



Services for professional procurement.
Be better informed, make better decisions.

‘Desktop’ Audit Protocol

All Disciplines

Version: 2.5

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Preface

This document contains the Core Audit Module by which BuildingConfidence members will measure their supply chain. The principle constituents of this process are the verification and assessment of the management systems used by the supply chain; looking at both the quality and applicability of these systems.

The Core Audit Module is intended to verify information submitted at the prequalification (PQQ) stage and to assess additional areas of compliance. Auditors and auditees will be required to familiarise themselves with the information supplied at the prequalification stage prior to the audit commencing.

Please note that all text in green is either new or revised as part of the reissue process of the protocol.

Compliance with Legislation & CDM Regulations

Please note that questions marked with an “L” denote there is a legislative compliance requirement supporting all or part of the question. Questions marked with a “CDM” denote there is a specific requirement against the Construction (Design and Management) Regulations. Questions without legislative or specific CDM requirements are left blank

CDM	Legislative requirement against the CDM Regulations
L	Legislative requirement other than the CDM Regulations

Auditor application of the guidance notes

The bullet-pointed guidance notes (blue boxes) are provided to assist auditor and auditee to provide consistency across the scheme. The auditor may apply whichever of these points they see fit to assure themselves that the suitable controls are in place for the activity of the organisation being audited.

Each question has been assigned a unique identifying number; e.g. MC.1.1 = MC (audit section).1 (audit question).1 (audit question guidance). Therefore, the numbering may not appear in order or consecutive

PAS 91 Compliance and alignment

This protocol has been reviewed to ensure that it at least aligns with the requirements of PAS91; Organisations accredited to the BuildingConfidence standard can have confidence that they are also aligned with these principles.

Documentary Evidence requirements

Text in blue is the documentary evidence to be supplied to the auditor.

The stated documents are the minimum required to be submitted to pass the audit. Please provide all the evidence required as directed and the auditor may well request further evidence to clarify fulfilment of the requirements identified within the protocol.

Appendix C is a flow chart that explains the actions to be undertaken to complete BuildingConfidence Desktop audits.

Appendix D at the end of the protocol provides checklist for the Organisation to assist them with collating the submission together.

Further evidence will be required by the auditor during the telephone interview. The Organisation will have one working day to submit the evidence.

Assessment Requirements

1. Management Controls

1.1 (MC.1.2) - What is the Organisation's capability and geographical area of operation?

Guidance:

- *Company House / Charity Registration numbers to be included within the scope of the audit.*
- *Does the Organisation work on construction works sites?*
- *Identify the roles undertaken under the Construction (Design and Management) Regulations (if applicable)*
- *Does the Organisation:*
 1. *Assume the responsibilities of Designer under the CDM Regulations*
 1. *Undertake Permanent Design responsibility but utilises third parties for design delivery*
 2. *Provide small scale design solutions via CDP packages*
 3. *Provide temporary works design*
 4. *Work to drawings provided by Principal Contractors/Designers*
- *Have there been any changes since the PQQ was submitted?*
- *Are the insurance levels unaltered from the PPQ and up to date?*
- *Are there any limitations identified within the insurance?*
- *Is the Organisation working or seeking to work for an industry sector with specific competence requirements (Nuclear/ Rail/ MoD etc.)?*

Evidence required

- a) *A project list for current jobs at the time of the audit*
- b) *A list of all personnel employed directly by the Organisation at the time of the audit*
- c) *List of subcontractors being used currently (if applicable)*

1.2 (MC.2.2) How does the Organisation issue and control its company policies? L

Guidance:

- *The following Policies have been published (where applicable):*
 1. *Health & Safety*
 2. *Environment*
 3. *Quality*
 4. *Sustainable Timber Procurement Policy*
 5. *Equal Opportunities Policy*
 6. *Anti-Bribery, Corruption, Fraud and Malpractice Policy*
 7. *Ethical Code of Conduct or Policy (Corporate Social Responsibility)*
 8. *'Worksafe' Policy – right to refuse to work under health & safety concerns*
 9. *Security Policy for permanent sites*
- *What is the process for reviewing policies and who is involved in the review?*
- *Are the HSEQ and Sustainable Timber (where applicable) Policies reviewed annually?*
- *Are they signed by the Senior Manager responsible for that area?*
- *Does the H&S Policy state that Health & Safety should never be compromised for other objectives?*
- *Do the HSEQ policies include a statement on continual improvement?*
- *Where the policies are displayed (incl. websites)?*
- *Are the policies briefed to personnel?*

Evidence required

- a) The policies listed above
- b) Supporting statements relating to review, authorisation, briefing and their display

1.3 (MC.4.3) How does the Organisation clarify its management structure and responsibilities? L**Guidance:**

- *Is the management structure defined*
- *Job descriptions and deputising arrangements defined (SQEP roles, if applicable)*
- *If there are different structures on projects how this relates to the overall hierarchy. (if applicable)*
- *Are there designated responsibilities for the following:*
 1. *Health & safety*
 2. *Occupational health*
 3. *Accident reporting under RIDDOR*
 4. *Quality (incl. Quality Control)*
 5. *Environment and sustainability*
 6. *Compliance with the CDM Regulations (if applicable)*
 7. *Design (including temporary works)*
 8. *Compliance with anti-bribery and corruption law and policies*
 9. *Training & competence*
 10. *Supply chain*
 11. *Corporate social responsibility*
 12. *Business continuity and emergency planning (incl. Fire)*
 13. *Facilities management*
 14. *Workplace security*
- *Project Level Requirements (if applicable):*
 1. *Fire Safety*
 2. *Supply Chain Management*
 3. *Delivery of temporary works*
 4. *Site Security and emergency planning (if different from above)*

Accident Reporting under RIDDOR (if different from above)

Evidence required

- a) Organisation Charts
- b) Deputy arrangements
- c) Statement identifying those responsible for the activities above (if not clear from the Organisation chart)
- d) Statement relating to responsibilities on-site (if applicable)

1.4 (MC.5.3) How does the Organisation assure itself and its clients that it has control of its activities? L**Guidance:**

- *Does the organisation have arrangements to control the following:*
 1. *Health & safety*
 2. *Quality*
 3. *Environment*

4. Training and competence

(e.g. Policy, Risk and Impact Assessments, Procedures, Aspects & Impacts Register, Register of Legislation etc.)

- Are there controls to manage contractual issues with the client and supply chain
- Does the Organisation have written standard operating procedures
- Does the Organisation have processes in place to deliver/manage design, including temporary works (if applicable)

External Accreditation

- Preferable - Are Management Systems certified to ISO/OHSAS standards by a UKAS-accredited body?
- Certified to Chain of Custody or other scheme certifications? (if applicable)
- Has the Organisation received any awards in the previous 12 months?

Evidence required

- a) Statement relating to how internal company systems are developed and controlled
- b) Provide list of written (index) of procedures (auditor to ask for a selection for review)
- c) Evidence of communication of changes to requirements

1.5 (MC.7.1) How does the Organisation control its documents?

Guidance:

- The organisation has a Document Control Procedure that identifies the key documents requiring control.
 1. How documents are reviewed and changes identified.
 2. How documents are issued and reach their point of use; in particular multi-site operations.
 3. There is a process for identifying documentation with expiry dates
 4. The process for cancelled and superseded documentation.
 5. Archiving processes
 6. A master list of controlled documents and their status is maintained.
- How does the Organisation ensure that records and associated documentation is maintained, available for verification, yet secure?
- Process to ensure that client document issue/ handover requirements are met

Evidence required

- a) Either a document control procedure; or
- b) Statements as to how documentation is identifiable, superseded versions are removed from circulation and records are maintained in archive.

1.6 (MC.8.4) How does the Organisation monitor its performance? L

Guidance:

- How is health & safety, environmental and quality performance formally monitored and reviewed?
- How does the Organisation ensure that it is meeting its contractual and programme delivery requirements
- How is progress against objectives and targets communicated both internally and externally?
- Does the Organisation produce and analyse accident and incident Statistics?
- Does the organisation produce regular reports detailing accidents, incidents and dangerous occurrences statistics? Are these reports available?
- Does the Organisation have evidence of lessons learned being used for improvement of processes?

Internal and External Audit

- Are the external audits available to verify the certification is current?
- Are the management systems assessed internally on a regular basis by objective, competent personnel?

- *Has a documented audit schedule been prepared?*
- *Are internal audit reports available?*
- *Are corrective actions raised through the internal audit process reviewed by management and that the Organisation has a managed process for the control of corrective actions.*
- *Auditor to check whether there has been any demonstrated improvements*

Key Performance Indicators

- *Does the Organisation monitor their performance against set Key Performance Indicators (KPI's), such as: (as applicable)*
- *Do the Organisation's KPI scopes include offices and/or peripatetic sites (if applicable)?*
- *Has the Organisation based its KPI objectives on the best practice advice and recognised level of performance (e.g. ISO supporting information, Constructing Excellence advice, Considerate Constructors, BREEAM, Carbon Buzz, WRAP's Halving Waste to Landfill Commitment etc.?)*
- *Does the Organisation have evidence of corrective action in response to performance indicators not being met?*

Evidence required

- a) **Details of recorded objectives/ Key Performance Indicators**
- b) **Evidence of senior management reviewing performance against these objectives.**
- c) **Internal audit programme, reports and evidence of close out**

2. Legislation and Other Requirements Compliance

2.1 (LC.1.3) How does the Organisation ensure that it is: L

a) Aware existing legislation relevant to its activities

b) Aware of proposed changes to/ new legislation?

Guidance:

- *How the organisation accesses and reviews legislation and regulations, including:*
 1. *Health & Safety*
 2. *Environment (including waste)*
 3. *Employment Law*
 4. *Anti-bribery and corruption law*
- *Does the Organisation have a mechanism to maintain a register of applicable Legislation?*
Auditor Note: record the methodology used and how changes are dealt with & managed. This should include frequency of review.
- *If consultants are used, how does the outside party communicate requirements/ changes?*
- *Has the Organisation been prosecuted (or had notices issued) within the last five years for either a health & safety offences or an environmental offence?*
- *Has the Organisation (or any of its directors, senior officers or senior managers) been investigated, prosecuted, convicted, or been the subject of other enforcement action taken within the last five years for bribery or corruption offences?*
- *Does the Organisation have the processes in place to comply with Waste Legislation (SWMP, Duty of Care, Waste Transfer Licences and consignment notes, European Waste Coding)*
- *Assess compliance with IPPC processes (if applicable).*

Evidence required

- a) *Either evidence of internal process review in response to legislation amendment/ implementation; or*
- b) *Evidence of external consultant providing updates*

2.2 (LC.5.2) How does the Organisation identify and control its risks/impacts and opportunities? L CDM

Guidance:

- *That the production of health & safety risk (incl. occupational health) and environmental impact assessments are formally documented within the Organisation's management system.*
- *Does the Organisation retain a register of its environmental aspects and impacts appropriate to the scope of its services/products*
- *The responsibility for compiling and authorising the risk/impact assessments.*
- *Defined the minimum competency for personnel authorised to compile risk/aspect assessments*
- *Whether risk/aspect assessments are generic to the Organisation's scope of operations or unique to each particular contract.*
- *Are assessments of a safe working environment supported by temporary works made, even if they are not the direct responsibility of the contractor.*
- *How the Organisation ensures that all applicable site issues are incorporated into the relevant risk/impact assessments. (Limitations of size, gradient, climate, time the activity is to be completed, Noise, light, deliveries etc.)*
- *How risk/impact assessments are communicated to staff, clients and Organisations/subcontractors.*
- *That a record of risk/aspect assessment briefing is retained.*
- *That where method statements are produced, are risk assessments incorporated or referenced.*
- *Periodic reviews of risk/aspect assessments are undertaken*

- Are Manual Handling, DSE, Lifting Operations assessments are undertaken (as applicable)
- Are Site Inspections undertaken to ensure controls are maintained?
- How does Organisation consult with employees and subcontractors regarding Health and Safety (Method Statement Briefings etc.?)

Evidence required

- a) Risk assessors identified to established competence criteria
- b) Recorded risks assessments from the auditor's chosen project, signed off and evidence of briefing
- c) Evidence of review of risk assessment

2.3 (LC.11.2) How does the Organisation ensure it identifies and controls the effects of potentially harmful substances? L

Guidance:

- Has the Organisation identified and assessed substances used that may fall within the scope of the COSHH Regulations?
- If the Organisation holds Material Safety Data sheets for all substances used.

Evidence required

- a) Register of harmful substances
- b) Auditor to choose a selection – MSDS/ COSHH Risk Assessments

2.4 (LC.8.2) How does the Organisation comply with the relevant requirements within the Construction (Design and Management) Regulations? L CDM

Guidance:

- If the Organisation acts as a Client can it demonstrate mechanisms for:
 1. Appointing other duty holders
 2. Ensuring relevant information is provided to other duty holders
 3. Ensuring the Principal Designer and Principal Contractor carry out their duties
 4. Allocating sufficient time and resources (including welfare arrangements)
- If the Organisation acts as a Principal Designer can it demonstrate mechanisms for:
 5. Planning, managing, monitoring and coordinating health and safety in the pre-construction phase of a project including:
 6. identifying, eliminating or controlling foreseeable risks;
 7. ensuring designers carry out their duties;
 8. preparing and providing relevant information to other duty holders;
 9. liaising with the principal contractor to assist in the planning, management, monitoring and coordination of the construction phase.
- If the Organisation acts as a Designer can it demonstrate mechanisms to:
 10. eliminate, reduce or control foreseeable risks that may arise during construction and the maintenance and use of a building once it is built.
 11. provide information to other members of the project team to help them fulfil their duties.
- If the Organisation acts as a Principal Contractor can it demonstrate mechanisms for:
 12. Planning, managing, monitoring and coordinating the construction phase of a project. This includes:
 13. liaising with the client and principal designer;
 14. preparing the construction phase plan;

15. *organising cooperation between contractors and coordinating their work.*
 16. *Ensuring suitable site inductions are provided*
 17. *Ensuring Site Security (preventing unauthorized access)*
 18. *Ensuring workers are consulted and engaged in health and safety*
 19. *Ensuring welfare facilities are provided.*
- *If the Organisation acts as a Contractor can it demonstrate mechanisms for?*
 20. *Planning, managing and monitoring construction work under their control so that it is carried out without risks to health and safety;*
 21. *For projects involving more than one contractor, coordinating their activities with others in the*
 22. *project team*
 23. *For single-contractor projects, preparing a construction phase plan*

Evidence required

- a) *If acting as a contractor, evidence of attendance at project meetings to discuss H&S/ Design issues*
- b) *Evidence of establishing safe systems of work acceptable to the Principal Contractor*

2.5 (LC.10.2) What are the Organisations arrangements for the issuing, checking and monitoring of Personal Protective Equipment (PPE)? L

Guidance:

- *What arrangements are in place for the issue/ re-issue of PPE?*
- *Is PPE provided free of charge to own employees.*
- *PPE is called up where applicable in the risk assessment processes?*
- *What PPE provisions are made for temporary, contract personnel or other visitors?*
- *Is training and guidance provided for its correct use, maintenance and storage?*

Evidence required

- a) *A statement verifying that all PPE is provided free of charge*
- b) *Arrangements for and evidence of inspection and testing of PPE to ensure its integrity*

2.6 (LC.14.2) How does the Organisation meet occupational health surveillance requirements? L

Guidance:

- *Who has been involved in setting up the occupational health process (employees, specialist advice, Unions or representatives)*
- *How are the potential hazards identified?*
- *What control options are considered to bring the risks down to as low as is reasonably practicable?*
- *Do employees have pre-employment medicals before they start working for the Organisation?*
- *If personnel changes roles are their occupational health requirements assessed prior to starting?*
- *Does the Organisation undertake a programme of routine health surveillance?*
- *What processes are in place to ensure that control measures remain appropriate to individual's condition/ requirements*
- *Is occupational health surveillance/ advice undertaken in-house or by a specialist provider?*
- *Are occupational health personnel on-site or are they remote?*
- *Is there statutory/client requirement for regular surveillance?*
- *How are results fed back to the Organisation?*
- *How often is the occupational health process reviewed? Is this review recorded?*
- *How does the Organisation manage their subcontractors in this area, if applicable?*

Occupational Health Records

- Where does the Organisation store its OH information on employees?
- Do employees have the opportunity to review the Records kept regarding them if requested? (MC.7)
- Does the Organisation have a policy for how long records must be retained? Does this comply with COSHH requirements for the retention of heavy metals, asbestos, compressed air, ionising radiation etc. - minimum 40 years)

Evidence required

- Evidence of OH provider being available for testing/ advice
- Evidence of arrangements commensurate with the health risks of the Organisation's activities
- Proof of records being maintained for the legal minimum timescales

2.7 (LC.16.2) What arrangements does the Organisation have in place to ensure that it has adequate first aid cover? L

Guidance:

- An assessment has been undertaken to identify first aid requirements based on work activity.
- If first aid cover is provided by the Principal Contractor, how are these arrangements confirmed?
- The number of workers engaged by the Organisation.
- Does the Organisation provide first aid to self-employed workers?
- The number of First Aid at Work trained personnel (3-day certificated course/ 2-Day requalification/ 1-day EFAW Course)
- The number of Appointed Persons

Evidence required

- Statement of the number of first aiders in the Organisation
- Evidence of training (number to be stipulated by the auditor)

2.8 (LC.13.1) How does the Organisation ensure that personnel recruited are entitled to work in the United Kingdom? L

Guidance:

- Has the Organisation identified any foreign workers and their nationalities
- That the Organisation has documented controls to demonstrate compliance with Sections 15 to 25 of the Immigration, Asylum & Nationality Act 2006.
- That controls are applicable to all potential or current employees.
- Evidence that documents used to verify right to work are compliant with the Home Office Guidance "Comprehensive Guidance for Employers on Preventing Illegal Working".
- Confirmation that copies of all documents verified are retained for at least 2 years after the individual has left the employer.
- How does the Organisation assure itself that all agency, self-employed, subcontracted personnel are eligible to work in the UK
- That the Organisation has a mechanism for periodic review of right to work of all workers including agency temporary and seasonal employees (if applicable).

Evidence required

- Evidence of the identification requirements for personnel

3. Quality Management Controls

3.1 (QM.5.2) How does the Organisation ensure that its work equipment is fit for purpose? L

Guidance:

- Does the Organisation have a process to identify each item of plant or machinery?
- What are the Organisation's arrangements to ensure that all plant, small hand tools and equipment are approved prior to use?
- How are calibration requirements controlled (if applicable)
- If the Organisation uses equipment from a third party, how does it assure itself that the equipment is fit for purpose?

- Does the Organisation have processes in place to identify and deliver statutory and other inspections/ service maintenance?
- Lifting and its ancillary (chains/ slings/ strops) equipment are used; does the Organisation possess processes to ensure they remain safe (if applicable)?
- The competence requirements for internal staff involved in maintenance, inspections and servicing of equipment.
- That maintenance work plans are signed by a competent person.

Evidence required

- Registers maintained of equipment
- Testing regimes identified
- Testing/ calibration and inspection records for items chosen by the auditor

3.2 (QM.1.2) How does the Organisation assure itself and its clients that the product is meeting:

a) Specification

b) Client's Requirements and Expectations?

Guidance:

- Is product standard or bespoke?
- What is the process of specification review?
- Is there a process for clarifying the client's expectations?
- What is the process for issuing and revising costs and programmes, how are changes communicated to the client?
- How has the Organisation identified activities that will require checking/ verification?
- How is the handover process controlled and recorded (if applicable)?
- How does the Organisation identify the required tests/ checking to meet legislation/ client requirements (national/ international standards)?
- How does the Organisation communicate these requirements to personnel?

Evidence required

- Evidence of the Inspection & Test requirements being planned (auditor to choose project(s))
- Evidence of testing being undertaken to that plan
- Evidence of handover process being completed

3.3 (QM.2.2) How does the Organisation control non-conforming products/ services, including complaints?

Guidance:

- Has the Organisation developed a process that mitigates not only customer complaints, but also other third parties (local residents, pressure groups, local statutory bodies)?
- Does the Organisation have a process to rectify identified non-conforming product?
- Is there a process for investigating the causes of product non-compliance?

Evidence required

- Controls for non-conforming products

3.4 (QM.6.2) How does the Organisation ensure the security of the information it possesses?

Guidance:

- What arrangements does the Organisation have regarding IT Data security (firewalls, virus scanning etc.)?

- Are laptops password protected to avoid data being accessible should the laptop be lost or stolen?
- What processes are in place to protect the Organisation's and Client's intellectual property?
- Are confidentiality clauses standard within contracts?
- How is electronic information stored – databases/ MS Office documents/ Portals?
- A process to ensure there is no internal conflict of interest in handling different client's information?
- Is information copied onto disks/ memory sticks/ external hard-drives – how is security maintained in this event?
- If the Organisation works in the Defence/ Prisons/ Nuclear sectors, do they have an approved Security Plan?

Evidence required

- a) Statement/ procedures for IT security

3.5 (QM.4.3) What controls are in place to manage the design process within the Organisation (If applicable)? L CDM

Guidance:

- *What controls does the Organisation have in place to manage sublet work/design packages with Organisations that are based overseas and that they are able to meet UK regulatory requirements (if applicable)?*
- *Has the Organisation a process to engage with specialist consultants (e.g. acoustic/ air tightness) to assist with the design?*
- *There is a documented process for submission of designs (including revision status, change process etc.).*
- *Does the Organisation have processes in place to ensure that the proposed designs meet the specification and the design brief?*
- *Does the Organisation have the processes and competence to meet the Temporary Works requirements?*
- *Does the Organisation use third party checking of the designs*
- *Does the Organisation set design quality performance indicators*
- *How does the Organisation assess the designs for value and functionality*
- *Does the Organisation have 3d/ BIM programmes to assist with the designs*

Evidence required

- a) Procedures for the control of permanent and temporary works
- b) Evidence of sign-off of drawings to be marked up 'for construction'
- c) Permits to load and strike for temporary works.

4. Training and Competence

4.1 (TC.2.1) How does the Organisation ensure only competent people undertake activities? L

Guidance:

- *How does the Organisation identify and recruit competent personnel?*
- *How security/ police/ Disclosure & Barring Service (DBS) checking requirements are fulfilled?*
- *What are the Organisation's arrangements for ensuring that existing competency documents or licences are checked/ validated?*
- *That accreditation and certification are verified for currency through the appropriate bodies. (RICS, RIBA, CSCS for architect, licences for plant and equipment etc.)*
- *What is the Organisation's policy and arrangements for the induction of employees (this should include employees, contracted personnel and visitors)?*
- *How are site inductions controlled?*

Evidence required:

- a) Evidence of training being completed (individuals to be chosen by the auditor)
- b) Evidence of controls for competence with fixed expiry dates (if applicable)

4.2 (TC.1.2) How does the Organisation control competency management? L CDM

Guidance:

- How does the Organisation identify competence requirements for a particular activity?
- How does the Organisation identify client-specific requirements?
- How does the Organisation record that personnel meet the identified competence requirements (matrix, database, hard-copy files etc.)
- How does the Organisation control the expiry of certification?
- How are the competence requirements of non-directly employed personnel maintained and controlled?
- Are periodic performance reviews/ appraisals undertaken?
- How is Continuous Professional Development undertaken?
- Does the Organisation have succession management plans?
- Are Permanent and Temporary Works Design requirements identified?

Evidence required:

- a) Competence requirements for activities identified

4.3 (TC.3.2) How does the Organisation ensure that they have adequate HSEQ and employment support?

Guidance:

- Technical support personnel have experience in the relevant sector
Technical support is suitably qualified (internal/ lead auditor)?
- That the competent personnel are members of an appropriate professional institution:
 - a) Health & Safety - Institution of Occupational Safety and Health - IOSH; International Institute of Risk & Safety Management – IIRSM.
 - b) Quality – International Register of Certified Auditors, IRCA, Chartered Quality Institute - CQI,
 - c) Environmental – Institute of Environmental Management and Assessment - IEMA.
 - d) Employment - The Chartered Institute of Personnel and Development (CIPD)

Evidence required:

- a) Competence certification for those with HSEQ responsibilities/ providing advice
- b) Evidence of consultant competence if support is provided externally

5. Social & Ethical Behaviour

5.1 (SE.1.1) Does the Organisation actively engage with the local communities in which it operates?

Guidance:

- Is there a recorded preference to local sourcing, wherever possible?
- When does engagement begin with the local community?
- What activities are undertaken to ensure good communication with affected/ interested parties to minimise complaints/ disruption
- How are complaints from the community handled
- Are methodologies developed to minimise their impact upon the local community
- Auditor to verify and record what programmes or policies the Organisation has in place to promote good community relations.
Examples might include volunteering programmes, apprenticeship openings and use of local labour
- Does the Organisation have processes in place to provide stakeholder engagement (offer of resources/ personnel for meetings, information provided in easy-to-understand précis etc.?)
- Are the proposed methodologies reviewed to minimise noise, vibration, reduction in air quality, light pollution

- Does the logistical management plan take into account local sensibilities (reduction in local transport links, access for emergency services, schools and other facilities, religious holidays etc.?)
- Does the Organisation undertake any sponsorship or charitable work?

Evidence required:

- Evidence of interaction with communities either where the Organisation is based or where they are working
- Evidence of working methods that minimise impact and working with others to reduce impact.

5.2 (SE.3.1) How does the Organisation ensure the ethical treatment of its personnel? L

Guidance:

- The Auditor should sample personnel files and validate that workers, including temporary or seasonal workers, are issued with information detailing their employment terms.
- How does the Organisation ensure that they pay at least the legal minimum wage?
- Does the Organisation recognise the London Living Wage?
- How are working hours monitored? (in compliance with Working Time Regulations 1998, Opt out option)
- Are pension, holidays and other benefits offered to personnel?
- Are personnel free to join a trade union if they wish?
- Are there anti-bullying processes in place?
- What controls are in place to ensure that any recruitment direct from their country of origin does not infringe ethical issues (if applicable)
- Auditor to examine the processes in place to ensure that the workers are employed of their own free will.

Evidence required:

- Statement regarding trade union membership
- Evidence of the correct level of the minimum wage and confirmation of the lowest rate paid member of staff at the time of the audit
- Evidence of the issue of contracts, offers of pensions at job offer stage

5.3 (SE.4.2) How does the Organisation minimise the likelihood of bribery, corruption, fraud, malpractice and anti-competitive behaviour? L

Guidance:

- What processes the Organisation has for the control of fraud and malpractice.
- Has the Organisation reviewed its processes against the requirements of the Bribery Act 2010?
- How are potential acts of bribery, corruption or anti-competitive behaviour reported and investigated within the Organisation?
- How does your organisation ensure compliance with Competition Law (as defined in Question LC.1)?
- How does the Organisation ensure compliance with anti-bribery and corruption laws (in particular the Bribery Act 2010)
- Do Organisation policies prohibit the use of "blacklists" in the selection of potential personnel?
- Does the Organisation have a designated person to contact if there are suspicions of bribery or corruption
- Does your organisation have a 'Whistle-Blowing' policy to encourage employees and officers to report suspected illegal behaviour and does it offer protection to individuals who come forward?
- What arrangements are in place to detect and avoid anti-competitive behaviour?
- What internal checking process is in place to ensure that all tenders/ work packages are tendered competitively

Evidence Required:

- Statement on the Organisation's position on the receipt and giving of gifts/ hospitality
- Statement/ policy for the Organisation's stance on fraud/ malpractice/ whistle-blowing
Tender/ Work Package review and authorisation process/ controls

5.4 (SE.4.3) Does the Organisation prepare and publish an annual Slavery and human trafficking statement in accordance with the Modern Slavery Act? L

Guidance:

- The statement should define;
 - a) The steps the organisation has taken during the financial year to ensure that slavery and human trafficking is not taking place;
 - i. in any of its supply chains, and
 - ii. in any part of its own business
 - or
 - b) Be a statement that the organisation has taken no such steps.

Where a statement has been prepared;

- *Typical information that may be included:*
 - a) organisation's structure, its business and its supply chains.
 - b) the organisation's policies in relation to slavery and human trafficking.
 - c) the organisations due diligence processes in relation to slavery and human trafficking in its business and supply chains.
 - d) The parts of its business and supply chains where there is a risk of slavery and human trafficking taking place and the steps that it has taken to assess and manage the risk.
 - e) Its effectiveness in ensuring that slavery and human trafficking is not taking place in its business or supply chains, measured against such performance indicators as it considers appropriate.
 - f) The training about slavery and human trafficking that is available to its staff.
- Statement approval:
 - a) By the Board of Directors or equivalent management body (for corporate bodies other than a Limited Liability Partnership LLP) and signed by a director (or equivalent).
 - b) For LLP's; must be approved by the members and signed by a designated member.
 - c) For limited partnerships registered under the Limited Partnerships Act 1907, must be signed by a general partner.
 - d) If the organisation is any other kind of partnership; must be signed by a partner.
- Is the statement published or made available to those who may wish to see it? Either by;
 - a) The organisations website (either front page or hyperlink on front page to the statement).

If the organisation does not have a website, it must provide a copy of the slavery and human trafficking statement to anyone who makes a written request for one, and must do so before the end of the period of 30 days beginning with the day on which the request is received.

6. Supply Chain Management

6.1 (SCM.1.7) How does the Organisation ensure effective supply chain management? L CDM

Guidance:

- *Does the Organisation have a mechanism for periodic monitoring of supply chains insurances, licences and professional memberships?*
- *Has the Organisation identified and checked the minimum levels of insurance applicable and required to be held by its supply chain.*
- *How does the Organisation assure itself that the supply chain has a suitable defects/ non-conformance processes to meet requirements?*
- *Does the Organisation undertake audits of their supply chain and, if not, has the Organisation recorded the rationale for not auditing all/part of the supply chain?*
- *Does the Organisation have a process for the recording and monitoring of any corrective actions raised at supply chain audits?*
- *Does the Organisation undertake post contract reviews of supply chain performance and how are the results of these reviews recorded, analysed and communicated?*

7. Emergency Preparedness and Site Security

7.1 (EP.1.2) How does the Organisation plan to minimise the impact of an accident/ incident/ unplanned event? L

Guidance:

- *Has the Organisation developed:*
 - a) **An accident/ incident response and reporting process**
Auditor Note: Establishment of a safe situation, a command and control structure, Communications person appointed to deal with media (where applicable), a communication structure including liaison with Client/Principal Contractor, Reporting to the HSE process, Liaison with enforcement authorities, Process for preservation of evidence
 - b) **An accident/ incident investigation process**
Auditor Note: This should include: competent people are undertaking the investigation; all operatives are aware of the investigative process; a mechanism for feeding into the Clients formal enquiry process; that arrangements are in place to assist and provide records to enforcement agencies (Police, Environment Agency, HSE)
 - c) **Business continuity plan (Ref BS 25999)**
Auditor Note: This should include loss of personnel, IT, sites, data loss, phased recovery plan, communication plan, command structure
- Are site (permanent or temporary) security arrangements risk assessed?
- Does the organisation have emergency evacuation plans in place for all permanent and temporary (if applicable) sites?
- The Organisation has communicated the accident reporting process to its workforce and, where applicable, contracted personnel.
- That the Organisation has a requirement for testing the emergency processes
- If working under a Principal Contractor's emergency arrangements, has a copy been received, reviewed and communicated to personnel.
- Is training provided to personnel to minimise the impact of an accident/ incident?
- Are accident/ incident/ business continuity plans tested and performance reviewed either under test or real conditions?
- How does the Organisation ensure that its permanent and temporary (if applicable) sites are secure?
- Does the Organisation have to work to specific legal requirements in the event of a site evacuation?
- If the site is evacuated does it have any impact on third parties if so how is this managed?
- Has there been a review of other emergency situations (e.g. terrorism etc.)

Evidence required

- a) Evidence of Accident statistics being monitored
- b) Evidence of accident investigation and where applicable statutory reporting
- c) Business Continuity Plan

8. Sustainability

8.1 (Sus.8.1) How does the Organisation positively influence the best practice relating to sustainability?

Guidance:

Can the Organisation demonstrate that it is challenging existing practice to improve some or all of the following areas:

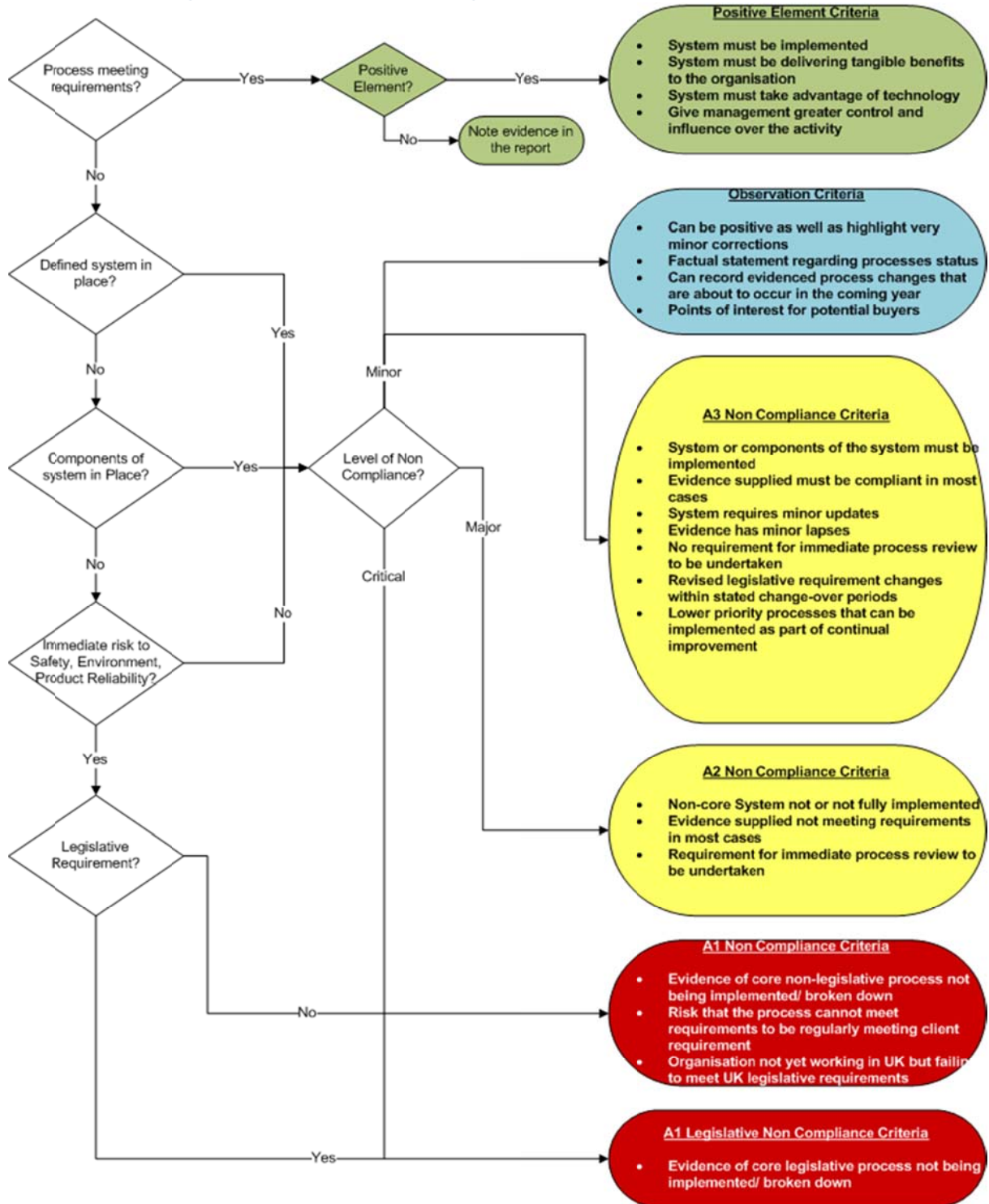
- *How does the Organisation promote the protection of existing habitat and species? (If applicable)*

1. *Identification of species or habitats that may be affected by the works*
2. *Review of activities to minimise of the use of space required for the works*
3. *Use of technology to reduce noise/ light/ dust levels on surrounding areas*
4. *Use of existing brownfield sites for the housing of spoil/ topsoil*
- *How does the Organisation positively influence the reduction in the use of Carbon and energy?*
 1. *Are KPI's to measure mileage established?*
 2. *Are KPI's to measure energy usage established?*
 3. *Regular review/ updating of vehicles/ plant to reduce CO₂ emissions and energy usage*
 4. *Decision on best type of fuel usage to minimise emissions*
 5. *Review of delivery methods to minimise transportation costs*
 6. *Review of labour supply to reduce travelling requirements*
- *How does the Organisation positively influence the reduction in the use of materials and resources?*
 1. *Does the Organisation provide solutions to the Principal Contractor that reduce materials or resources instead of existing establish methods of work*
 2. *How does the Organisation remain up to date with the latest developments/ technologies available*
 3. *Does the Organisation challenge suppliers to reduce the volumes of packaging or increase the level of recyclable materials*
- *How does the Organisation positively influence the reduction in the use of water?*
 1. *Is the usage of water measured?*
 2. *Are cleaning/ wash-down facilities reviewed to minimise the usage of water?*
 3. *Is rainwater capture used to provide water rather than potable sources for cleaning?*

Evidence required

- a) Evidence that the Organisation is monitoring its impact upon the environment and seeking to reduce this impact
- b) Evidence of suggestion alternatives with sustainable alternatives (if applicable) for carbon/ energy, materials, resources and water

Appendix A. Categorisation of Findings



Appendix B. Reference Legislation, Regulations and Best Practice Guidance

NB - The list is not exhaustive as particular legislation/ guidance may be inferred and relevant to particular organisations but not referenced here

LEGISLATION (AMENDMENTS NOT LISTED)

1. Health & Safety at Work Act etc. 1974
2. Environmental Protection Act 1990
3. Immigration, Asylum & Nationality Act 2006
4. Bribery Act 2010
5. Equality Act 2010
6. Enterprise Act 2002
7. Carbon Reduction Commitment 2009
8. Integrated Pollution Prevention and Control Directive (IPPC) 2008
9. Corporate Manslaughter and Corporate Homicide Act 2007
10. Employment Relations Act 1999
11. Pollution Prevention Control Act 1999
12. Modern Slavery Act 2015

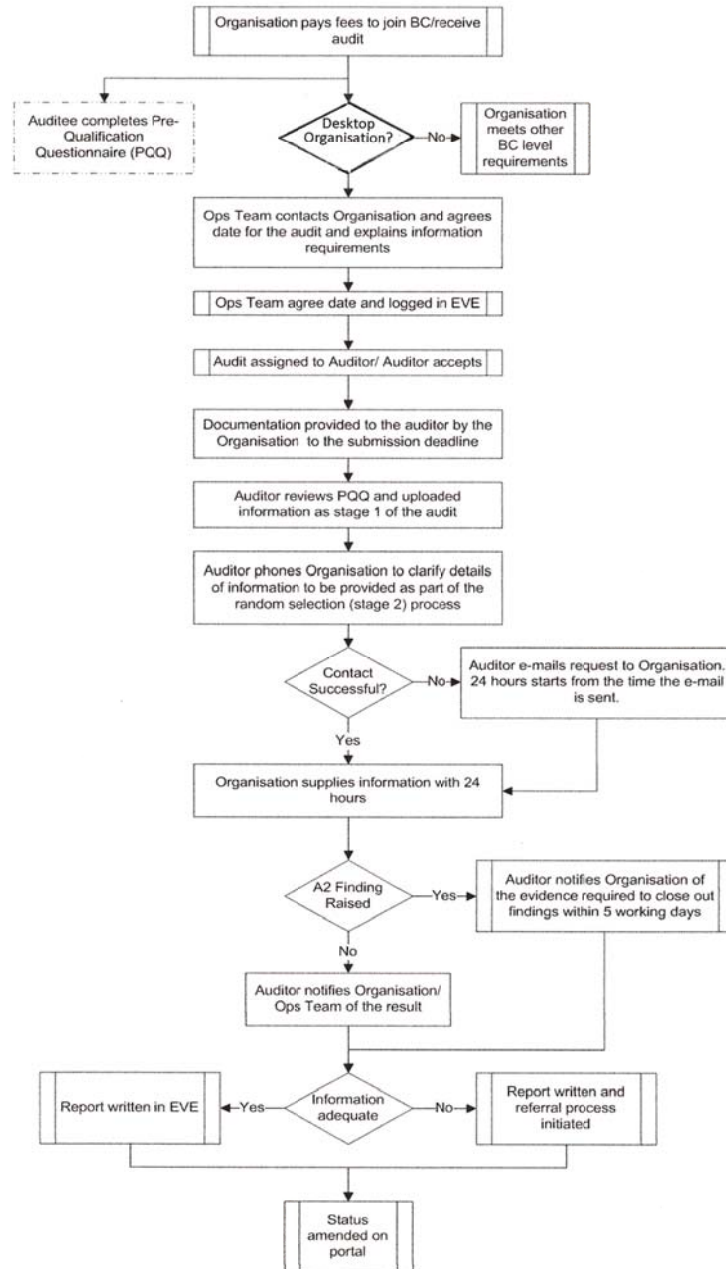
REGULATIONS (AMENDMENTS NOT LISTED) (ENGLISH/UK REGULATION DATES)

1. Construction (Design and Management) Regulations 2015
2. Protective Equipment at Work Regulations 1992
3. Working Time Regulations 1998
4. First Aid at Work Regulations 1981
5. Reporting of Injuries, Diseases, Dangerous Occurrences Regulations 1995 (2013)
6. Control of Vibration at Work Regulations 2005
7. Control of Substances Hazardous to Health 2002
8. Environmental (Duty of Care) Regulations 1991
9. The List of Wastes Regulations 2005
10. Provision and Use of Work Equipment Regulation 1998
11. Lifting and Other Lifting Equipment Regulations 1998
12. Town and Country Planning (Environmental Impact Assessment) Regulations 1999
13. Environmental Noise Regulations 2010
14. Noise at Work Regulations 2005
15. Hazardous Waste Regulations 2005
16. Management of Health Safety at Work Regulations 1999
17. Work at Height Regulations 2005
18. Confined Spaces Regulations 1997
19. Producer Responsibility Obligations (Packaging Waste) Regulations 2007
20. The Safety Representatives and Safety Committees Regulations 1977
21. National Minimum Wage Regulations 2015
22. Working Time Regulations 2005
23. Agency Workers Regulations 2011
24. Environmental Permitting Regulations 2010
25. Construction Products Regulations 2013
26. European Timber Regulations (EUTR) 2013

BEST PRACTICE GUIDANCE

1. ISO 9001 (2015) – Quality Management Requirements
2. ISO 14001 (2015) – Environmental Management Systems
3. OHSAS 18001 (2007) – Occupational Health & Safety Management Systems
4. ISO 27001 (2013) – Information Security Management Systems
5. ISO 50001 (2011) – Energy Management System
6. ISO 22301 (2014) – Business Continuity Management
7. BS 11000 - Collaborative Business Relationships
8. Forest Stewardship Council (FSC) – Sustainable Timber Chain of Custody
9. FSC-STD-40-004
10. The Programme for the Endorsement of Forest Certification (PEFC) – Chain of Custody of Forest Based Products - Requirements (Annex 4)
11. Strategic Forum for Construction's Health & Safety Code
12. Constructing Excellence– Constructing Excellence Requirements (Chapters 1-6)
13. BS EN 365:2004 - Fall Arrest & Fall Prevention Equipment
14. IND 367 - Fall arrest equipment made from webbing or rope
15. HSG 65 - Guide to measuring health and safety performance
16. BS 8555 - Environmental Management – Work Book
17. Considerate Contractors Requirements
18. BRE Environmental Assessment Method - BREEAM
19. Constructing Excellence Advice
20. BES 6001 – Responsible Sourcing of Construction
21. WRAP – Procurement Requirements for reducing waste and using resources efficiently – www.WRAP.org.uk/procurement
22. Carbon Efficiency Plan guidance – www.WRAP.org.uk/carbonefficientprocurement
23. Water Efficiency Plan guidance - www.WRAP.org.uk/waterefficientprocurement
24. Crossrail ethical trading requirements
25. Ethical Trading Initiative
26. The GLA Group - Responsible Procurement Policy
27. BS5975:2008 - Code of practice for temporary works procedures and the permissible stress design of false work
28. SIM 02/2010/04 - The management of temporary works in the construction industry

Appendix C. 'Desktop' Audit Process Flowchart



Please be aware that in order to qualify against the BuildingConfidence 'Desktop' audit process the following steps must be completed:

The submission must be completed and shall include the relevant statements and supporting evidence in either paper file, CD, flash drive or email format. We strongly request that electronic copies of the documentation are sent – this saves money on postage and is in line with Achilles Environmental Policy.

We require that you reference the evidence you have provided against the protocol question so the auditors can readily identify compliance against the requirements.

You can supply your response by either of the following methods;

- e-mail to BuildingConfidence_Desktopaudit@achilles.com Please ensure your submission is broken down to 10mb email to ensure we receive your documentation
- Post to Achilles Information LTD, 30 Park Gate, Milton Park, Abingdon, OX14 4SH (documents must be received by the deadline, so please leave enough time to ensure this occurs)

The completed questionnaire and evidence must be returned within 30 working days upon receipt of the confirmation email. Upon receipt of the evidence an auditor will complete the document review and telephone call within 15 working days.

The Auditor will review the submission and raise provisional findings

Contact you via telephone as part of the audit process to ensure the accuracy of the findings provisionally raised and request further information as detailed within the protocol.

Should the auditor be unable to make contact via telephone, they will e-mail the provisional findings and any further information requirements to the contact listed on the BuildingConfidence portal.

This information will be reviewed and the findings confirmed and your provisional outcome, subject to Quality Checking, will be confirmed by the auditor. The full report will then be published and accessible via the BuildingConfidence Portal. This process will take 15 working days.

The five-day grace period for A2 findings starts from the date of the telephone interview.

Important points to note:

- Please note there is a check list in the appendices of the protocol to assist you with the collation of the submission. The check list is a minimum requirement to meet the standard.
- Please be aware that if information is not received by the 30 day deadline this will result in a referred status.
- If there is no response to the telephone interview or from the email request, your audit report will be published with the findings as they stand. This may not be a true reflection of your company's capabilities.

Appendix D. Checklist of the Evidence Requirements

Evidence to be submitted prior to the telephone interview

Question No.	Document	Included
MC1	Current/finished in the last 3 months Job List	
MC1	Current Personnel list	
MC1	Current Subcontractor list (if applicable)	
MC2	Health & Safety Policy	
MC2	Environmental Policy	
MC2.	Quality Policy	
MC2.	Fraud & Malpractice Policy	
MC2.	Ethical Code of Conduct (Corporate Social Responsibility)	
MC2.	Worksafe Policy	
MC.2	Timber Procurement Policy (if applicable)	
MC2.	Ethical Code of Conduct (Corporate Social Responsibility) supporting statements relating to; review, authorisation, briefing and display	
MC2.	Supporting statements relating to; review, authorisation, briefing and display (Can be combined with other policy control statements)	
MC4	Organisation Charts	
MC4	Deputy arrangements	
MC4	Statement identifying those responsible if not clear from organisation charts	
MC4	Statement relating to on-site responsibilities (if applicable)	

MC5	Index of written procedures	
MC5	Evidence of communication of changes to requirements	
MC5	Evidence of external accreditation/ awards in the last 12 months	

MC7	Document Control Procedure (if available)	
MC7	Statements as to how documentation is identifiable, superseded versions are removed from circulation and records are maintained in archive.	
MC7	Document Control Procedure (if available) Statement relating to how company systems are developed and controlled	

MC8	Annual Objectives / Targets - Internal audit programme and reports – objectives Key Performance Indicators	
MC8	Evidence of senior management reviewing performance against objectives	
MC8	Internal audit programme and reports –	
MC8	Any certification from external auditing regimes	
MC8	Evidence accident rates being monitored	

LC.1	Recorded review of legislation changes	
LC.1	Evidence of external consultant providing updates	

LC 5	Risk assessors identified	
LC5	Risk assessments	
LC5	Evidence of review of risk assessment	

LC8.3	Projects notifiable under Construction (Design and Management) Regulations – evidence of attendance	
LC8.3	Evidence of establishing safe systems of work acceptable to the Principal Contractor	
LC11	Register of harmful substances	
LC11	COSHH Risk Assessment	
LC10	PPE issue	
LC10	PPE arrangements for inspecting / testing	
LC13	Recruitment requirements to prove eligibility to work in UK	
LC14	Health surveillance – evidence of OH provider	
LC14	Evidence that arrangements commensurate with organisation's activities	
LC14	Proof of records being maintained	
LC16	First aiders list	
LC16	Evidence of training	
TC1.2	Training matrix	
TC2.2	Recruitment process	

QM1.3	Test & inspection documentation	
QM2.2	Arrangements for segregating/removing non-conforming product	
QM5.2	Work equipment fit for purpose – Plant & Machinery register	
QM 4.3	Permanent and Temporary Design Process	
QM 4.3	Sign-off for drawings ‘for construction’	
QM 4.3	Permits to load/ strike temporary works	
QM6.2	IT security /back up information	
TC4.2	External H&S/Env/Quality consultant certification	
SE1	Evidence of community work / engagement	
SE1	Evidence of working methods that minimize impact	
SE3	Statement regarding Trade Union membership	
SE3	Statement of workers being paid minimum wage and what the current minimum wage is	
SE3	Evidence of issue of contracts, offers of pension	
SE4	Fraud, bribery and anti-competitive behaviour	
SE4	Modern Slavery Act Statement	
SCM1	Supply chain management – organisation selection process	
SCM1	Organisations Supply Chain Controls	
SCM1	Evidence of Supply Chain performance review	
SCM1	Supply chain performance monitoring	
SCM1	Statement relating to how the competence of subcontractors is identified and verified.	

EP1	Accident investigation process	
EP1	Evidence of accidents being investigated	
EP1	Evidence business continuity plan	

SUS8	Influence the minimisation of impact on environment	
SUS8	How does Co positively influence reduction in use of carbon energy	
SUS8	How does Co positively influence reduction in use of materials and resources	
SUS8	How does Co positively influence reduction in use of water	

Issue Record and Copyright

This protocol will be subject to change and updating as a result in the following areas:

- Changes in applicable statutory instruments.
- Recommendations from enforcement authorities or industry bodies focusing on either prevention of accidents or new best practice.
- Changes in the BuildingConfidence members' contractual conditions.

The document will be made available on the BuildingConfidence portal. An appropriate notification will be placed on the portal advising of any changes made to the document.

Version	Date	Author	Comments
1.0	01/04/11	S. Long	Protocol issued
2.1	N/A	N/A	Not used
2.2	14/03/12	W. Nelson	Protocol reissued in line with 2.2 revision
2.2a	18/9/12	W. Nelson	Appendices amended to revised process, Questions unchanged.
2.3	16/10/13	S. Long	Changes include temporary works, employment contracts and other feedback from 2.2
2.3 Issue 1	06/01/14	R Alan	Minor formatting changes only. No change to technical content.
2.4	01/04/15	W. Nelson	Updated in line with CDM 2015
2.5	30/06/16	M. Ferris	Achilles re-branding and audit rename following transition to AP2, new question in relation to Modern Slavery Act 2015.

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