall establish, implement and maintain a procedure(s) for: a) participation of workers by their: - appropriate involvement in hazard identification, risk assessments and determination of controls; - appropriate involvement in incident investigation; - involvement in the development and review of OSH policies and objectives; - consultation where there are any changes that affect their OSH; and - representation on OSH matters Workers shall be informed about their participation arrangements, including who is their representative(s) on OSH matters. (SS506: 2009 Guidelines- 4.4.3.2a)	Check the implementation of employees participation, include getting employees involvement in recommending improvements to WSH performance? Interview 3 relevant personnel to confirm that there is a procedure/ framework in place for them to suggest improvements to WSH performance, or check for evidence for such a framework, e.g. staff suggestion scheme.	IP/ PI				
III	3.3.35	The organisation shall establish, implement and maintain a procedure(s) for: a) participation of workers by their: - appropriate involvement in hazard identification, risk assessments and determination of controls; - appropriate involvement in incident investigation; - involvement in the development and review of OSH policies and objectives; - consultation where there are any changes that affect their OSH; and - representation on OSH matters Workers shall be informed about their participation arrangements, including who is their representative(s) on OSH matters. (SS506: 2009 Guidelines- 4.4.3.2a)	Does the implementation of employees participation, include getting employees involvement in consultation on changes that affect WSH, eg. Introduction of new equipment/ surroundings/ materials/ processes? Identify a change in the workplace. Interview 3 workers to confirm they were involved in the introduction of changes in the work.	IP				

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					Yes	No	NA	
III	3.3.36	In considering the need for consultation with contractors on changes that can affect their OSH, the organisation should take into account of the following: - new or unfamiliar hazards (including those that can be introduced by contractor) - reorganisation - new or amended controls - changes in materials, equipment, exposures, etc - changes in emergency arrangements - changes in legal or other requirements. (SS506: 2009 : Guidelines - 4.4.3.4)	Does the implementation of consultation with contractors include new or unfamiliar hazards and the respective controls, emergency procedures or changes in legal and other requirements. Interview 3 contractors for evidence.	IP				Final Score: / 16
IV	3.3.37	The organisation shall ensure that the health and safety committee is a viable route for the expression of employee concerns and input into OHS issues. (UAI - EMPLOY06) Members of the committee shall be given the necessary support to perform their duties. (CP 79 - Section 4.3)	Does the management support the WSH committee's suggestions on OHS issues? Interview WSH committee members for verification.	IP				
IV	3.3.38	The occupier shall, as part of the safety promotional activities, establish procedures to recognise, acknowledge and reward individuals and teams with good safety performance. (CP 79 - Section 7.5)	Does the project establish and implement procedure to recognise, acknowledge and reward individuals and teams with good WSH performance? Check for evidence to see if recognition, acknowledgement and rewarding system is established and implemented for WSH performance and interview WSH Committee members for verification	DR & IP				
IV	3.3.39	The communication system shall include a mechanism by which employee OSH concerns and observations can be transmitted to the appropriate person without fear of reprisal. (UAI - COMSYS03)	Is there a system in place to track the WSH hazards or risks identified by employees to ensure that all issues raised are closed? Check for system and sample 3 issues raised.	DR				
IV	3.3.40	The communication system shall include a mechanism by which employee OSH concerns and observations can be transmitted to the appropriate person without fear of reprisal. (UAI - COMSYS03)	Have the persons to whom WSH concerns should be directed been identified in the communication procedures? Check the procedures if there is a open door / whistle blowing policy.	DR				Final Score: / 6
IV	3.3.41	The communication system shall include a mechanism by which employee OSH concerns and observations can be transmitted to the appropriate person without fear of reprisal. (UAI - COMSYS03)	Are surveyed employees able to bring forward WSH concern without fear of reprisal? Interview minimum 3 personnel for evidence.	IP				
IV	3.3.42	The communication system shall include a mechanism by which employee OSH concerns and observations can be transmitted to the appropriate person without fear of reprisal. (UAI - COMSYS03)	Are the right of an employee to refuse to work due to WSH hazards or risks highlighted in the communication procedures? Check if stated in procedures/documentation.	DR				
	3.4		Documentation					
I	3.4.1	The organisation shall establish and maintain up-to-date information in a suitable medium such as paper or electronic form, that describes the OSH policy and objectives. (SS506: 2009: Requirements - 4.4.4)	Does the project establish and maintain up-to-date information that describes the WSH policy and objectives? Check for relevant documents for evidence.	DR				Final Score: / 2
I	3.4.2	The organisation shall establish and maintain up-to-date information in a suitable medium such as paper or electronic form, that describes the main elements of the management system that ensure the effective planning, operation and control of processes that relate to the management of its OSH risks. (SS506: 2009: Requirements - 4.4.4)	Does the project establish and maintain up-to-date information that describes the main elements of the management system that ensure the effective planning, operation and control of processes that relate to the management of its WSH risks? Check for relevant documents for evidence.	DR				

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					Yes	No	NA	
II	3.4.3	The organisation shall establish and maintain up-to-date information in a suitable medium such as paper or electronic form, that is sufficient to ensure it is adequately understood and effectively and efficiently operated (SS506: 2009 -Guidelines 4.4.4)	Are the WSH management system maintained in a suitable medium that ensures it is adequately understood and effectively and efficiently operated throughout the project? Check if WSH management system and information are available in suitable medium	DR				
II	3.4.4	The organisation should take into account the responsibilities and authorities of the users of documentation and information, as this should lead to consideration of the degree of security and accessibility that needs to be imposed (particularly with electronic media) and change controls (SS506: 2009 -Guidelines 4.4.4)	Is the degree of security and accessibility defined for the users and administrators of controlled documentation and information? Check for relevant documents for evidence	PI				Final Score: / 2
III	3.4.5	The organisation should take into account the manner in which physical documentation is used and the environment in which it is used, as this can require consideration of the format in which it is presented. Similar consideration should be given concerning the use of electronic equipment for information systems. (SS506: 2009 -Guidelines 4.4.4)	Are the documentation and information used in a manner that consider the environment in which they are used? Verify the location and accessibility.	PI				
III	3.4.6	The OSH management system shall be available for review and use by employees and auditors. (UAI - MANUAL02)	Is WSH management system available for reference by employees and auditors? Verify the location and accessibility.	PI				Final Score: / 2
IV	3.4.7	The organisation shall develop and maintain an OHSMS manual, or equivalent documents that contains a description of the OHSMS, the OHS policy, and required procedures. (UAI - MANUAL01) It is important that documentation is proportional to the level of complexity, hazards and risks concerned and is kept to the minimum required for effectiveness and efficiency (SS506:2009:Requirements - note)	Are the manual format and content relevant and appropriate to the size, nature and complexity of the project? Verify adequacy of WSHMS documentation N.B: Refer to Appendix 1A in the ConSASS Guidebook for further clarifications	DR				Final Score: / 1
3.5			Document and data control					
I	3.5.1	Documents required by the OSH management system and by this SS 506 standard shall be controlled. (SS506:2009 Requirements - 4.4.5)	Are there procedures established and maintained to control documents and data required by the WSH management system? Check for relevant procedures for evidence	DR				Final Score: / 1
II	3.5.2	The organisation shall establish, implement and maintain a procedure(s) to: a) approve documents for adequacy prior to issue; (SS506: 2009 : Requirements- 4.4.5a)	Do the procedures ensure document and data are approved for adequacy by authorised personnel prior to issue? Check for relevant procedures for evidence	DR				
II	3.5.3	The organisation shall establish, implement and maintain a procedure(s) to: b) review and update as necessary and re-approve documents; (SS506: 2009 : Requirements: - 4.4.5b)	Do the procedures ensure document and data are periodically reviewed, revised as necessary and re-approved for adequacy by authorised personnel? Check for relevant procedures for evidence	DR				
II	3.5.4	The organisation shall establish, implement and maintain a procedure(s) to: c) ensure that changes and the current revision status of documents are identified; (SS506: : 2009 Requirements - 4.4.5c)	Do the procedures ensure that changes and the current revision status of documents are identified? Check for relevant procedures for evidence	DR				

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					Yes	No	NA	
II	3.5.5	The organisation shall establish, implement and maintain a procedure(s) to: d) ensure that relevant versions of applicable documents are available at points of use; (SS506: 2009 Requirements - 4.4.5d)	Do the procedures ensure that relevant versions of applicable documents are available at points of use? <i>Check for relevant procedures for evidence</i>	DR				
II	3.5.6	The organisation shall establish, implement and maintain a procedure(s) to: e) ensure that documents remain legible and readily identifiable; (SS506: 2009: Requirements: 4.4.5e)	Do the procedures ensure that documents remain legible and readily identifiable? <i>Check for relevant procedures for evidence</i>	DR				
II	3.5.7	The organisation shall establish, implement and maintain a procedure(s) to: f) ensure that documents of external origin determined by the organisation to be necessary for the planning and operation of the OSH management system are identified and their distribution controlled; (SS506: 2009: Requirements - 4.4.5f)	Do the procedures ensure that documents of external origin determined by the project to be necessary for the planning and operation of the WSH management system are identified and their distribution controlled? <i>Check for relevant procedures for evidence</i>	DR				
II	3.5.8	The organisation shall establish, implement and maintain a procedure to: g) prevent the unintended use of obsolete documents and apply suitable identification to them if they are retained for any purpose. (SS506: 2009 Requirements - 4.4.5g)	Do the procedures ensure that obsolete documents and data are promptly removed from all points of issue and points of use or otherwise assured against unintended use <i>Check for relevant procedures.</i>	DR				
Final Score: / 7								
III	3.5.9	The organisation shall establish, implement and maintain a procedure(s) to: a) approve documents for adequacy prior to issue; (SS506: 2009: Requirements - 4.4.5a)	Are document and data approved for adequacy by authorised personnel prior to issue? <i>Verify physical implementation of document approval procedures, eg signatory of authorised personnel on documents (with ref to audit question 3.5.2)</i>	DR				
III	3.5.10	The organisation shall establish, implement and maintain a procedure(s) to: b) review and update as necessary and re-approve documents; (SS506: 2009: Requirements - 4.4.5b) Documents should be reviewed from time to time to ensure that they are still valid and accurate. This can be performed as a dedicated exercise, and could also be necessary: - as part of a review of risk assessment of processes; - as part of a response to an incident; - as part of the management of change procedure; and - following changes in legal and other requirements, processes, installation, workplace layout, etc. (SS506: 2009: Requirements - 4.4.5)	Are documents and data periodically reviewed to ensure they remain valid and accurate? <i>Verify physical implementation of document review procedures (with ref to audit question 3.5.3)</i>	DR				
III	3.5.11	The organisation shall establish, implement and maintain a procedure(s) to: c) ensure that changes and the current revision status of documents are identified; (SS506: 2009: Requirements - 4.4.5c)	Are changes and current revision status of documents clearly identified? <i>Sample 3 documents for evidence</i>	DR				

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					Yes	No	NA	
III	3.5.12	<p>The organisation shall establish, implement and maintain a procedure(s) to:</p> <p>d) ensure that relevant versions of applicable documents are available at points of use; (SS506: Requirements: 2009 - 4.4.5d)</p> <p>Documents and data should be available and accessible when required, under routine and non-routine conditions, including emergencies. This could include ensuring that up-to-date plant engineering drawings, hazardous material data sheets, procedures and instructions, etc., are available to those persons who require them in an emergency. (SS506: 2009 Guidelines 4.4.5)</p>	<p>Can the documents and data be retrieved in a timely manner? Sample 3 documents and verify their location and accessibility.</p>	DR/PI				
	3.5.13	<p>The organisation shall establish, implement and maintain a procedure(s) to:</p> <p>e) ensure that documents remain legible and readily identifiable; (SS506: 2009: Requirements - 4.4.5e)</p> <p>The document and record management system shall address the means by which the documents and records will be stored, and the appropriate retention period.K13:K19 (UAI - DOC04)</p>	<p>Are the documents and records stored such that their physical integrity are not compromised? Sample 3 documents for evidence.</p>	PI				
	3.5.14	<p>The organisation shall establish, implement and maintain a procedure(s) to:</p> <p>f) ensure that documents of external origin determined by the organisation to be necessary for the planning and operation of the OSH management system are identified and their distribution controlled; (SS506: 2009: Requirements - 4.4.5f)</p> <p>The organisation should establish procedures for identifying any documents of external origin required for planning and implementing its OSH management system. The distribution of these documents needs to be controlled to ensure that the most current information is used in making decisions impacting OSH. For example, the organisation should establish procedures for managing the safety data sheets developed for hazardous substances used by the organisation. Responsibility for this task should be assigned. The person charged with this task should ensure that all persons in the organisation are kept informed of any relevant changes to such information that affects their duties or working conditions. (SS506: 2009: Guidelines - 4.4.5)</p>	<p>Are distribution of documents of external origin controlled to ensure that the most current information is used in making decisions impacting WSH? Sample 3 such documents for evidence</p>	PI				
	3.5.15	<p>The organisation shall establish, implement and maintain a procedure to:</p> <p>g) prevent the unintended use of obsolete documents and apply suitable identification to them if they are retained for any purpose. (SS506: 2009 : Requirements - 4.4.5g)</p> <p>Obsolete documents retained for reference can present a particular concern, and great care should be taken to ensure that they do not return back into circulation. However, it is sometimes necessary to retain obsolete documents as part of the records relating to the development or performance of the OSH management system. (SS506: : 2009 : Guidelines - 4.4.5)</p>	<p>Are obsolete documents and data promptly removed from all points of issue and points of use, or otherwise assured against unintended use? Verify physical implementation of document removal based on procedure (with ref to audit question 3.5.8)</p>	PI				
IV	3.5.16	<p>The document and record management system shall ensure that confidential documents and records, including medical records are handled appropriately. (UAI - DOC05)</p>	<p>Have confidential documents (e.g. personal medical particulars) and records been secured through a means that restricts access to them? Sample 3 documents and verify their location and accessibility.</p>	DR/PI				Final Score: /7
	3.6		Operational control					Final Score: /1

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					Yes	No	NA	
I	3.6.1	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; (SS506: 2009 Requirements - 4.4.6a)	Are there operational control procedures established to manage the WSH risks for all operations and activities identified (Element 2.1) (in compliance with the applicable WSH legal and other requirement with an overall objectives to fulfil the WSH objectives and policy)? Check procedures.	DR				
I	3.6.2	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: (b) controls related to purchased goods, equipment and services; (SS506 : 2009 Requirements - 4.4.6b)	Are there operational control procedures established to manage the WSH risks for purchasing of goods, equipment and services? Check procedures.	DR				
I	3.6.3	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: (c) controls related to contractors and other visitors to the workplace; (SS506: 2009 Requirements - 4.4.6)	Are there operational control procedures established to manage the WSH risks for control of contractors and visitors to the workplace? Check procedures.	DR				
I	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 : 2009Requirements - 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. <i>N.B: Refer to Appendix 1A in the ConSASS Guidebook for further clarifications</i>	DR				
Final Score: / 4								
II	3.6.5	Maintenance of safe plant and equipment - provision, control and maintenance of the organisation's plant and equipment. (SS506: 2009 Requirements - 4.4.6) The occupier shall implement an effective maintenance program which shall include: a) listing of hand tools, plant, machinery and equipment b) schedule of inspection and maintenance c) procedure for breakdown and repair d) record of inspection and maintenance (CP 79 - Section 10.3)	Does the project establish a maintenance program to ensure safe efficient operation of hand tools, plant, machinery and equipment used at the work? The program shall include: a) listing of hand tools, plant, machinery and equipment b) schedule of inspection and maintenance (according to statutory requirements, manufacturer's recommendations and in-house rules and regulations) c) procedure for breakdown and repair d) record of inspection and maintenance Check documentation for the above requirement.	DR				
II	3.6.6	The occupier shall ensure that maintenance personnel are trained and competent. Repairs and maintenance carried out by external agents shall conform to the manufacturer's recommendations and specifications and worksite's in-house rules and regulations. (CP 79 - Section 10.4)	Does the maintenance program include the appointment of competent maintenance personnel? Verify appointment letter or list of approved maintenance personnel.	DR				

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					Yes	No	NA	
II	3.6.7	<p>The occupier shall establish and maintain documented procedures for safety inspections to ensure that unsafe conditions and practices at the worksite are identified and corrective measures are implemented promptly and effectively.</p> <p>Safety inspections shall include the following:</p> <ul style="list-style-type: none"> a) general regular inspection b) safety committee inspection c) plant, machinery and equipment inspection d) special inspections which include: <ul style="list-style-type: none"> i) inspection arising from incident occurrence ii) inspection arising from hazard analysis iii) inspection of specialised operations and equipment such as specialised shoring system and tunneling equipment iv) other specified inspection as required by authorities such as Fire Safety Bureau (CP 79 - Section 9.2 / 9.3) <p>The occupier shall carry out periodic inspections to ensure sub-contractor's compliance with safety requirements.</p> <p>(CP 79 - Section 8.5c)</p>	<p>Does the project establish and maintain documented procedures to carry out periodic inspections to ensure employee's and contractor's compliance with safety requirements?</p> <p>The inspection methodology shall include the following:</p> <ul style="list-style-type: none"> a) safety inspections are carried out at a specified frequency and thoroughness commensurate with the dynamic and rapid changes of the worksite conditions b) suitably safety checklists shall be developed and maintained to facilitate the inspection c) the results of the inspection shall be recorded in the checklists and reported to the responsible person <p>Check procedures for evidence.</p>	DR				
II	3.6.8	<p>The occupier shall ensure that the safety inspections are carried out by competent persons who are conversant with safe work practices, in-house rules and regulations, and statutory requirements.</p> <p>(CP 79 - Section 9.4)</p>	<p>Does the inspection program include the appointment of competent persons who are conversant with safe work practices, in-house rules and regulations, and statutory requirements?</p> <p>Verify appointment letter or list of approved personnel carrying out inspections.</p>	DR				
II	3.6.9	<p>The occupier shall establish procedures to ensure in-house rules and regulations are implemented and enforced diligently at the worksite.</p> <p>(CP 79 - Section 6.2)</p>	<p>Are there procedures to ensure in-house rules and regulations are implemented and enforced at the worksite?</p> <p>The in-house rules and regulations shall include the following:</p> <ul style="list-style-type: none"> a) provision and use of personal protective equipment b) operation and maintenance of plant, machinery and equipment c) handling, storage and use of materials d) reporting of hazards and incidents e) general housekeeping at the worksite f) removal of fire hazards <p>Check for procedures for the above requirement.</p>	DR				
II	3.6.10	<p>Safe work practices shall be considered at the following stages where applicable:</p> <ul style="list-style-type: none"> a) design and approval; b) mobilisation; c) construction; d) de-mobilisation. <p>(CP 79 - Section 2.4)</p>	<p>Are there safe work procedures considered for the following stages where applicable:</p> <ul style="list-style-type: none"> a) mobilisation; b) construction; c) de-mobilisation? <p>Sample 3 safe work procedures</p>	DR				
II	3.6.11	<p>The occupier shall establish a control program which shall include the appointment of competent person to receive such materials and ensure its safe storage and use.</p> <p>(CP 79 - Section 12.3b)</p>	<p>Does the project establish a program which include the appointment of competent person to receive hazardous materials and ensure its safe storage and use?</p> <p>Check procedure for the above requirement</p>	DR				

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II	3.6.12	establishment and implementation of procedures for disposal of hazardous materials, which shall be carried out in accordance with statutory requirements or manufacturer's recommendations. (CP 79 - Section 12.3f)	Does the project establish a program which include the establishment and implementation of procedures for disposal of hazardous materials? <i>Check procedure for the above requirement.</i>	DR				
II	3.6.13	The occupier shall establish a system of colour coding and safety signs to draw attention and provide information on potential hazards. The use of colour coding and safety signs shall conform to the existing standards. (CP 79 - Section 6.5) establishment of procedures for labelling hazardous substances and chemicals. (CP 79 - Section 12.3)	Does the project establish and implement a system of colour coding and safety signs to draw attention and provide info on hazards? <i>Check procedure for the requirement.</i>	DR				
II	3.6.14	Some typical control measures include evaluation, and periodic re-evaluation of the OSH competences of contractors. (SS506 : 2009 Guidelines - 4.4.6 Process) The occupier shall set up a system to evaluate the safety performance of prospective sub-contractors who intend to undertake the works. Only competent sub-contractors who meet the safety requirement and expectations shall be selected for the works. (CP 79 - Section 8.2) The occupier shall establish procedures to select sub-contractors on the basis of their ability to meet sub-contract safety requirements. The written contract agreement shall stipulate performance of the sub-contractors including specific safety requirements for the works. (CP 79 - Section 8.4)	Is there a written procedure which state the contractor selection criteria (which include health and safety performance) as well as the evaluation of contractors' safety performance? The evaluation of contractors safety performance shall include the following: a) company's safety policy and safety management system b) safety plan, safe work procedures and method statements c) listing of construction plant, machinery and equipment d) safety track records e) training records of managers, supervisors and workers <i>Check for procedures for the above requirement.</i>	DR				
II	3.6.15	availability of documentation for the safe handling of machinery, equipment, materials or chemicals at the time of purchase or the need to obtain such documentation. (SS506 : 2009 Guidelines - 4.4.6 Process)	Is there a written procurement procedure which require WSH information to be evaluated prior to the procurement? <i>Check for procedures for the above requirement.</i>	DR				
II	3.6.16	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) 10.3.3)	Is there procedure established for permit-to-work system for high risk work activities? <i>Check procedures and sample 3 type of permits.</i>	DR				
II	3.6.17	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 thos 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)	Has the project established the Fall Prevention Plan? <i>Check documented plan.</i>	DR				

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					Yes	No	NA	
II	3.6.18	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)	Has the project established the Lifting Plan? <i>Check documented plan.</i>	DR				
	3.6.19	The hearing conservation programme shall include the following: a) regular monitoring of noise levels b) reduction of noise levels through engineering and administrative control measures c) selection, provision and maintenance of suitable hearing protectors and supervision of their use d) posting of warning signs and labeling of noisy equipment e) arranging for pre-employment and annual audiometric examinations for workers exposed to excessive noise (CP 79 - Section 14.3)	Has the project established a hearing conservation programme, which includes: a) regular monitoring of noise levels b) reduction of noise levels through engineering and administrative control measures c) selection, provision and maintenance of suitable hearing protectors and supervision of their use d) posting of warning signs and labeling of noisy equipment e) arranging for pre-employment and annual audiometric examinations for workers exposed to excessive noise <i>Check availability of programme.</i>	DR				
	3.6.20	The respiratory protection programme shall include the following: a) regular monitoring of air contaminants where indicated b) reduction of air contaminants through engineering and administrative control measures c) selection, provision and maintenance of suitable respirators and supervision of their use (CP 79 - Section 14.4)	Has the project established a respiratory protection programme, which includes: a) regular monitoring of air contaminants where indicated b) reduction of air contaminants through engineering and administrative control measures c) selection, provision and maintenance of suitable respirators and supervision of their use <i>Check availability of programme.</i>	DR				
	3.6.21	The heat stress prevention programme shall include the following: Acclimatisation Sufficient water intake and drinking facilities Shaded areas for work and rest Suitable clothing for outdoor environment <i>Checklist from WSH Guidelines – Managing Heat Stress in the Workplaces</i>	Has the project established a heat stress prevention programme, which includes: a) Acclimatisation b) Sufficient water intake and drinking facilities c) Shaded areas for work and rest d) Suitable clothing for outdoor environment <i>Check availability of programme</i>	DR				
Final Score: / 17								
III	3.6.22	Maintenance of safe plant and equipment - provision, control and maintenance of the organisation's plant and equipment. (SS506 : 2009 Requirements - 4.4.6) The occupier shall implement an effective maintenance program which shall include: a) listing of hand tools, plant, machinery and equipment b) schedule of inspection and maintenance c) procedure for breakdown and repair d) record of inspection and maintenance (CP 79 - Section 10.3)	Is the maintenance program implemented accordingly? <i>Check maintenance and repair records / Interview operators.</i>	DR / IP				

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BAND	S/No.	Guidance notes and standard specifications	Audit Question	DR/IP/PI	Results			Auditor's Remarks
					Yes	No	NA	
III	3.6.23	<p>The occupier shall establish and maintain documented procedures for safety inspections to ensure that unsafe conditions and practices at the worksite are identified and corrective measures are implemented promptly and effectively.</p> <p>Safety inspections shall include the following:</p> <ul style="list-style-type: none"> a) general regular inspection b) safety committee inspection c) plant, machinery and equipment inspection d) special inspections which include: <ul style="list-style-type: none"> i) inspection arising from incident occurrence ii) inspection arising from hazard analysis iii) inspection of specialised operations and equipment such as specialised shoring system and tunneling equipment iv) other specified inspection as required by authorities such as Fire Safety Bureau (CP 79 - Section 9.2 / 9.3) <p>The occupier shall carry out periodic inspections to ensure sub-contractor's compliance with safety requirements.</p> <p>(CP 79 - Section 8.5c)</p>	<p>Are the periodic inspections carried out accordingly?</p> <p>The inspection methodology shall include the following:</p> <ul style="list-style-type: none"> a) safety inspections are carried out at a specified frequency and thoroughness commensurate with the dynamic and rapid changes of the worksite conditions b) suitably safety checklists shall be developed and maintained to facilitate the inspection c) the results of the inspection shall be recorded in the checklists and reported to the responsible person <p>Check inspections records and interview competent person.</p>	DR & IP				
III	3.6.24	<p>The occupier shall establish procedures to ensure in-house rules and regulations are implemented and enforced diligently at the worksite.</p> <p>(CP 79 - Section 6.2)</p>	<p>Are the rules and regulations implemented and enforced at the worksite?</p> <p>The in-house rules and regulations shall include the following:</p> <ul style="list-style-type: none"> a) provision and use of personal protective equipment b) operation and maintenance of plant, machinery and equipment c) handling, storage and use of materials d) reporting of hazards and incidents e) general housekeeping at the worksite f) removal of fire hazards <p>Check enforcement records, interview personnel and display of documents.</p>	DR / PI / IP				
III	3.6.25	<p>Safe storage provisions and control of access</p> <p>(SS506 Guidelines - 4.4.6 Process)</p> <p>designation of storage areas which shall be suitable for the materials and secured against unauthorised access. Hazardous materials shall be returned to designated storage areas when not in use.</p> <p>(CP 79 - Section 12.3e)</p>	<p>Does the established management of hazardous substances program include:</p> <ul style="list-style-type: none"> a) designation of storage areas; b) secured against unauthorised access c) properly disposed? <p>Inspect designated storage areas for security and disposal bins.</p>	PI				
III	3.6.26	<p>Procured products that pose potential health and safety hazards not previously identified by the OHSMS shall not be used until an appropriate hazard evaluation can be conducted.</p> <p>(UAI - BUYING05)</p> <p>The occupier shall establish a control program which shall include the maintenance of a register of hazardous materials compiled from Material Safety Data Sheets (MSDS). The MSDS shall contain accurate and adequate information on:</p> <ul style="list-style-type: none"> - composition, physical and chemical properties of the material - instructions for safe handling, storage, use and disposal. <p>(CP 79 - Section 12.3a)</p>	<p>Are workers aware of the hazards as listed in the Safety Data Sheet ?</p> <p>Check briefing/ training records, and interview workers</p>	DR & IP				
III	3.6.27	<p>The occupier shall establish a system of colour coding and safety signs to draw attention and provide information on potential hazards. The use of colour coding and safety signs shall conform to the existing standards.</p> <p>(CP 79 - Section 6.5)</p> <p>establishment of procedures for labelling hazardous substances and chemicals.</p> <p>(CP 79 - Section 12.3)</p>	<p>Is the established colour coding and safety signs properly implemented?</p> <p>Sample 3 items / locations where with colour code or signs should be available.</p>	PI				

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BAND	S/No.	Guidance notes and standard specifications	Audit Question	DR/IP/PI	Results			Auditor's Remarks
					Yes	No	NA	
III	3.6.28	Contractors and contract organisation shall have in place a function OHS program or OHSMS that is appropriate to the size of their firm and the nature of their work. (UAI - BUYING02)	Do contractors and contract organisation have a functional WSH program or WSH management system that is appropriate to the size of their firm and the nature of their work? Sample 3 contractors' WSH program for the above requirement.	DR				
III	3.6.29	When selecting a contractor, the organisation shall include in its selection criteria the contractor's OHS performance history. (UAI - BUYING03)	Is the contractor selection process documented? Check documentation for the above requirement.	DR				
III	3.6.30	The occupier shall establish procedures to ensure that the safety requirements in the contract agreement are implemented effectively on site during the construction phase. The occupier shall: d) review safety training records of sub-contractors (CP 79 - Section 8.5d)	Does the project review safety training records of contractors? Check documentation for the above requirement.	DR				
III	3.6.31	The occupier shall establish procedures to ensure that the safety requirements in the contract agreement are implemented effectively on site during the construction phase. The occupier shall: e) keep incident statistics of all sub-contractors. (CP 79 - Section 8.5e)	Does the project keep incident statistics of all contractors? Check documentation for the above requirement.	DR				
III	3.6.32	Procured products that pose potential health and safety hazards not previously identified by the OHSMS shall not be used until an appropriate hazard evaluation can be conducted. (UAI - BUYING05)	Is there a mechanism in place to ensure that procured products are not used until their hazards are comprehended and returned when they do not meet the organisation's purchasing criteria? Check for mechanism of the above requirement.	DR				
III	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) 10.3.3)	Is the permit-to-work system implemented for all high risk work activities? Verify 3 permits implemented on the day of audit. N.B: Refer to Appendix 1A in the ConSASS Guidebook for further clarifications	DR				
III	3.6.34	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)	Has the project implemented the Fall Prevention Plan? Check documented plan and verify physical implementation.	DR & PI				

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BAND	S/No.	Guidance notes and standard specifications	Audit Question	DR/IP/PI	Results			Auditor's Remarks
					Yes	No	NA	
	3.6.35	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)	Has the project implemented the Lifting Plan? Check documented plan and verify physical implementation.	DR & PI				
	3.6.36	The hearing conservation programme shall include the following: a) regular monitoring of noise levels b) reduction of noise levels through engineering and administrative control measures c) selection, provision and maintenance of suitable hearing protectors and supervision of their use d) posting of warning signs and labeling of noisy equipment e) arranging for pre-employment and annual audiometric examinations for workers exposed to excessive noise (CP 79 - Section 14.3)	Has the established hearing conservation programme been implemented? Check documented plan and verify physical implementation.	DR & PI				
	3.6.37	The respiratory protection programme shall include the following: a) regular monitoring of air contaminants where indicated b) reduction of air contaminants through engineering and administrative control measures c) selection, provision and maintenance of suitable respirators and supervision of their use (CP 79 - Section 14.4)	Has the respiratory protection programme been implemented? Check documented plan and verify physical implementation.	DR & PI				
	3.6.38	The heat stress prevention programme shall include the following: a) Acclimatisation b) Sufficient water intake and drinking facilities c) Shaded areas for work and rest d) Suitable clothing for outdoor environment Checklist from WSH Guidelines – Managing Heat Stress in the Workplaces	Has the established heat stress prevention programme been implemented? Check documentation and verify physical implementation	DR & PI				
Final Score: / 17								
IV	3.6.39	The occupier shall establish procedures to review the rules and regulations to ensure its suitability and effectiveness. Records of such reviews shall be maintained. (CP 79 - Section 6.4)	Are there procedures to review in-house rules and regulations regularly to ensure suitability and effectiveness? The in-house rules and regulations shall include the following: a) provision and use of personal protective equipment b) operation and maintenance of plant, machinery and equipment c) handling, storage and use of materials d) reporting of hazards and incidents e) general housekeeping at the worksite f) removal of fire hazards Check for procedures for the above requirement.	DR				
IV	3.6.40	The effectiveness of hazard control methods shall be verified regularly. (UAI - CONTROL04)	When controls are found deficient in meeting their intended goals of hazard reduction or management, are appropriate modifications made immediately? Sample 3 records of deficiencies (inspection records/complaints/incident records) and verify site condition for the above requirement.	DR & PI				

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BAND	S/No.	Guidance notes and standard specifications	Audit Question	DR/IP/PI	Results			Auditor's Remarks
					Yes	No	NA	
IV	3.6.41	Following implementation of the new process or operations, the anticipated OHS hazards and risks shall be evaluated to verify that they have, in fact, been properly identified and controlled. (UAI - DESIGN04)	Is post-installation design evaluation of WSH control effectiveness performed at an appropriate frequency by personnel with expertise in and an understanding of hazards, risks and controls? <i>Check training records for competency.</i>	DR				
IV	3.6.42	Contractors and contract organisation shall have in place a function OHS program or OHSMS that is appropriate to the size of their firm and the nature of their work. (UAI - BUYING02)	In cases where the contractor's or contract organisation's WSH program or WSH management system does not meet the site's WSH requirements, are there appropriate modifications made to meet the requirements or the contractor is not retained? <i>Sample 3 deficiencies for the above requirement.</i>	DR				
IV	3.6.43	The occupier shall establish procedures to ensure that the safety requirements in the contract agreement are implemented effectively on site during the construction phase. The occupier shall: b) review regularly the effectiveness of the sub-contractor's safety plan (CP 79 - Section 8.5b)	Does the project regularly review the effectiveness of contractor's safety plan? <i>Check documentation for the above requirement.</i>	DR				
IV	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? <i>Check for document for review of design.</i> <i>N.B: Refer to Appendix 1A in the ConSASS Guidebook for further clarifications</i>	DR				
IV	3.6.45	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? <i>Check documentation of evaluation for the latest 3 processes, eg minutes of discussion / evaluation of process</i> <i>N.B: Refer to Appendix 1A in the ConSASS Guidebook for further clarifications</i>	DR				Final Score: / 7
	3.7		Emergency preparedness and response					
I	3.7.1	The organisation shall establish, implement and maintain a procedure(s): a) to identify the potential for emergency situations; (SS506: 2009: Requirements - 4.4.7a)	Are there procedures established to assess the potential for emergency situations that impact on WSH? <i>Check for relevant procedures for evidences.</i>	DR				
I	3.7.2	The organisation shall establish, implement and maintain a procedure(s): b) to respond to such emergency situations. (SS506: : 2009 : Requirements - 4.4.7b)	Are there procedures established to respond to such emergency situations? <i>Check for relevant procedures for evidences.</i>	DR				Final Score: / 3

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BAND	S/No.	Guidance notes and standard specifications	Audit Question	DR/IP/PI	Results			Auditor's Remarks
					Yes	No	NA	
II	3.7.3	<p>Procedures to identify potential emergency situations that could impact on OSH should consider emergencies that can be associated with specific activities, equipment or workplaces.</p> <p>Examples of possible emergencies, which vary in scale, can include:</p> <ul style="list-style-type: none"> - incidents leading to serious injuries or ill health, - fires and explosions, - release of hazardous materials/gases, - natural disasters, bad weather, - loss of utility supply (e.g. loss of electric power), - pandemics/epidemics/outbreaks of communicable disease, - civil disturbance, terrorism, sabotage, workplace violence, - failure of critical equipment, - traffic accidents. <p>(SS506: : 2009: Guidelines - 4.4.7.2)</p>	<p>Do the procedures to identify potential emergency situation that could impact on WSH: consider emergencies that could be associated with specific activities, equipment or workplaces?</p> <p>Check for relevant procedures for evidences.</p>	DR				
II	3.7.4	<p>The emergency plan(s) should outline the actions to be taken when specified emergency situations arise, and should include the interface with external emergency services</p> <p>(SS506 : 2009 Guidelines - 4.4.7 Process)</p>	<p>Does the emergency response procedure: identify the nearest hospital or medical facility where injured personnel will be taken?</p> <p>Check for relevant procedures for evidences.</p>	DR				
II	3.7.5	<p>Emergency response should focus on the prevention of ill health and injury, and on the minimisation of the adverse OSH consequences to a person(s) exposed to an emergency situation.</p> <p>(SS506:: 2009: Guidelines: 2009 - 4.4.7.3)</p>	<p>Do the procedures to respond to identified emergency situations: focus on the prevention of ill health and injury, and on the minimisation of adverse WSH consequences to a person(s) exposed to the emergency situation?</p> <p>Check procedure for evidences.</p>	DR				
II	3.7.6	<p>A procedure(s) for responding to emergency situations should be developed and should also take into account applicable legal and other requirements.</p> <p>(SS506: : 2009: Guidelines: 2009 - 4.4.7.3)</p>	<p>Do the procedures to respond to identified emergency situations: take into account applicable legal and other requirements?</p> <p>Check procedure for evidences.</p>	DR				
II	3.7.7	<p>The emergency plan(s) should outline the actions to be taken when specified emergency situations arise, and should include the evacuation procedures</p> <p>(SS506 : 2009: Guidelines - 4.4.7 Process)</p> <p>The occupier shall establish plans which shall include the procedure for notification and raising of alarms. The list of names and contact numbers of company personnel, relevant authorities and emergency services shall be maintained</p> <p>(CP79 - Section 13.4c)</p> <p>The occupier shall establish plans which shall include the initial response procedures and site layout plans for various emergency situations</p> <p>(CP79 - Section 13.4d)</p> <p>The occupier shall establish plans which shall include an effective evacuation plan</p> <p>(CP79 - Section 13.4e)</p> <p>The occupier shall establish plans which shall include the communication to relevant authorities such as SCDF, PUB, polics, etc.</p> <p>(CP 79 - Section 13.4f)</p>	<p>Does the project establish plans which include initial response procedure (e.g. effective evacuation plan) and site layout for various emergency situations?</p> <p>(Plans should include the procedure for notification and raising of alarms as well as communication to relevant authorities such as SCDF, PUB, polics, etc)</p> <p>Check for plans for evidence.</p>	DR				
II	3.7.8	<p>When the organisation determines that external services are needed for emergency response, pre-approved arrangements should be in place. Particular attention should be paid to staffing levels, response schedules and emergency service limitations.</p> <p>(SS506: : 2009: Guidelines - 4.4.7.3)</p>	<p>Do the procedures to respond to identified emergency situations include putting in place pre-approved arrangement for external services?</p> <p>Check procedures for evidence.</p>	DR				
II	3.7.9	<p>Emergency response procedure(s) should define the roles, responsibilities and authorities of those with emergency response duties, especially those with an assigned duty to provide an immediate response. These personnel should be involved in the development of the emergency procedure(s) to ensure they are fully aware of the type and scope of emergencies that they can be expected to handle, as well as the arrangements needed for coordination. Emergency service personnel should be provided with the information required to facilitate their involvement in response activities.</p> <p>(SS506: : 2009: Guidelines- 4.4.7.3)</p>	<p>Do the procedures to respond to identified emergency situations: define the roles, responsibilities and authorities of those with emergency response duties, especially those with an assigned duty to provide immediate response?</p> <p>Check procedure for evidences.</p>	DR				

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					Yes	No	NA	
II	3.7.10	The organisation should determine and review its emergency response equipment and material needs. (SS506: Guidelines: 2009 - 4.4.7.4)	Does the project determine and review its emergency response equipment and material needs? Check relevant document for evidences.	DR				
II	3.7.11	Personnel should be trained in how to initiate the emergency response and evacuation procedures. The organisation should determine the training needed for personnel who are assigned emergency response duties and ensure that this training is received. Emergency response personnel should remain competent and capable to carry out their assigned activities. (SS506: : 2009: Guidelines- 4.4.7.5)	Are emergency response personnel trained in how to initiate the emergency response and evacuation procedures? Sample 3 training records for evidence.	DR				Final Score: / 9
III	3.7.12	The organisation should determine and assess how emergency situations will impact all persons within and/or in the immediate vicinity of workplaces controlled by the organisation. Consideration should be given to those with special needs, e.g. people with limited mobility, vision and hearing. This could include employees, temporary workers, contract employees, visitors, neighbours or other members of the public. The organisation should also consider potential impacts on emergency services personnel while at the workplace (e.g. fire-fighters). (SS506: 2009 : Guidelines- 4.4.7.2)	Do the procedures to identify potential emergency situation that could impact on WSH: determine and assess how emergency situations will impact all persons within and in the immediate vicinity of the workplace? Check for relevant procedures for evidences.	DR				
III	3.7.13	The emergency procedure(s) should be clear and concise to facilitate their use in emergency situations. They should also be readily available for use by emergency services. Emergency procedure(s) that are stored on a computer or by other electronic means might not be readily available in the event of a power failure, so paper copies of emergencies procedure(s) ought to be maintained in readily accessible locations. (SS506: 2009 : Guidelines - 4.4.7.3)	Are the procedures to respond to identified emergency situations: readily available for use in emergency situation? Sample 3 relevant physical implementations for evidence, eg, displaying of emergency contacts/ flowchart of emergency procedure at designated location.	PI				
III	3.7.14	Emergency response equipment should be available in sufficient quantity and stored in locations where it is readily accessible; it should be stored securely and be protected from being damaged. This equipment should be inspected and/or tested at regular intervals to ensure that it will be operational in an emergency situation. (SS506: : 2009 Guidelines - 4.4.7.4)	Are emergency response equipment available in sufficient quantity and stored in locations where it is readily accessible? Sample 3 different emergency response equipment, e.g. first aid and eye wash facility, and verify their location and accessibility.	PI				Final Score: / 4
III	3.7.15	The organisation shall also periodically test its procedure(s) to respond to emergency situations, where practicable, involving relevant interested parties as appropriate. (SS506: 2009 Requirements:- 4.4.7) Periodic testing of emergency procedures should be performed to ensure that the organisation and external emergency services can appropriately respond to emergency situations and prevent or mitigate associated OSH consequences. (SS506: : 2009 Guidelines - 4.4.7.6)	Are procedures to respond to identified emergency situations: periodically tested, involving relevant interested parties? Check for records of emergency drills	DR				

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					Yes	No	NA	
III	3.7.16	The organisation shall periodically review and, where necessary, revise its emergency preparedness and response procedure(s), in particular, after periodical testing and after the occurrence of emergency situations (SS506: : 2009 Requirements - 4.4.7) Examples of when this can be done are: - on a schedule defined by the organisation, - during management reviews, - following organisational changes, - as a result of management of change, corrective action, or preventive action (see 4.5.3), - following an event that activated the emergency response procedures, - following drills or tests that identified deficiencies in the -mergency response, - following changes to legal and other requirements, - following external changes impacting the emergency response (SS506: : 2009 Guidelines- 4.4.7.7)	Are the procedures to identify potential emergency situation that could impact on WSH, and to respond to these situations: regularly reviewed and revised? <i>Check relevant document for evidences.</i>	DR				
III	3.7.17	The type, quantity and storage location(s) for emergency equipment and supplies should be evaluated as a part of the review and testing of emergency procedures. (SS506: : 2009 Guidelines - 4.4.7.6)	Are the type, quantity and storage locations for emergency equipment and supplies evaluated as part of the review and testing of emergency procedures? <i>Check relevant document for evidence</i>	DR				
III	3.7.18	When changes are made in emergency preparedness and response procedure(s), these changes should be communicated to the personnel and functions that are impacted by the change; their associated training needs should also be evaluated. (SS506: : 2009 Guidelines - 4.4.7.7)	Are changes made in emergency preparedness and response procedure(s) communicated to the personnel and functions that are impacted by the change, and their associated training needs evaluated? <i>Interview 3 personnel who are impacted by the most recent change made.</i>	IP				
III	3.7.19	Employees at all levels of the organisation shall be aware of emergency preparedness and response system procedures and methods such that they are able to prevent or reduce harm to property, themselves and others. (UAI - EMERG05)	Are personnel aware of and understand emergency response procedures and their responsibilities in the event of emergencies <i>Interview minimum 3 relevant personnel.</i>	IP				Final Score: / 8
IV	3.7.20	The emergency preparedness and response system shall be appropriate to the hazards presented and their associated risks. (UAI - EMERG02)	Is the information generated from the hazard identification and risk assessment used in emergency preparedness planning? <i>Sample 3 relevant risk assessment results to verify that have been taken into consideration during planning.</i>	DR				
IV	3.7.21		Is there post-mortem evaluation after conduct of emergency response drills? <i>Check document for evidence</i>	DR				Final Score: / 2
4			Checking and corrective action					
4.1			Performance measurement and monitoring					
I	4.1.1	The organisation shall establish, implement and maintain a procedure(s) to monitor and measure OSH performance on a regular basis. (SS506: 2009 Requirements- 4.5.1)	Are there established and maintained procedures to monitor and measure WSH performance on a regular basis? <i>Check for procedures for the above requirement.</i>	DR				
I	4.1.2	The organisation shall establish, implement and maintain a procedure(s) to monitor and measure OSH performance on a regular basis. This procedure(s) shall provide for both qualitative and quantitative measures, appropriate to the needs of the organisation. (SS506: 2009 Requirements- 4.5.1a)	Are the WSH performance measures (a) appropriate to the needs of the project? (b) in line with the objectives of the WSHMS? <i>Check procedures for above requirement.</i>	DR				Final Score: / 2
II	4.1.3	The organisation shall establish, implement and maintain a procedure(s) to monitor and measure OSH performance on a regular basis. This procedure(s) shall provide for both qualitative and quantitative measures, appropriate to the needs of the organisation. (SS506: 2009 Requirements- 4.5.1a)	Do the procedures to monitor and measure WSH performance: provide for both qualitative and quantitative measures, appropriate to the needs of the project? <i>Check procedures for above requirement.</i>	DR				

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					Yes	No	NA	
II	4.1.4	One of the factors the procedures should provide for - proactive measures of performance compliance with the OSH management programme, operational criteria and applicable legislation and regulatory requirements. (SS506: 2009 Requirements - 4.5.1) The organisation shall establish, implement and maintain a procedure(s) to monitor and measure OSH performance on a regular basis. This procedure(s) shall provide for monitoring of the extent to which the organisation's OSH objectives are met. (SS506: 2009 Requirements - 4.5.1b)	Do the procedures to monitor and measure WSH performance: provide for monitoring of the extent to which the project's WSH objectives are met? <i>Check procedures for above requirement.</i>	DR				
II	4.1.5	The organisation shall establish, implement and maintain a procedure(s) to monitor and measure OSH performance on a regular basis. This procedure(s) shall provide for monitoring the effectiveness of controls (for health as well as for safety) (SS506 :2009 Requirements - 4.5.1c)	Do the procedures to monitor and measure WSH performance: provide for monitoring the effectiveness of controls (for health as well as for safety)? <i>Check procedures for above requirement.</i>	DR				
II	4.1.6	The organisation shall establish, implement and maintain a procedure(s) to monitor and measure OSH performance on a regular basis. This procedure(s) shall provide for proactive measures of performance that monitor conformance with the OSH programme(s), controls and operational criteria. (SS506: 2009 Requirements - 4.5.1d)	Do the procedures to monitor and measure WSH performance: provide for proactive measures of performance that monitor conformance with the WSH programme(s), controls and operational criteria? <i>Check procedures for above requirement.</i>	DR				
II	4.1.7	The organisation shall establish, implement and maintain a procedure(s) to monitor and measure OSH performance on a regular basis. This procedure(s) shall provide for reactive measures of performance that monitor ill health, incidents (including accidents, near-misses, etc.), and other historical evidence of deficient OSH performance. (SS506: 2009 Requirements - 4.5.1e)	Do the procedures to monitor and measure WSH performance: provide for reactive measures of performance that monitor ill health, incidents (including accidents, near-misses, etc.), and other historical evidence of deficient WSH performance? <i>Check procedures for above requirement.</i>	DR				
II	4.1.8	The organisation shall establish, implement and maintain a procedure(s) to monitor and measure OSH performance on a regular basis. This procedure(s) shall provide for recording of data and results of monitoring and measurement sufficient to facilitate subsequent corrective action and preventive action analysis. (SS506: 2009 Requirements - 4.5.1f)	Do the procedures to monitor and measure WSH performance: provide for recording of data and results of monitoring and measurement sufficient to facilitate subsequent corrective action and preventive action analysis? <i>Check procedures for above requirement.</i>	DR				
II	4.1.9	OHS-related measurements, sampling or data collection methods used in evaluation system activities should conform to governmental standards or industry best practices as established in non-governmental standards, procedures or guidelines. (UAI - EVAL06)	Do the procedures to monitor and measure WSH performance: address the manner in which measurement, sampling, and calibration methods will be periodically reviewed and updated? <i>Check procedures for above requirement.</i>	DR				
II	4.1.10	The organization should develop an evaluation system that is capable of measuring OHS performance. (UAI - EVAL01)	Do the procedures to monitor and measure WSH performance: ensure that evaluation findings are transmitted to the appropriate personnel to take preventive and corrective actions? <i>Check procedures for above requirement.</i>	DR				
II	4.1.11	If equipment is required to monitor or measure performance, the organisation shall establish and maintain procedures for the calibration and maintenance of such equipment, as appropriate. Records of calibration and maintenance activities and results shall be retained. (SS506: 2009 Requirements- 4.5.1)	Are there established and maintained procedures for the calibration and maintenance of performance measurement and monitoring equipment? <i>Check for procedures for above requirement.</i>	DR				
III	4.1.12	Records of calibration and maintenance activities and results shall be retained. (SS506 : 2009:Requirements - 4.5.1)	Are the records of calibration and maintenance activities and results retained? <i>Sample 3 monitoring equipment for their records.</i>	DR				

Final Score: / 9

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BAND	S/No.	Guidance notes and standard specifications	Audit Question	DR/IP/PI	Results			Auditor's Remarks
					Yes	No	NA	
III	4.1.13	The evaluation system should include sufficient quality assurance and quality control procedures to ensure that data collected during the evaluations are valid and reliable. (UAI - EVAL07)	Are the records of evaluations maintained? <i>Check evaluation records for its validity.</i>	DR				Final Score: / 2
IV	4.1.14	Element inputs - One of the suggested inputs include best practices (SS506 : 2009 Guidelines - c) Typical inputs)	Do the procedures to monitor and measure WSH performance: incorporate, as appropriate, industry best practices (for e.g. leading and lagging indicators)? <i>Check procedures for above requirement.</i>	DR				
IV	4.1.15	The evaluation system should be integrated with the OSHMS management review to ensure that all elements of the OSHMS are evaluated. (UAI - EVAL03)	Do the procedures to monitor and measure WSH performance: address the manner in which information is transmitted from evaluation activities to management review activities? <i>Check procedures for above requirement.</i>	DR				
IV	4.1.16	The evaluation system should include sufficient quality assurance and quality control procedures to ensure that data collected during the evaluations are valid and reliable. (UAI - EVAL07)	Do the procedures to monitor and measure WSH performance: address validity and reliability issues relating to the evaluations are being implemented, for e.g. Wet Bulb Globe Temperature (WBGT), noise and dust? <i>Check procedures and implementation of above requirement.</i>	DR				Final Score: / 3
	4.2		Accidents, incidents, non-conformances and corrective and preventive action					
I	4.2.1	The organisation shall establish, implement and maintain a procedure(s) to record, investigate and analyse incidents in order to: a) determine underlying OSH deficiencies and other factors that might be causing or contributing to the occurrence of incidents; b) identify the need for corrective action; c) identify opportunities for preventive action; d) identify opportunities for continual imprpvement; e) communicate the results of such investigations. The investigations shall be performed in a timely manner. Any identified need for corrective action or opportunities for preventive action shall be dealt with in accordance with the relevant parts of 4.5.3.2. The results of incident investigations shall be documented and maintained. (SS506:: 2009 Guidelines - 4.5.3.1)	Does the project have a procedure(s) to record, investigate and analyse incidents? <i>Check procedure for the above requirement.</i>	DR				

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BAND	S/No.	Guidance notes and standard specifications	Audit Question	DR/IP/PI	Results			Auditor's Remarks
					Yes	No	NA	
I	4.2.2	<p>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:</p> <p>a) identifying and correcting nonconformity(ies) and taking action(s) to mitigate their OSH consequences;</p> <p>b) investigating nonconformity(ies), determining their cause(s) and taking actions in order to avoid their recurrence;</p> <p>c) evaluating the need for action(s) to prevent nonconformity(ies) and implementing appropriate actions designed to avoid their occurrence;</p> <p>d) recording and communicating the results of corrective action(s) and preventive action(s) taken; and</p> <p>e) reviewing the effectiveness of corrective action(s) and preventive action(s) taken.</p> <p>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.</p> <p>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.</p> <p>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)</p>	<p>Does the organisation have a procedure(s) for dealing with actual and potential non-conformity(ies)?</p> <p><i>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.</i></p> <p>Check procedure for the above requirement.</p> <p><i>N.B: Refer to Appendix 1A in the ConSASS Guidebook for further clarifications</i></p>	DR				
Final Score: / 2								
II	4.2.3	<p>The organisation shall establish, implement and maintain a procedure(s) to record, investigate and analyse incidents in order to determine underlying OSH deficiencies and other factors that might be causing or contributing to the occurrence of incidents (SS506: 2009 Guidelines - 4.5.3.1).</p>	<p>Does the procedure(s) to record, investigate and analyse incidents and non-conformances: include determining the underlying WSH deficiencies and other factors that might be causing or contributing to the occurrence of incidents and non-conformities?</p> <p>Check procedures for the above requirement.</p>	DR				
II	4.2.4	<p>The organisation shall establish, implement and maintain a procedure(s) to record, investigate and analyse incidents in order to identify the need for corrective action/ preventive action/ continual improvement (SS506: 2009: Guidelines - 4.5.3.1).</p>	<p>Does the procedure(s) to record, investigate and analyse incidents and non-conformances: include identifying the need for corrective action/ preventive action/ continual improvement?</p> <p>Check procedures for the above requirement.</p>	DR				
II	4.2.5	<p>The organisation shall establish, implement and maintain a procedure(s) to record, investigate and analyse incidents in order to communicate the results of such investigations (SS506: 2009: Guidelines - 4.5.3.1).</p>	<p>Does the procedure(s) to record, investigate and analyse incidents and non-conformances: include communicating the results of such investigations?</p> <p>Check procedures for the above requirement.</p>	DR				
II	4.2.6	<p>The organisation shall establish, implement and maintain a procedure(s) for dealing with actual and potential nonconformity(ies, accidents/incidents) and for taking corrective action and preventive action. The procedure(s) shall define requirements for reviewing the effectiveness of corrective action(s) and preventive action(s) taken (SS506: 2009: Guidelines - 4.5.3.2).</p>	<p>Does the procedure(s) to record, investigate and analyse incidents and non-conformances: include reviewing the effectiveness of corrective action(s) and preventive action(s) taken?</p> <p>Check procedures for the above requirement.</p>	DR				
II	4.2.7	<p>Where the corrective action and preventive action identifies new or changed hazards or the need for new or changed controls, the procedure(s) shall require that the proposed actions shall be taken through a risk assessment prior to implementation. (SS506: 2009 Guidelines - 4.5.3.2)</p>	<p>Does the procedure(s) to record, investigate and analyse incidents and non-conformances: include reviewing the risk assessment to take into account new hazards or control measures?</p> <p>Check procedures for the above requirement.</p>	DR				
II	4.2.8	<p>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).</p>	<p>Does the procedure(s) to record, investigate and analyse incidents and non-conformances: include reviewing the WSHMS documentation as a result of the corrective or preventive action?</p> <p>Check procedures for the above requirement.</p>	DR				

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BAND	S/No.	Guidance notes and standard specifications	Audit Question	DR/IP/PI	Results			Auditor's Remarks
					Yes	No	NA	
II	4.2.9	Checks should be made on the effectiveness of corrective and preventive actions taken. The occupier shall establish procedures for the investigation of incidents. The procedures shall include the following: a) types of incidents to be investigated; b) prompt reporting of incidents to designated persons; c) competent persons responsible for the investigation; d) investigation procedures (CP 79 - Section 5.4)	Does the procedure(s) to record, investigate and analyse incidents and non-conformances: include an inspection / investigation methodology <i>Check procedures for above requirements</i>	DR				Final Score: /7
III	4.2.10	The organisation shall establish, implement and maintain a procedure(s) to record, investigate and analyse incidents in order to determine underlying OSH deficiencies and other factors that might be causing or contributing to the occurrence of incidents (SS506: 2009 Guidelines - 4.5.3.1)	With reference from the past incident investigation, were underlying WSH deficiencies and other factors that might be causing or contributing to the occurrence of incidents determined? <i>Check documentation for the above requirement.</i>	DR				
III	4.2.11	The organisation shall establish, implement and maintain a procedure(s) to record, investigate and analyse incidents in order to identify the need for corrective action/ preventive action/ continual improvement (SS506: 2009 : Guidelines- 4.5.3.1).	With reference from the past incident investigation, were the corrective action/ preventive action/ continual improvement identified? <i>Check documentation for the above requirement.</i>	DR				
III	4.2.12	The organisation shall establish, implement and maintain a procedure(s) to record, investigate and analyse incidents in order to communicate the results of such investigations (SS506: : 2009 Guidelines - 4.5.3.1).	With reference from the past incident investigation, were the results of such investigations communicated? <i>Interview 3 personnel for verification.</i>	IP				
III	4.2.13	The organisation shall establish, implement and maintain a procedure(s) for dealing with actual and potential nonconformity(ies, accidents/incidents) and for taking corrective action and preventive action. The procedure(s) shall define requirements for reviewing the effectiveness of corrective action(s) and preventive action(s) taken (SS506: 2009: Guidelines- 4.5.3.2).	With reference from the past incident investigation, was the effectiveness of corrective action(s) and preventive action(s) taken reviewed? <i>Check documentation for the above requirement.</i>	DR				
III	4.2.14	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. (SS506: 2009: Guidelines- 4.5.3.2).	With reference from the past incident investigation, was the risk assessment reviewed to take into account new hazards or control measures? <i>Check documentation for the above requirement.</i>	DR				
III	4.2.15	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 . (SS506: 2009: Guidelines- 4.5.3.2).	With reference from the past incident investigation, was the revised risk assessment implemented on site? <i>Conduct a physical inspection on implementations from revised risk assessment.</i>	DR/PI				
III	4.2.16	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).	With reference from the past incident investigation, was the WSHMS documentation reviewed as a result of the corrective or preventive action? <i>Check documentation for the above requirement.</i>	DR				
III	4.2.17	Checks should be made on the effectiveness of corrective and preventive actions taken. The occupier shall establish procedures for the investigation of incidents. The procedures shall include the following: d) investigation procedures (CP 79 - Section 5.4d)	With reference from the past incident investigation, were the investigation done in accordance to the stipulated inspection / investigation methodology? <i>Sample 3 investigation reports for evidence.</i>	DR				
III	4.2.18	The organisation should have a procedure(s) for reporting, investigating and analysing incidents. The purpose of the procedure(s) is to provide a structured, proportionate and timely approach for determining and dealing with the underlying (root) cause(s) of the incidents (SS506: : 2009 Guidelines - 4.5.3.1).	With reference from the past incident investigation, were the investigations for incidents performed in a timely manner? <i>Sample 3 investigation reports to see if incidents, accidents were investigated promptly.</i>	DR				

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BAND	S/No.	Guidance notes and standard specifications	Audit Question	DR/IP/PI	Results			Auditor's Remarks
					Yes	No	NA	
III	4.2.19	The organisation shall establish, implement and maintain a procedure(s) to record, investigate and analyse incidents in order to determine underlying OSH deficiencies and other factors that might be causing or contributing to the occurrence of incidents (SS506: : 2009: Guidelines - 4.5.3.1)	With reference from the past non-conformances to legal requirements identified (eg. From safety inspection records), were underlying WSH deficiencies and other factors that might be causing or contributing to the occurrence of non-conformities determined? Sample 3 non-conformamnces record for the above requirement.	DR				
III	4.2.20	The organisation shall establish, implement and maintain a procedure(s) to record, investigate and analyse incidents in order to identify the need for corrective action/ preventive action/ continual improvement (SS506: : 2009: Guidelines - 4.5.3.1).	With reference from the past non-conformances to legal requirements identified (eg. From safety inspection records), were the corrective action/ preventive action/ continual improvement identified? Sample 3 non-conformamnces record for the above requirement.	DR				
III	4.2.21	The organisation shall establish, implement and maintain a procedure(s) to record, investigate and analyse incidents in order to communicate the results of such investigations (SS506: : 2009: Guidelines - 4.5.3.1).	With reference from the past non-conformances to legal requirements identified (eg. From safety inspection records), were the results of such investigations communicated? Interview 3 personnel for verification.	IP				
III	4.2.22	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 reviewing the effectiveness of corrective action(s) and preventive action(s) taken (SS506: : 2009: Guidelines- 4.5.3.2).	With reference from the past non-conformances to legal requirements identified (eg. From safety inspection records), was the effectiveness of corrective action(s) and preventive action(s) taken reviewed? Sample 3 non-conformamnces record for the above requirement.	DR				
III	4.2.23	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. (SS506: 2009: Guidelines- 4.5.3.2).	With reference from the past non-conformances to legal requirements identified (eg. From safety inspection records), was the risk assessment reviewed to take into account new hazards or control measures? Check documentation for the above requirement.	DR				
III	4.2.24	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 . (SS506: 2009: Guidelines- 4.5.3.2).	With reference from the past non-conformances to legal requirements identified (eg. From safety inspection records), was the revised risk assessment implemented on site? Conduct a physical inspection on implementations from revised risk assessment.	DR/PI				
III	4.2.25	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).	With reference from the past non-conformances to legal requirements identified (eg. From safety inspection records), was the WSHMS documentation reviewed as a result of the corrective or preventive action? Check documentation for the above requirement.	DR				
III	4.2.26	Preventive and corrective actions should be sufficient and appropriate to control OSH hazards and risks, and to minimize adverse health effects to employees. (UAI - ACTION03)	With reference from the past non-conformances to legal requirements identified (eg. From safety inspection records), are completion of preventive and corrective actions documented and confirmed by a site overall in-charge with WSH responsibility and authority? Check documentation for above requirement.	DR				
Final Score: / 17								
IV	4.2.27	The organisation should seek to prevent the under-reporting of incidents (SS506: : 2009: Guidelines- 4.5.3.1).	Were all incidents reported and investigated? Sample 3 cases for the above requirement.	DR/ IP				
IV	4.2.28	The organisation shall implement and maintain a procedure(s) for dealing with actual and potential nonconformity(ies) and for taking corrective action and preventive action. (SS506: 2009: Guidelines - 4.5.3.2)	Were all non-conformities reported and investigated? Sample 3 non-conformamnces record for the above requirement.	DR				

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					Yes	No	NA	
IV	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. N.B: Refer to Appendix 1A in the ConSASS Guidebook for further clarifications	DR/ IP				Final Score: / 3
	4.3		Records and records management					
I	4.3.1	The organisation shall establish, implement and maintain a procedure(s) for the identification, storage, protection, retrieval, retention and disposal of records (SS506: 2009: Requirements - 4.5.4)	Are there established and maintained procedures for the identification, storage, protection, retrieval, retention and disposal of records? Check for relevant procedures for evidence.	DR				Final Score: / 2
II	4.3.2	The organisation shall develop and maintain a document and record management system that supports OHSMS formulation, implementation, and evaluation activities. (UAI - DOC01) The organisation shall establish and maintain records as necessary to demonstrate conformity to the requirements of its OSH management system and of this SS 506 Standard, and the results achieved. (SS506: : 2009: Requirements- 4.5.4) Records that can demonstrate conformance to the requirements include: - records of the evaluation of compliance with legal and other requirements, - hazard identification, risk assessment and risk control records, - records of the monitoring of OSH performance, - calibration and maintenance records for equipment used to monitor OSH performance, - records of corrective action and preventive action, - reports of OSH inspections, - training and associated records that support evaluations of competence, - OSH management system audit reports, - participation and consultation reports, - incident reports, - incident follow-up reports, - OSH meeting minutes, - health surveillance reports, - personal protective equipment (PPE) maintenance records, - reports of emergency response drills, - management review records.	Do the procedures in 4.3.1 clearly define which WSH documents and records are required and maintained? Check procedures for evidence.	DR				
II	4.3.3	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)	Has the procedures in 4.3.1 taken into account applicable legal requirements? Check procedures for evidence.	DR				
II	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. N.B: Refer to Appendix 1A in the ConSASS Guidebook for further clarifications	DR				
II	4.3.5	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: Guidelines: 2009 - 4.5.4)	Has the procedures in 4.3.1 taken into account storage/ access/ disposal/ back-up requirements, and the use of electronic records (where applicable)? Check procedures for evidence.	DR				

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					Yes	No	NA	
II	4.3.6	The integrity of records and data should be maintained to facilitate their subsequent use, e.g. For monitoring and review activities, for the identification of trends for preventive action, etc. (SS506: Guidelines: 2009 - 4.5.4)	Do the procedures in 4.3.1 ensure that the integrity of records and data are maintained to facilitate their subsequent use? Check procedures for evidence.	DR				
	4.3.7	The organisation shall establish, implement and maintain a procedure(s) for the identification, storage, protection, retrieval, retention and disposal of records (SS506 : 2009: Requirements- 4.5.4)	Do the procedures in 4.3.1 specify the document and record retention times? Check procedures for evidence.	DR				
	4.3.8	The organisation shall establish, implement and maintain a procedure(s) for the identification, storage, protection, retrieval, retention and disposal of records (SS506: Requirements: 2009 - 4.5.4) The record management system should ensure that records are up-to-date and applicable to the purpose for which they are intended. (UAI - DOC03)	Do the procedures in 4.3.1 define the criteria and methods for disposal of document as well as making document obsolete? Check procedures for evidence.	DR				
	4.3.9	The organisation shall establish, implement and maintain a procedure(s) for the identification, storage, protection, retrieval, retention and disposal of records (SS506 : 2009: Requirements - 4.5.4)	Do the procedures in 4.3.1 specify the manner in which documents are updated and revised? Check procedures for evidence.	DR				
	4.3.10	The organisation shall establish, implement and maintain a procedure(s) for the identification, storage, protection, retrieval, retention and disposal of records (SS506 : 2009: Requirements - 4.5.4) The organisation shall develop and maintain a document and record management system that supports OHSMS formulation, implementation, and evaluation activities. (UAI - DOC01)	Do the procedures in 4.3.1 specify the manner in which relevant information contained in documents and records is disseminated throughout the organization? Check procedures for evidence.	DR				
III	4.3.11	Records shall be and remain legible, identifiable and traceable. (SS506 : 2009: Requirements - 4.5.4)	Are records legible, identifiable and traceable to the activities involved? Sample 3 records for evidence.	DR				Final Score: / 9
III	4.3.12	The organisation shall establish, implement and maintain a procedure(s) for the identification, storage, protection, retrieval, retention and disposal of records (SS506:: 2009 Requirements - 4.5.4)	Are records readily retrievable? Sample 3 records and verify their location and accessibility.	PI				
III	4.3.13	The organisation shall establish, implement and maintain a procedure(s) for the identification, storage, protection, retrieval, retention and disposal of records (SS506: 2009: Requirements - 4.5.4) The record management system should ensure that records are up-to-date and applicable to the purpose for which they are intended. (UAI - DOC03)	Are obsolete documents clearly indicated as obsolete or have been discarded? Sample documents for evidence.	DR				Final Score: / 3
IV	4.3.14	The record management system should address the methods of change, approval, distribution and tracking of documents. (UAI - DOC02)	Do the procedures in 4.3.1 clearly define how distributed documents are tracked. Check procedures for evidence.	DR				Final Score: / 1
	4.4		Audit					
I	4.4.1	Audit procedure(s) shall be established, implemented and maintained that address: a) the responsibilities, competencies, and requirements for planning and conducting audits, reporting results and retaining associated records; and b) the determination of audit criteria, scope, frequency and methods. (SS 506 : 2009 Requirements - 4.5.5,)	Are there documented audit procedures ? Check for documented audit procedures	DR				
I	4.4.2	Audit programme(s) shall be planned, established, implemented and maintained by the organisation, based on the results of risk assessments of the organisation's activities, and the results of previous audits. (SS 506:2009 Requirements - 4.5.5.)	Is there an audit program for periodic WSH Management System Audit ? Check for documented audit program	DR				Final Score: / 2

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BAND	S/No.	Guidance notes and standard specifications	Audit Question	DR/IP/PI	Results			Auditor's Remarks
					Yes	No	NA	
II	4.4.3	Audit procedure(s) shall be established, implemented and maintained that address: a) the responsibilities, competencies, and requirements for planning and conducting audits, reporting results and retaining associated records; and b) the determination of audit criteria, scope, frequency and methods. (SS 506:2009 Requirements - 4.5.5,)	Do the established audit procedures address the following ? • the responsibilities, competencies and requirements for planning and conducting audits, reporting and retaining associated records • determination of audit criteria, scope, frequency, and method Check in the documented procedures	DR				
II	4.4.4	The organisation shall ensure that internal audits of the OSH management system are conducted at planned intervals to: a) determine whether the OSH management system: -conforms to planned arrangements for OSH management including the requirements of this SS 506 Standard; and -has been properly implemented and is maintained; and -is effective in meeting the organisation's policy and objectives; b) provide information on the results of audits to management. (SS 506:2009 Requirements - 4.5.5) Comprehensive OSH audits should be conducted at intervals appropriate to the nature and complexity of the organization. (UAI - AUDIT02)	Do the established audit program and procedures address ALL the following purposes? - To determine whether or not the WSH management system conforms to planned arrangements for WSH management including the requirements of relevant specifications. - To determine whether or not the WSH management system has been properly implemented and maintained - To determine whether or not the WSH management system is effective in meeting the project's policy and objectives - To review the results of previous audits - To provide information on the results of audits to management - To assess WSH regulatory compliance Check in the documented procedures	DR				
II	4.4.5	Audit programme(s) shall be planned, established, implemented and maintained by the organisation, based on the results of risk assessments of the organisation's activities, and the results of previous audits. (SS 506 : 2009 Requirements - 4.5.5)	Is the planned audit program based on the results of risk assessments of the site activities and the results of previous audits ? Check for documented audit program	DR				
II	4.4.6	Selection of auditors and conduct of audits shall ensure objectivity and the impartiality of the audit process. (SS 506: 2009 Requirements - 4.5.5)	Does the internal audit procedure describe the selection of independent auditors ? Check in the documented procedures	DR				Final Score: / 4
III	4.4.7	Selection of auditors and conduct of audits shall ensure objectivity and the impartiality of the audit process. (SS 506:2009 Requirements - 4.5.5)	Are auditors trained to conduct internal audits that maintain independence, objectivity and impartiality ? Check auditors training records and or Interview internal auditors	DR/ IP				
III	4.4.8	Audit procedure(s) shall be established, implemented and maintained that address: a) the responsibilities, competencies, and requirements for planning and conducting audits, reporting results and retaining associated records; and b) the determination of audit criteria, scope, frequency and methods. (SS 506:2009 Requirements - 4.5.5,)	Is the audit duration, frequency etc planned according to the procedure? Check on audit programmes and reports.	DR				
III	4.4.9	Audit programme(s) shall be planned, established, implemented and maintained by the organisation, based on the results of risk assessments of the organisation's activities, and the results of previous audits. (SS 506 : 2009 Requirements - 4.5.5,)	Do auditors take into consideration complaints, data analysis such as from safety inspection, risk assessments, feedbacks to plan his/her audits ? Sample audit programs	DR				
III	4.4.10	Evidence collected during the audit which suggests an imminent risk that requires immediate action should be reported without delay. (SS 506 : 2009 Guidelines - 4.5.5.7)	Are there follow-ups to critical audit findings from the audit (eg. Conditions that pose imminent danger)-that require immediate action ? Check for evidence for such findings and its follow-up action	DR				

Construction Safety Audit Scoring System (ConSASS) Audit Checklist

Dated: 12 Apr 2013

BAND	S/No.	Guidance notes and standard specifications	Audit Question	DR/IP/PI	Results			Auditor's Remarks
					Yes	No	NA	
III	4.4.11	<p>The implementation of an internal audit programme should address the following:</p> <ul style="list-style-type: none"> - communication of the audit programme to relevant parties, - establishing and maintaining a process for the selection of auditors and audit teams, - providing the resources necessary for the audit programme, - planning, coordinating and scheduling audits, - ensuring that audit procedures are established implemented and maintained, - ensuring the control of records of audit activities, - ensuring the reporting of audit results and audit follow-up. <p>NOTE – The above has been adapted from ISO 19011:2002, 5.4.</p>	<p>Are records/ reports of the audit activities controlled?</p> <p>Check control of the audit records. Audit Records shall be and remain legible, identifiable and traceable.</p>	DR				
III	4.4.12	<p>Audit evidence should be evaluated against the audit criteria to generate the audit findings and conclusions. Audit evidence should be verifiable. Audit evidence should be recorded.</p> <p>(SS 506 : 2009 Guidelines - 4.5.5.7)</p>	<p>Are the evidence evaluated against the audit criteria to generate the audit findings and conclusions</p> <p>Check the audit reports.</p>	DR				
III	4.4.13	<p>The results of the OSH management system audits should contain the following elements:</p> <ul style="list-style-type: none"> - the audit objectives and scope, - information about the plans of the audit (identification of the members of the auditing team and the audited representatives, dates of audit and identification of the areas subject to audit), - the identification of reference documents and other audit criteria used to conduct the audit (e.g. SS 506 : Requirements, OSH procedures), - details of identified nonconformities, - any relevant remarks on the extent to which the OSH management system: • conforms to planned arrangements, • is being properly implemented and maintained, • achieves the stated OSH policy and objectives. 	<p>Do the results of the audits contain ALL of the following elements :</p> <ul style="list-style-type: none"> - the audit objectives and scope, - information about the plans of the audit , - the identification of reference documents and other audit criteria used to conduct the audit - details of identified nonconformities, - any relevant remarks on the extent to which the WSH management system: - conforms to planned arrangements, - is being properly implemented and maintained, - achieves the stated WSH policy and objectives. <p>Check the audit reports.</p>	DR				
III	4.4.14	<p>The content of the final OSH management system audit report should be dated and signed-off by the auditor.</p>	<p>Is the audit report dated and signed-off by the auditor (s).</p> <p>Check the audit reports.</p>	DR				
III	4.4.15	<p>The results of OSH management system audits should be communicated to all relevant parties as soon as possible, to allow corrective actions to be taken.</p> <p>Confidentiality should be considered when communicating the information contained within the OSH management system audit reports.</p> <p>(SS 506 : 2009 Guidelines - 4.5.5.8)</p>	<p>Was the results of WSH management system audits communicated to all relevant parties as soon as possible, to allow corrective actions to be taken ?</p> <p>Check the communication media and channels for all relevant parties</p>	DR/ PI				
III	4.4.16	<p>A review of the results should be carried out and effective corrective action taken, where necessary.</p> <p>(SS 506 : 2009 Guidelines - 4.5.5.9)</p>	<p>Was corrective and preventive actions taken after their review of audit results ?</p> <p>Check documents and physically verify at least 3 of the corrective actions</p>	DR & PI				
III	4.4.17	<p>The results of the OSH management system audits should be recorded and reported to management, in a timely manner.</p> <p>(SS 506 : 2009 Guidelines - 4.5.5.8)</p>	<p>Are the audit results recorded and reported to management in a timely manner ?</p> <p>Check the audit reports.</p>	DR				

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III	4.4.18	Top management should consider OSH management system audit findings and recommendations, and take appropriate action as necessary within an appropriate time (SS 506 : 2009 Guidelines - 4.5.5.9)	Does top management consider the audit findings and its recommendation and take appropriate actions as necessary within an appropriate time ? Check for the follow-up actions by top management	DR/ PI				Final Score: / 12
IV	4.4.19	Wherever possible, checks should be built into the OSH management system audit procedures to help to avoid misinterpretation or misapplication of collected data, information, or other records.	Is checklist used by their internal auditors to avoid misinterpretation or misapplication of collected data, informaion, or other records ? Ask for audit checklists	DR				
IV	4.4.20	OSH management system audits should be conducted according to the audit programme. The organisation should consider conducting additional audits: - as changes occur in the hazards, or risk assessment, - when indicated by the results of previous audits, - depending on the type of incidents or increased frequency of incidents, or - when circumstances indicate that they are necessary. NOTE – The above has been adapted from ISO 19011:2002, 6.1.	Does the company initiate and conduct additional adhoc audit activities? Check the audit records for such additional adhoc audits N.B: Refer to Appendix 1A in the ConSASS Guidebook for further clarifications	DR				
IV	4.4.21	OSH management system audits should be conducted according to the audit programme. The organisation should consider conducting additional audits: - as changes occur in the hazards, or risk assessment, - when indicated by the results of previous audits, - depending on the type of incidents or increased frequency of incidents, or - when circumstances indicate that they are necessary. NOTE – The above has been adapted from ISO 19011:2002, 6.1.	Does the company initiate and conduct additional adhoc audit activities by independent parties? Check the audit records for such additional adhoc audits N.B: Refer to Appendix 1A in the ConSASS Guidebook for further clarifications	DR				Final Score: / 3
	4.5		Management review					
I	4.5.1	Senior management should periodically evaluate the OSHMS to determine the overall performance and adequacy of the system. (UAI - REVIEW01)	Are there written procedures that describe the manner in which the management will review the WSHMS? Check for procedures for the above requirement.	DR				Final Score: / 1
II	4.5.2	Reviews should be carried out by top management at planned intervals. (SS 506: 2009 Requirements - 4.6.)	Is there a management review by top management of the WSHMS at planned intervals? Check documentation for evidence.	DR				
II	4.5.3	Senior management should periodically evaluate the OSHMS to determine the overall performance and adequacy of the system. (UAI - REVIEW01)	Are these management review procedures implemented and maintained at planned intervals (based on documents and interviews)? Verify relevant documents with 3 participants.	DR/IP				
II	4.5.4	Management review findings should be formally communicated to individuals responsible for the affected part(s) of the OSHMS so they may take appropriate actions. (UAI - REVIEW04)	Do the procedures specify to whom management review findings should be transmitted Check for procedures for the above requirement.	DR				
II	4.5.5	Top management shall review the organisation's OSH management system, at planned intervals, to ensure its continuing suitability, adequacy and effectiveness. Reviews shall include assessing opportunities for improvement and the need for changes to the OSH management system, including the OSH policy and OSH objectives. (SS 506: 2009 Requirements - 4.6.)	Does the management review address the adequacy and possible need for changes to the policy and objectives? Check documentation for the above requirement.	DR				

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BAND	S/No.	Guidance notes and standard specifications	Audit Question	DR/IP/PI	Results			Auditor's Remarks
					Yes	No	NA	
II	4.5.6	Top management shall review the organisation's OSH management system, at planned intervals, to ensure its continuing suitability, adequacy and effectiveness. Reviews shall include assessing opportunities for improvement and the need for changes to the OSH management system, including the OSH policy and OSH objectives. (SS 506: 2009 Requirements - 4.6.)	Does the management review address the adequacy and possible need for changes to the Management programme(s)? <i>Check documentation for the above requirement.</i>	DR				
II	4.5.7	Top management shall review the organisation's OSH management system, at planned intervals, to ensure its continuing suitability, adequacy and effectiveness. Reviews shall include assessing opportunities for improvement and the need for changes to the OSH management system, including the OSH policy and OSH objectives. (SS 506: 2009 Requirements - 4.6)	Does the management review address the adequacy and possible need for changes to Key procedures (e.g. risk assessment procedures, communication, consultation, participation, internal audit results)? <i>Check documentation for the above requirement.</i>	DR				
II	4.5.8	Input to management reviews shall include: a) results of internal audits and evaluations of compliance with applicable legal requirements and with other requirements to which the organisation subscribes; b) the results of participation and consultation (see 4.4.3); c) relevant communication(s) from external interested parties, including complaints; d) the OSH performance of the organisation; e) the extent to which objectives have been met; f) status of incident investigations, corrective actions and preventive actions; g) follow-up actions from previous management reviews; h) changing circumstances, including developments in legal and other requirements related to OSH; and i) recommendations for improvement. (SS 506: 2009 Requirements - 4.6)	Are the required inputs (as stated in the guidance notes and standard specifications) provided for management review? <i>Check and verify documentation for the above requirement.</i>	DR				
Final Score: 17								
III	4.5.9	The outputs from management reviews shall be consistent with the organisation's commitment to continual improvement and shall include any decisions and actions related to possible changes to: a) OSH performance; b) OSH policy and objectives; c) resources; and d) other elements of the OSH management system. (SS 506: 2009 Requirements - 4.6)	Are the recommendations of the management review implemented? <i>Sample 3 recommendations for implementation.</i>	DR/PI/IP				
III	4.5.10	The outputs from management reviews shall be consistent with the organisation's commitment to continual improvement and shall include any decisions and actions related to possible changes to: a) OSH performance; b) OSH policy and objectives; c) resources; and d) other elements of the OSH management system. (SS 506: 2009 Requirements - 4.6)	Are management review findings used to initiate preventive and corrective actions? <i>Check documentation for the above requirement and verify with management or personnel in charge.</i>	DR & IP				
III	4.5.11	Top management shall review the organisation's OSH management system, at planned intervals, to ensure its continuing suitability, adequacy and effectiveness. Reviews shall include assessing opportunities for improvement and the need for changes to the OSH management system, including the OSH policy and OSH objectives. (SS506: 2009 Requirements - 4.6)	Is the management review carried out with the aim to ensure the continuing suitability, adequacy and effectiveness of the WSH management system? Changes to the WSHMS shall include WSH performance, objectives, resources and other elements of the SMS. <i>Check documentation and interview personnel for the above requirement.</i>	DR & IP				
III	4.5.12	Top management shall review the organisation's OSH management system, at planned intervals, to ensure its continuing suitability, adequacy and effectiveness. Reviews shall include assessing opportunities for improvement and the need for changes to the OSH management system, including the OSH policy and OSH objectives. (SS 506: 2009 Requirements - 4.6, 1st para)	Is the top management in the project involved in the management review? <i>Verify attendance records for management participation.</i>	DR				

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					Yes	No	NA	
III	4.5.13	The outputs from management reviews shall be consistent with the organisation's commitment to continual improvement and shall include any decisions and actions related to possible changes to: a) OSH performance; b) OSH policy and objectives; c) resources; and d) other elements of the OSH management system. (SS 506: 2009 Requirements - 4.6)	Is the management review findings and subsequent actions documented and disseminated to personnel with WSH responsibilities and relevant parties? Sample 3 action items and verify with relevant parties.	DR & IP				Final Score: / 5
IV	4.5.14	Reviews shall include assessing opportunities for improvement and the need for changes to the OSH management system, including the OSH policy and OSH objectives. (SS506 : 2009 Requirements - 4.6)	Is the Changing circumstances considered during management review so as to effect changes? Changing circumstances include developments in legal and other requirements related to WSH Check reports for the above requirement.	DR				
IV	4.5.15	Reviews shall include assessing opportunities for improvement and the need for changes to the OSH management system, including the OSH policy and OSH objectives. (SS506 : 2009 Requirements - 4.6)	Is the Commitment to continual improvement considered during management review so as to effect changes? Check documents for the above requirement.	DR				
IV	4.5.16	Input to management reviews shall include: a) results of internal audits and evaluations of compliance with applicable legal requirements and with other requirements to which the organisation subscribes; b) the results of participation and consultation (see 4.4.3); c) relevant communication(s) from external interested parties, including complaints; d) the OSH performance of the organisation; e) the extent to which objectives have been met; f) status of incident investigations, corrective actions and preventive actions; g) follow-up actions from previous management reviews; h) changing circumstances, including developments in legal and other requirements related to OSH; and i) recommendations for improvement. (SS506: 2009 Requirements - 4.6)	Do required inputs (as stated in the guidance notes and standard specifications) provided for management review for the project include the following? - Reports of emergencies (actual or exercises). - Worker satisfaction survey. - Incident statistics. - Result of Regulatory inspections. - Results and/or recommendations from monitoring and measurements. - WSH Performance of contractors. - WSH Performance of supplied products and services. - Information on changes in legal and other requirements. Check min 3 inputs in the reports.	DR				
IV	4.5.17	Input to management reviews shall include: a) results of internal audits and evaluations of compliance with applicable legal requirements and with other requirements to which the organisation subscribes; b) the results of participation and consultation (see 4.4.3); c) relevant communication(s) from external interested parties, including complaints; d) the OSH performance of the organisation; e) the extent to which objectives have been met; f) status of incident investigations, corrective actions and preventive actions; g) follow-up actions from previous management reviews; h) changing circumstances, including developments in legal and other requirements related to OSH; and i) recommendations for improvement. (SS506 : 2009 Requirements - 4.6)	Do the required inputs (as stated in the guidance notes and standard specifications) provided for management review of the project include the following? - reports from individual managers on the effectiveness of the WSH system . - reports of on going hazard identification, risk assessment and risk control processes. - progress in the achievement of WSH training plans. Check for all inputs in the reports for the above requirement.	DR				

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					Yes	No	NA	
IV	4.5.18	The outputs from management reviews shall be consistent with the organisation's commitment to continual improvement and shall include any decisions and actions related to possible changes to: a) OSH performance; b) OSH policy and objectives; c) resources; and d) other elements of the OSH management system. Relevant outputs from management review shall be made available for communication and consultation (see 4.4.3). (SS506: 2009 Requirements - 4.6)	Do the required outputs (as stated in the guidance notes and standard specifications) provided for management review of the project include the following? - the suitability, adequacy, and effectiveness of current hazard identification, risk assessment and risk control processes. - current levels of risk and the effectiveness of existing control measures. - adequacy of resources (financial, personnel, materials). - the state of preparedness for emergency. - an assessment of the effects of foreseeable changes to legislation or technology Check min 3 outputs in the reports for the above requirement.	DR				
								Final Score: / 5

CONSTRUCTION SAFETY AUDIT SCORING SYSTEM - SCORE CARD

Name of Company: _____

Audit Date: _____

S/No.	System Elements	BAND				Instructions:
		I	II	III	IV	
1	OSH Policy	100%	100%	100%	100%	Instructions: - Shade cells that achieve 70% and above in ascending band sequence, starting from Band I. - Refer to the sample score card. Eg for Element 3.3, shading will stop at Band I since Band II achieved less than 70%.
2.1	Planning for hazard identification, risk assessment and risk control	100%	75%	60%		
2.2	Legal and other requirements	100%	100%	100%	100%	
2.3	Objectives	100%	100%	50%		
2.4	OSH Management Programme(s)	100%	100%	80%	50%	
3.1	Structure and responsibility	100%	100%	100%	100%	
3.2	Training, awareness and competence	75%	60%	71%		
3.3	Consultation and communication	100%	62%	73%		
3.4	Documentation	100%	100%	100%	100%	
3.5	Document and data control	100%	100%	100%	100%	
3.6	Operational control	100%	76%	88%	33%	
3.7	Emergency preparedness and response	100%	70%	88%	100%	
4.1	Performance measurement and monitoring	100%	89%	100%	60%	
4.2	Accidents, incidents, non-conformances and corrective and preventive action	100%	83%	67%		
4.3	Records and records management	100%	100%	100%	100%	
4.4	Audit	100%	75%	83%	67%	
4.5	Management review	100%	83%	80%	50%	
No of Total element score 70% and above		17 / 17	15 / 17	12 / 17	7 / 17	
% of Total element score 70% and above:		100%	88%	71%	41%	

Name of Lead Auditor: _____

Signature of Lead Auditor: _____

Updated: Sept 2013