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One Day Audit Protocol

Labour & Recruitment

Version: 2.5

Contents

| | |
|--|-----------|
| Contents | 2 |
| Preface | 3 |
| Compliance with Legislation & CDM Regulations | 3 |
| Auditor application of the guidance notes | 3 |
| PAS 91 Compliance and alignment | 3 |
| | |
| Assessment Requirements | 4 |
| 1. Management Control | 4 |
| 2. Legislation and Other Requirements Compliance | 7 |
| 3. Quality Management Controls | 9 |
| 4. Training and Competence | 10 |
| 5. Social & Ethical Behaviour | 12 |
| 6. Sustainability | 14 |
| 7. Supply Chain Management | 15 |
| 8. Emergency Preparedness and Site Security | 16 |
| | |
| Appendix A. Categorisation of Findings | 17 |
| Appendix B. Reference Legislation, Regulations and Best Practice Guidance ... | 18 |
| Issue Record and Copyright | 21 |

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 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.

Assessment Requirements

1. Management Control

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

Please note that this is a scoping question to assist the audit to collate information for Introductions and assess accuracy against the Pre-Qualifying Questionnaire

Guidance:

- *Company House / Charity Registration numbers to be included within the scope of the audit.*
- *The type of activities to be audited.*
- *What do you consider to be your standard and specialist areas of expertise*
- *What is the geographical scope of the Organisation*
- *The geographical locations to be included within the scope*
- *What are size, number of personnel and types of facility to be included within the scope*
- *Does the same management system operate across all its offices within the scope of the audit?*
- *Does the Organisation work on construction works sites*
- *What activities under the Construction (Design and Management) Regulations (CDM) do they undertake? (if applicable)*
- *Does the Organisation:*
 1. *Assume the responsibilities of Designer under the CDM Regulations*
 2. *Undertake Permanent Design responsibility but utilises third parties for design delivery*
 3. *Provide small scale design solutions via CDP packages*
 4. *Provide temporary works design*
 5. *Work to drawings provided by Principal Contractors/Designers*
- *Have there been any changes since the PQQ was submitted?*
- *Are the insurance levels unaltered and up to date?*
- *Are there any limitations identified within the insurance?*
- *Is the Organisation working or seeking to work for the nuclear/ defence industries?*

1.2 (MC.2.1) 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 and peripatetic 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 Health & Safety 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?*

1.3 (MC.4.2) 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 anti-bribery and corruption law and policies*
 7. *Training & competence*
 8. *Corporate social responsibility*
 9. *Business continuity and emergency planning (incl. Fire)*
 10. *Facilities management*
 11. *Workplace security*

1.4 (MC.5.2) 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?*

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

Guidance:

- *The organisation has a Document Control Procedure that identifies the key documents requiring control, How documents are reviewed and changes identified.*
 1. *How documents are issued and reach their point of use; in particular multi-site operations.*
 2. *There is a process for identifying documentation with expiry dates*
 3. *The process for cancelled and superseded documentation.*

4. Archiving processes
5. 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

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?

2. Legislation and Other Requirements Compliance

2.1 (LC.1.1) 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
 5. Competition 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 or an environmental offence?
- Have any statutory bodies made any written allegations or complaints within the last five years that your organisation may have infringed Competition Law and which have led to an internal enquiry or investigation?
- 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?
- Has the Organisation entered into any kind of civil settlement within the last five years with regulatory authorities in relation to acts of acts of bribery and corruption
- Does the Organisation have the processes in place to comply with Waste Legislation (SWMP, Duty of Care, Waste Transfer Licenses and consignment notes, European Waste Coding)
- Assess compliance with IPPC processes (if applicable).

2.2 (LC.5.1) How does the Organisation identify and control its risks / impacts and opportunities? L

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.)

2.3 (LC.14.1) How does the Organisation meet occupational health surveillance requirements? L

Guidance:

- Are long-term health issues risk assessed?
- 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?
- 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)

2.4 (LC.16.1) 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

2.5 (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 U
- That the Organisation has a mechanism for periodic review of right to work of all workers including agency temporary and seasonal employees (if applicable).

3. Quality Management Controls

3.1 (QM.1.1) How does the Organisation identify and ensure that its product / service will meet?

- 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?*
- *Are products supplied in line with recognised standards (national/ international)?*
- *How is compliance communicated to the client?*

3.2 (QM.2.1) 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?*

3.3 (QM.14.1) How does the Organisation control and produce documentation to prove compliance to requirements?

Guidance:

- *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?*
- *How does the Organisation ensure only competent personnel undertake the verification process?*
- *Are any of these processes undertaken by the third party?*
- *How does the Organisation record the verification process?*
- *How are the results of the checking process communicated to the client or other affected parties?*

4. Training and Competence

4.1 (TC.2.1) How does the Organisation control its recruitment process? L

Guidance:

- *How does the Organisation identify and recruit competent personnel?*
- *What are the Organisation's arrangements for ensuring that existing competency documents or licences are checked/ validated?*
- *How are security/ police/ **Disclosure & Barring Services (DBS)** checking requirements are fulfilled?*
- *A process is in place to ensure the verification of accreditation and certification through the appropriate bodies. (CSCS, PASMA, CITB, 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?*

4.2 (TC.1.1) 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?*

4.3 (TC.6.1) How does the Organisation demonstrate that training and development is properly undertaken?

Guidance:

Whether the assessor is internal or external.

- *If reliant on an external party, how does this function work?*
- *If training is in-house, how are the trainers deemed competent?*
- *What methods of assessment are undertaken to verify competence?*
- *That competent assessors have as a minimum:*
 - (i) *Sufficient expertise in the work being performed to enable the auditor to establish whether or not the candidate carrying it out has met the relevant competency standard;*
 - (ii) *Evidence of the competence as an assessor of that work, applying the assessment systems required by the candidate's employer, and/or;*
 - (iii) *Approval by national accredited bodies*

Use of Internal Assessors (if applicable)

- *A list/register of internal qualified assessors. (if applicable)*
- *A list of persons who are authorised to verify auditors. (if applicable)*
 - (iv) *Verification checks undertaken by the Organisation on auditors/trainers & applicable courses*

4.4 (TC.4.1) How does the Organisation ensure that they have adequate HSEQ and employment support? L

Guidance:

- *Technical support personnel have experience in the relevant sector*
- *Technical support personnel are suitably qualified?*
- *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 & Assessment - IEMA..*
 - d) *Human Resources - Employment - The Chartered Institute of Personnel and Development (CIPD)*

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?*

5.2 (SE.2.1) How does the Organisation demonstrate equality and diversity within the workplace? L

Guidance:

- *How does the Organisation's processes and controls ensure equality within the workplace.*
- *Does the Organisation have mechanisms in place to demonstrate compliance with The Equality Act 2010? (formerly the: The Sex Discrimination Act 1975, Equal Pay Act 1970, Disability Discrimination Act 1995, Employment Equality (Religion or Belief) Regulations 2003, Employment Equality (Sexual Orientation) Regulations 2003, Employment Equality Act (Age) 2006, Race Relations Act 1976, Race Relations (Amendment) Act 2000 or regional equivalents)*
- *The Organisation is regularly reviewing the effectiveness of the processes*
- *Does the Organisation require its supply chain to demonstrate evidence of their equality policies and practices?*
- *Does the Organisation operate an apprenticeship/ graduate programme?*

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

Guidance:

- *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.*

5.4 (SE.6.1) How does the Organisation organise its employment contracts? L

Guidance:

- What type(s) of arrangements does the organisation use to define its relationship with people who undertake work for it?
 - Full employment contracts
 - Time-limited contracts
 - Zero-hour contracts
 - Working with self-employed individuals
 - Subcontracting out activities

5.5 (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 bribery, anti-competitive, 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?
- What controls do the Organisation have for the receipt of gifts/ hospitality
- 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, fraud and malpractice
- 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 fraud, bribery and anti-competitive behaviour?
- What internal checking process is in place to ensure that all tenders/ work packages are tendered competitively

5.6 (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. Sustainability

6.1 (Sus.8.1) How does the Organisation support 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?*

7. Supply Chain Management

7.1 (SCM.1.1) How does the Organisation ensure effective supply chain management? L CDM

Guidance:

Does the Organisation maintain an approved supply chain register?

- *Does the Organisation have a documented process describing the requirements for the supply chain to be entered on to the register?*
 1. *minimum levels of insurance applicable and required to be held by its supply chain*
 2. *ability to demonstrate compliance to relevant legislation and standards*
 3. *Demonstrate supply chain meet competence requirements*
 4. *the relevant licences held*
 5. *Membership of trade associations*
 6. *Supply chain auditing (either internal or by a third party)*
- *How does the Organisation keep its register up to date?*
- *What mechanisms does the Organisation have in place prior to placing a contract for works with an approved supply chain member.*
- *What is the process for ensuring information is provided to potential suppliers and understood by them to assist them with their bids (programmes/ specifications/ meetings etc.)*
- *Does the Organisation have a process for the recording and monitoring of any corrective actions raised at supply chain audits?*

7.2 (SCM.4.1) How does the Organisation assess the performance of its supply chain? L CDM

Guidance:

- *How the Organisation reviews its supply chain Health & Safety, Quality and Environmental controls.*
- *Does the Organisation undertake post contract reviews of supply chain performance and how are the results of these reviews communicated.*
- *How is past performance analysed to ensure that the supply chain will deliver the expected services to programme, to budget and to regulatory requirements*
- *Checks on Prosecutions/ Notices from statutory authorities*
- *Can the Organisation demonstrate whether the Organisation gives preference to suppliers with enhanced HSEQ performance? (provide examples)*
- *Does the Organisation measure satisfaction, price and service consistency?*
- *Does the Organisation undertake post contract reviews of supply chain partner performance*
- *Checks on accident and incident frequency rates as compared to the construction industry rates (if applicable).*
- *Auditor to assess the RIDDOR reporting mechanism of the supply chain to see if it is effective (if applicable).*

8. Emergency Preparedness and Site Security

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

Guidance:

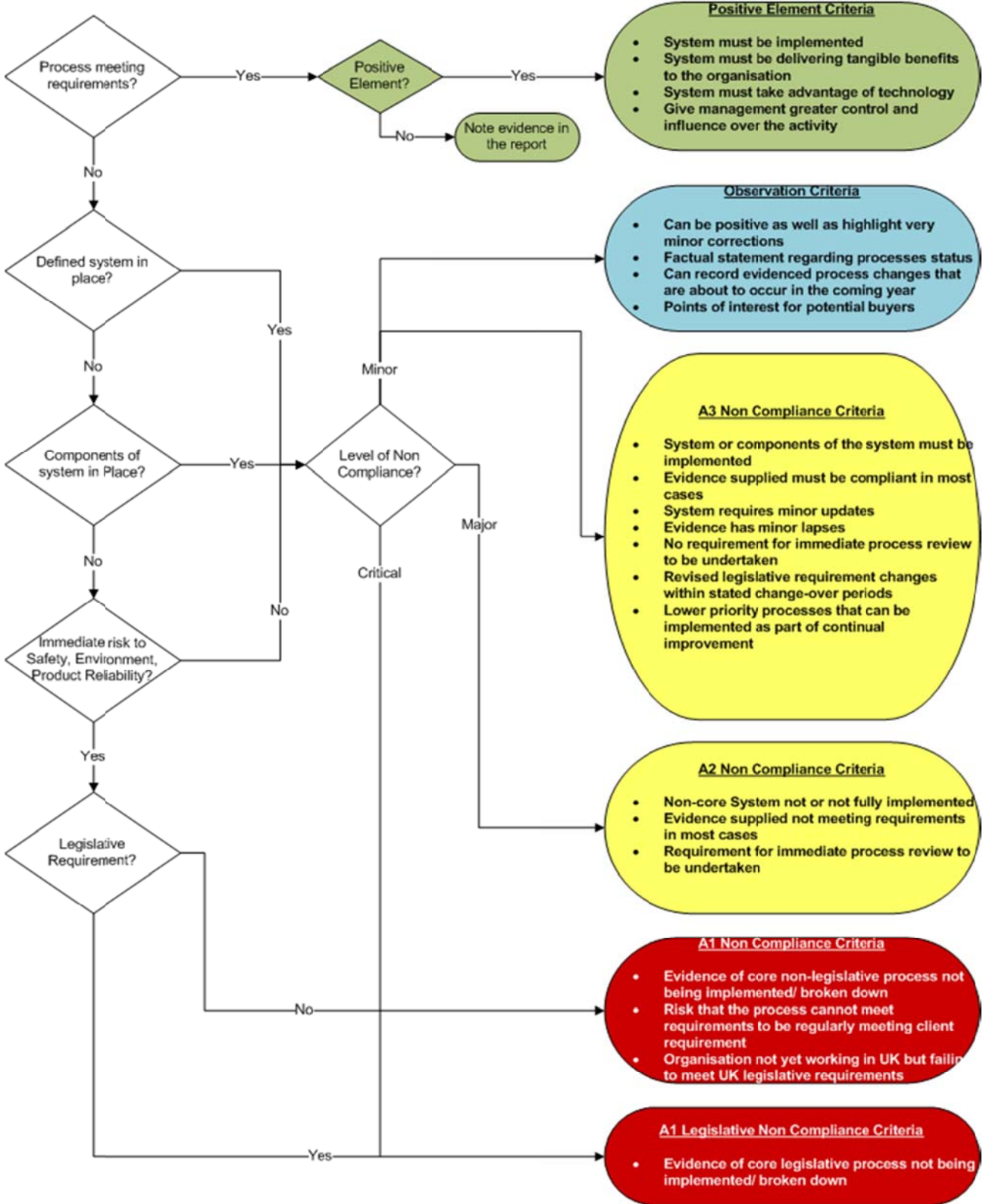
- Has the Organisation developed:
 - a) **An accident/ incident response and reporting process**

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 ISO 22301)**

Auditor Note: This should include loss of personnel, IT, sites, data loss, phased recovery plan, communication plan, command structure
- 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.)

Appendix A. Categorisation of Findings



Appendix B. Reference Legislation, Regulations and Best Practice Guidance

NB - The lists are 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

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 |
|---------|----------|-----------|---|
| 1.1 | 15/10/08 | W. Nelson | First version issued |
| 2.0 | 31/03/11 | S. Long | Protocol amended to align with other BC protocols and a rewrite of a number of sections. |
| 2.1 | N/A | N/A | Not used |
| 2.2 | 14/03/12 | W. Nelson | Protocol aligned and amended reflecting feedback from 2.0 |
| 2.3 | 15/10/13 | S. Long | Changes include temporary works, employment contracts and other feedback from 2.2 |
| 2.4 | 01/04/15 | W. Nelson | Revised 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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