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RISQS Audit Report

| | |
|----------------------|--|
| Audit ID | 66455 |
| Supplier | King and Moffatt Electrical Ltd t/a King and Moffatt Group |
| Supplier ID | 176909 |
| Lead Auditor | Tim Lonergan |
| Audit Date(s) | 29 th September – 1 st October 2015 |

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Issue Record

| Version | Date | Author | Comments |
|---------|------------|-----------|----------|
| 3.0 | 01/05/2015 | W. Nelson | |

Executive Summary

Audit Outcome

| | |
|--------------------------------------|------|
| Industry Minimum Requirements Module | Pass |
| Sentinel Module | Pass |

Audit Details

This IMR and Sentinel audit of was undertaken on 29/09 to 01/10/2015 at the organisations premises in Carrick on Shannon. The following individuals represented the company:

- Ciaran King, Business Development
- Shankar Mistry, Commercial Manager
- Padraic King, Design Engineer
- Stephen Kiely, Marketing Graduate

The Auditor was:

- Tim Lonergan

King and Moffatt Group is a Construction Company engaged in the provision of Electrical & Mechanical Services. These services are provided directly to the clients via an experienced and competent work force. It provides electrical & mechanical services across all sectors of the construction industry including, Food, Beverage, Industrial, Mining, Pharmaceutical, Medical, Hotel / Leisure, Transport, Public Buildings, Commercial and Power / Energy. The managing directors of the company and are directly involved with the management of projects. Taking a personal interest in all aspects of the projects from the design stage right through to hand over to ensure all projects are complete.

Audit Scope

| | |
|----------------------------|---|
| Initial audit | Y |
| Periodic audit | N |
| Re-audit following failure | N |

Executive Summary

An organisation chart was in place that included key posts for: Pre-contract; Commercial; Design; Operations Management; EHS; Shared Services; Estimating Manager; Commercial Manager; Senior Design Engineer; Operations Managers; EHS Manager. CV documents were in place for all post holders. Job Description documents were in place for all post holders. Deputy arrangements were confirmed recorded on the organisation chart being generally the subordinate position to the key post holder.

Competent health, safety and environmental advice had been provided by the HSE Manager who was directly employed by the organisation. The individual had relevant knowledge and experience in health and safety and environmental health issues. Evidence was provided to confirm health and safety competence.

The company had a Table of Contents (Index to the Management System) which covered the Industry Minimum Requirements and Sentinel Modules. Documented management system procedures were in place consisting of procedures utilised to manage the company's business operations. Additionally a suite of associated policies and forms were in place. The management system was externally certificated against ISO 9001:2008. The scope covered: 'The installation of electrical and mechanical services, in the commercial, industrial, state and private sectors, design and build if required. Installation to the client's specifications, installation to the client's instructions'. The accrediting body was IAF approved.

Policies for Health and Safety, Quality, Environment, Drugs & Alcohol and Fatigue requirements were available and displayed within a public area of the premises in Carrick on Shannon. The policies stated the organisation's intent to comply with all relevant Safety, Quality and Environmental legislation. The policies covered all areas of the business, met UK legislative requirements, were dated and current and endorsed by top level management.

Appropriate arrangements for health and safety risk assessment were in place. There arrangements were that each project had its own RAMS Document that contained site specific risk assessments for the specific site activities. The RAMS Template document contained the risk assessment protocol which required the use of a 5 X 5 matrix, a calculation of likelihood and severity and colour coded high, medium and low status.

The organisation had produced an Environmental Aspects and Impacts register: EMS Targets and Scores. And had examples of environmental risk assessment available. Environmental risk was communicated to staff via client work package plans and task briefings.

Appropriate close call, near miss, accident reporting and investigation arrangements were recorded in the organisation's documented procedure: Procedure for Reporting Accidents and Incidents, 12.3.42. This covered issues such as RIDDOR and reporting to the client on Network Rail Managed Infrastructure and included the definitions of near miss, close call etc. The company confirmed there had been no environmental incidents, reportable accidents, incidents, near misses or close calls on Network Rail Managed.

Appropriate documented alcohol and drug arrangements were contained within the company procedure: Occupational Health Standard, 6.5.30. A 'For Cause' contract was in place with a RISQS approved supplier. There was no evidence of random unannounced sampling having been undertaken in the last 12 months as the organisation was not yet sponsoring any individuals for Sentinel Competencies. There had been no requirement for 'For Cause' testing, no positive tests and no refusals to take a test in the previous 12 months.

Appropriate arrangements for the management of employee fatigue were confirmed recorded in documented procedure: Occupational Health Standard, 6.5.30. This was compliant with the requirements of Network Rail company standard NR/L2/ERG/003. Evidence was not available of the implementation of the requirements as the organisation had not undertaken any rail related work in the last 12 month period. The company representative confirmed that there had not been any authorised exceedances in the last 12 months.

Audit Findings

Major Nonconformities

| | |
|------|------|
| None | None |
|------|------|

Minor Nonconformities

| | |
|-----|--|
| 1.3 | Listings of identified documents were in place but these needed to be reviewed in light of product code changes identified at the time of audit. |
| 5.1 | The organisation did not did not have a listing of approved, on-boarded suppliers for rail related activities such as medical, A&D, PPE etc. |

Observations

| | |
|------|------|
| None | None |
|------|------|

Questionnaire Discrepancies

| | |
|-----|--|
| 1.5 | The organisation withdrew from multiple product codes within the 13 range relating to Operational Telecoms as they were considered to be outside of its scope of operations. |
|-----|--|

Positive Comments

| | |
|------|------|
| None | None |
|------|------|

Assessment Requirements

1. Management Control

1.1 Management Structure

An organisation chart was in place, Management and Organisational Chart, that included key posts for:

- Pre-contract
- Commercial
- Design
- Operations Management
- EHS
- Shared Services
- Estimating Manager
- Commercial Manager
- Senior Design Engineer
- Operations Managers
- EHS Manager
- Shared Services

CV documents were in place for all post holders. Examples were seen for:

- Project Manager
- Managing Director
- Director
- Contracts Manager
- Operations Manager

Job Description documents were in place for all post holders. Examples were seen for:

- Estimator
- Quantity Surveyor
- Contracts Manager
- EHSQ Manager
- Project Engineer
- Foreman

Deputy arrangements were confirmed recorded on the organisation chart being explained by the Business Development Manager. This was generally the subordinate position to the key post holder.

Personnel responsible for the management of Sentinel sponsored personnel and the management of sponsorship within the Sentinel scheme were defined within documented organisation chart and responsibilities were captured within the job descriptions. The responsible person was the: EHS Manager.

Major Nonconformities

None

Minor Nonconformities

None

Observations

None

Questionnaire Discrepancies

None

Positive Elements

None

1.2 Health & Safety Competent Support

Competent health, safety and environmental advice had been provided by the HSE Manager who was directly employed by the organisation.

The individual had relevant knowledge and experience in health and safety and environmental health issues.

Evidence was provided to confirm health and safety competence being:

- Bachelor of Science in Environmental Health, dated 26/06/2013
- IOSH Graduate Membership, dated 11/10/2015, expiring 10/10/2016

Major Nonconformities

None

Minor Nonconformities

None

Observations

None

Questionnaire Discrepancies

None

Positive Elements

None

1.3 Management of Legal and Other Requirements

Appropriate arrangements for the management of legal and other requirements were in place.

Responsibility for the review and dissemination of changes to standards was confirmed as being that of the and was undertaken by the HSE Manager who generated listings of applicable standards.

Access to railway group and company standards was confirmed.

Access to Legislation in Health & Safety and Environment was confirmed

The company obtained the catalogue of Network Rail standards and purchased those necessary for its business needs.

Listings of identified documents were in place but these needed to be reviewed in light of product code changes identified at the time of audit.

Major Nonconformities

None

Minor Nonconformities

Listings of identified documents were in place but these needed to be reviewed in light of product code changes identified at the time of audit.

Observations

None

Questionnaire Discrepancies

None

Positive Elements

None

1.4 Compliance with CDM Regulations 2015

The Organisation acted as a Contractor and demonstrated mechanisms for communication and co-operation with others to ensure the safety of all personnel. These required that suitable information is distributed throughout the organisation in a timely manner to all individuals affected and to ensure that effective communication is also undertaken with clients.

The company also confirmed that it had the capability to meet the expectations of the Principal Contractor's requirements for the related work package via its organisation structure which included the following key posts:

- Pre-contract
- Commercial
- Design
- Operations Management
- EHS
- Shared Services
- Estimating Manager
- Commercial Manager
- Senior Design Engineer
- Operations Managers
- EHS Manager
- Shared Services

The company implemented site rules via the production of RAMS Documents submitted to the client for approval. This ensured the flow of information between the client, designers, principal contractors and contractors. However no evidence was available as the company had not yet undertaken any project work on Network Rail Managed Infrastructure.

Major Nonconformities

None

Minor Nonconformities

None

Observations

None

Questionnaire Discrepancies

None

Positive Elements

None

1.5 Management Systems

The company had a Table of Contents (Index to the Management System) which indicated:

- Title
- Reference
- Revision Status
- Date
- Last Revision Date

Which covered the Industry Minimum Requirements and Sentinel Modules.

Documented management system procedures were in place consisting of procedures utilised to manage the company's business operations. Additionally a suite of associated policies and forms were in place.

The management system was externally certificated against ISO 9001:2008.

- Certificate number: 2013/1740/A/2
- Date of certification: 05/06/2013
- Valid until: 04/06/2016

The scope covered:

- 'The installation of electrical and mechanical services, in the commercial, industrial, state and private sectors, design and build if required. Installation to the client's specifications, installation to the client's instructions'.

The accrediting body was IAF approved.

The most recent 3rd party audit had been undertaken on 05/04/2015. This was a Stage 1 Certification Audit.

One Non-conformity and three Opportunities for Improvement were raised.

Additionally, the organisation was a member of the following organisations:

- NICEIC, enrolment number 043321000, accredited 20/01/2010, Approved Contractor and Domestic Installer
- RECI, registration number A0502, dated 25/11/2014
- ECA letter of confirmation from the ECA, CIF membership number 120234, dated 27/05/2015
- M&ECA letter of confirmation from the ECA, CIF membership number 120234, dated 27/05/2015

Major Nonconformities

None

Minor Nonconformities

None

Observations

None

Questionnaire Discrepancies

The organisation withdrew from multiple product codes within the 13 range relating to Operational Telecoms as they were considered to be outside of its scope of operations.

Positive Elements

None

1.6 Policy Control

Policies for Health and Safety, Quality, Environment, Drugs & Alcohol and Fatigue requirements were available and displayed within a public area of the premises in Carrick on Shannon:

- Health and Safety Policy – Environmental, Health & Safety Policy, dated 18/05/2015, signed by the Directors
- Quality Policy – Quality Policy, dated 18/05/2015, signed by the Directors
- Environmental Policy – Environmental, Health & Safety Policy, dated 18/05/2015, signed by the Directors
- Drugs & Alcohol Policy – Drugs and Alcohol Policy, dated 29/09/2015, signed by the Directors
- Fatigue Policy – Fatigue Management, dated 29/09/2015, signed by the Directors

The policies stated the organisation's intent to comply with all relevant Safety, Quality and Environmental legislation.

The policies covered all areas of the business, met UK legislative requirements, were dated and current and endorsed by top level management.

Additionally, the policies confirmed the setting and monitoring of objectives and continual improvement.

As far as Health and Safety was concerned the policy contained a clear commitment to:

- safety, in so far as is reasonably practicable
- providing sufficient resources for health and safety

As far as Environment was concerned the Policy contained a clear commitment to:

- preventing pollution
- protecting the environment
- minimising the environmental impact, for the life cycle of plant, equipment, and other physical assets

As far as Quality was concerned the Policy statement contained:

- commitment to certification to ISO 9001:2008
- a commitment to establish and maintain the highest quality standards

Arrangements were in place for managing policy statements, including:

- Communicating them to all employees on induction, starting a contract and following policy changes
- Communicating them to their suppliers and other interested parties as necessary
- Policy review

Major Nonconformities

None

Minor Nonconformities

None

Observations

None

Questionnaire Discrepancies

None

Positive Elements

None

1.7 Document Control

Appropriate arrangements for Document Control were recorded in the documented procedure:

- Control of Documents, QP1.1

The arrangements included:

- Purpose
- Scope
- Responsibility
- Procedure
- Production of a Document Control Index
- External Document Catalogue

This was compliant with ISO9001:2008.

Document retention arrangements were confirmed included within procedure:

- Control of Records, QP2.1

The arrangements included:

- Purpose
- Scope
- Responsibility
- Procedure
- Records Log

The company maintained a Records Log, QP2.2 which indicated:

- Length of time A to D (A - 0 to 1 year, B – 1-3 years, C – 3-6 years, D – indefinite)
- Location within premises

Major Nonconformities

None

Minor Nonconformities

None

Observations

None

Questionnaire Discrepancies

None

Positive Elements

None

1.8 Monitoring

Appropriate monitoring of performance arrangements were recorded in the documented procedure:

- Internal Audits, 3.1

The arrangements included:

- Purpose
- Scope
- Responsibility
- Procedure
- Related Documents

An Annual Internal Audit Schedule (3.3) was also in place indicating audits covering all procedures once annually spread throughout the year.

A recent internal audit had been undertaken on 20/08/2015 on Commercial. One Nonconformity had been raised and closed out relating to Start-Up Meetings.

Appropriate monitoring and audit site inspection arrangements were confirmed recorded in the documented procedure:

- Internal Audits, 3.1

This required an inspection of each operational site on a two weekly basis.

Site inspections were to be recorded on:

- Safety Inspection Report, 12.3.22

Evidence was not available of site inspections as the company had not yet undertaken any rail related projects.

Major Nonconformities

None

Minor Nonconformities

None

Observations

None

Questionnaire Discrepancies

None

Positive Elements

None

1.9 Design Management and Control

Adequate controls were in place to manage the design process within the Organisation. These were documented within the procedure:

- Drawing Production and Storage Guidelines, 8.1.2

The arrangements included:

- Information received
- Work in process
- Issuing
- Drawing register

This included a documented process for submission of designs (Including revision status, change process etc.) and a formal process to show how changes are communicated to the client and where applicable sub- contractors.

The process was managed via the organisation's SharePoint system which was demonstrated by the Design Engineer at the time of audit. This contained design brief, inputs, outputs, change management etc.

The process was managed by the Electrical Engineer who held an Electrical Engineering Degree, DIT, 2005 – 2008.

However, the company did not have any examples of rail related designs as it had had not yet undertaken any work on Network Rail Managed Infrastructure.

Major Nonconformities

None

Minor Nonconformities

None

Observations

None

Questionnaire Discrepancies

None

Positive Elements

None

2. Safety Risk Management

2.1 Health and Safety Risk Controls

Appropriate arrangements for health and safety risk assessment were in place. These arrangements were that each project had its own RAMS Document that contained site specific risk assessments for the specific site activities.

The RAMS Template document (12.3.5) contained the risk assessment protocol which required the use of a 5 X 5 matrix, a calculation of likelihood and severity and colour coded high, medium and low status.

The risk assessment matrix within the RAMS Template document (12.3.5) contained the following fields:

- Reference
- Work activity and associated hazards
- Likely cause
- Persons exposed
- Consequences
- Risk evaluation
- Safeguards
- Residual risk

However, the company did not have any examples of rail related risk assessments as it had had not yet undertaken any work on Network Rail Managed Infrastructure.

Major Nonconformities

None

Minor Nonconformities

None

Observations

None

Questionnaire Discrepancies

None

Positive Elements

None

2.2 Control of Substances Hazardous to Health

Appropriate arrangements for control of substances hazardous to health were confirmed. The arrangements were that all hazardous substances were to be assessed according to work requirements.

The company maintained a COSHH Index:

- Hazardous Substances Inventory

This indicated:

As an electrical contractor, the company representative stated that the company did not use many hazardous substances. Those shown on the inventory included:

- Galvanising Spray
- WD 40
- Line Marking
- Animal by-products

Major Nonconformities

None

Minor Nonconformities

None

Observations

None

Questionnaire Discrepancies

None

Positive Elements

None

2.3 Implementation of Risk Controls

The organisation's arrangements for implementing the risk mitigation control measures, on site, identified through the Risk Assessment process were by ensuring that the risk controls identified within the organisation's processes have been communicated throughout their organisation.

Communication and co-operation with others to ensure the safety of all personnel arrangements required that suitable information is distributed throughout the organisation in a timely manner to all individuals affected and to ensure that effective communication is also undertaken with clients.

The company implemented site rules via the production of RAMS Documents submitted to the client for approval. This ensured the flow of information between the client, designers, principal contractors and contractors.

However no evidence was available as the company had not yet undertaken any project work on Network Rail Managed Infrastructure.

Major Nonconformities

None

Minor Nonconformities

None

Observations

None

Questionnaire Discrepancies

None

Positive Elements

None

2.4 Personal Protective Equipment

The organisation had arrangements for the issuing, checking and monitoring of Personal Protective Equipment (PPE) documented within its documented procedure:

- Personal Protective Equipment Standards, 12.3.27

The arrangements included issue at induction and following loss or damage; that PPE is provided free of charge to employees.

The procedure also made reference to Network Rail Specific PPE Requirements and their related EN Numbers.

The arrangements for the monitoring of the use of PPE was via worksite inspections.

However none were available for the last 12 month period as the company had not undertaken any rail related projects within this period.

The company had a process for, and records supporting, the issue and management personal protective equipment for all primary sponsored personnel and mechanisms for ensuring the suitability of personal protective equipment for all sub-sponsored personnel when working on behalf of the organisation. These arrangements were detailed within documented procedure:

- Personal Protective Equipment Standards, 12.3.27

The issue of PPE was recorded on:

- PPE, Equipment and Clothing Record, 12.3.24

However no evidence was available as the company had not yet undertaken any project work on Network Rail Managed Infrastructure.

Major Nonconformities

None

Minor Nonconformities

None

Observations

None

Questionnaire Discrepancies

None

Positive Elements

None

2.5 Refusal to Work on the Grounds of Health and Safety (Work Safe)

Appropriate managing refusals to work on the grounds of health and safety arrangements were recorded in the documented policy and procedure:

- Work Safe Policy, 12.3.53
- Refusal to Work on the Grounds of Health & Safety, 12.3.52

The procedure confirmed “refusal to work on the grounds of health and safety is free from any disciplinary action and will not affect in any way their future prospects within the company”.

The procedure included:

- Briefing
- Responding to staff
- Recording of reports
- Investigation of reports
- Non discrimination
- Process Flowchart

The company representatives confirmed that there had not been any refusal to work issues on rail projects in the last twelve month period.

The organisation confirmed its commitment to confidential reporting by production of its current CIRAS membership:

- Membership Number CICT1911
- Valid Until: 31/03/2016

Major Nonconformities

None

Minor Nonconformities

None

Observations

None

Questionnaire Discrepancies

None

Positive Elements

None

2.6 Welfare Arrangements

Appropriate procedures for health and welfare meeting the requirements of NR/L3/INI/CP0036 were confirmed.

The company undertook electrical installation work as a Contractor and stated that welfare arrangements were always supplied by the Client/Principal Contractor.

Arrangements were to be recorded within the RAMS Documents.

The arrangements for the monitoring of Welfare Provision was via worksite inspections.

However, the company had no evidence of worksite inspections on rail infrastructure as it had not yet undertaken any rail projects.

Major Nonconformities

None

Minor Nonconformities

None

Observations

None

Questionnaire Discrepancies

None

Positive Elements

None

2.7 Communication and Coordination

Communication and co-operation with others to ensure the safety of all personnel arrangements required that suitable information is distributed throughout the organisation in a timely manner to all individuals affected and to ensure that effective communication is also undertaken with clients.

The company implemented site rules via the production of RAMS Documents submitted to the client for approval. This ensured the flow of information between the client, designers, principal contractors and contractors.

However no evidence was available as the company had not yet undertaken any project work on Network Rail Managed Infrastructure.

Major Nonconformities

None

Minor Nonconformities

None

Observations

None

Questionnaire Discrepancies

None

Positive Elements

None

3. Environmental Management

3.1 Environmental Risk

A policy for Environment was available and displayed:

- Environmental Policy – Environmental, Health & Safety Policy, dated 18/05/2015, signed by the Directors

The policy stated the organisation's intent to comply with all relevant Environmental legislation.

The policy covered all areas of the business, met UK legislative requirements, was dated and current and endorsed by top level management. The Policy contained a clear commitment to:

- preventing pollution
- protecting the environment
- minimising the environmental impact, for the life cycle of plant, equipment, and other physical assets

The organisation had produced an Environmental Aspects and Impacts register:

- EMS Targets and Scores

And had examples of environmental risk assessment available.

The impacts and aspects register contained details on:

- Activity Product or Service
- Aspect
- Impact
- Current practices
- Responsibilities
- Target
- Actual Results
- Target Information

And issues included:

- Electricity/Energy Use
- Solid Waste & Waste Water
- Water
- Air
- Diesel Use
- Chemical storage and use

Environmental risk was communicated to staff via client work package plans and task briefings. However, no recent evidence of production and implementation was available at the time of audit as the company had not yet undertaken any work on Network Rail Managed Infrastructure.

Major Nonconformities

None

Minor Nonconformities

None

Observations

None

Questionnaire Discrepancies

None

Positive Elements

None

4. Management of Accidents and Incidents

4.1 Accident and Incident Reporting and Investigation

Appropriate close call, near miss, accident reporting and investigation arrangements were recorded in the organisation's documented procedure:

- Procedure for Reporting Accidents and Incidents, 12.3.42

This covered issues such as RIDDOR and reporting to the client on Network Rail Managed Infrastructure and included the definitions of near miss, close call etc.

Events and investigations were recorded on:

- Accident and Incident Report Form, 12.3.3

The company confirmed there had been no environmental incidents, reportable accidents, incidents, near misses or close calls on Network Rail Managed.

Statistics had been produced as follows:

- Reportable Accidents
- Minor Injury
- Incident/Near Miss
- Dangerous Occurrence
- Lost Time Incident Rate

Major Nonconformities

None

Minor Nonconformities

None

Observations

None

Questionnaire Discrepancies

None

Positive Elements

None

4.2 Emergency and Contingency Planning

The supplier had arrangements in place for responding to emergencies while undertaking work on rail Infrastructure.

The arrangements were that the Client/Principal Contractor responsible for the work would make appropriate arrangements and that these arrangements were to be briefed to the supplier's contractor's site representative prior to commencement of work via Rams Document, Work Package Plan, Task Briefing, Toolbox Talk etc.

The company representative confirmed that it had not needed to implement any emergency plans on Network Rail Managed Infrastructure in the previous 12 months.

Major Nonconformities

None

Minor Nonconformities

None

Observations

None

Questionnaire Discrepancies

None

Positive Elements

None

4.3 Restoration of Service (Business Continuity)

The supplier had arrangements in place for restoration of service (Business Continuity) whilst working on rail Infrastructure.

The arrangements were documented within:

- Business Continuity Plan, 2.5

The arrangements included:

- Business Continuity Team
- Risks – power shortage, customers failing to pay, sickness/death, inclement weather, loss of data
- Restoration of service
- Emergency Contacts

Major Nonconformities

None

Minor Nonconformities

None

Observations

None

Questionnaire Discrepancies

None

Positive Elements

None

5. Supply Chain Management

5.1 Supplier and Subcontractor Management

Appropriate processes were in place for the use of safety critical and non-safety critical suppliers ensuring effective supplier and subcontractor management. These were contained within the documented procedure:

- Updating Supply Chain Register, 9.1.1

The supplier types were split into 4 categories which required differing specific information:

- Specialist Sub-Contractors
- Electrical Limited Contractors
- Sole Trader
- Suppliers

The process included the use of a supplier on-boarding questionnaire, an Approved Suppliers List and periodic re-evaluation processes.

Evidence was seen of the Supplier/Contractor Prequalification Questionnaire and the Approved Suppliers List.

The Approved Suppliers List was checked and it was confirmed that it included:

- Gas Detection
- Fire Alarms
- Generators
- UPS
- Electrical Switchgear
- Consumable Material Suppliers

The company confirmed that it would use only RISQS approved suppliers, where required. However, it did not have a listing of approved, on-boarded suppliers for rail related activities such as medical, A&D, PPE etc.

Major Nonconformities

None

Minor Nonconformities

The organisation did not have a listing of approved, on-boarded suppliers for rail related activities such as medical, A&D, PPE etc.

Observations

None

Questionnaire Discrepancies

None

Positive Elements

None

6. Competence Management

6.1 Induction

Appropriate arrangements were in place for competence management which covered induction. These were documented within procedures:

- On-boarding Direct Electricians, 6.5.3
- On-boarding of Apprentice Electricians, 6.5.6
- On-boarding of Overhead Staff, 6.5.22
- On-boarding of Senior Staff, 6.5.25

Arrangements included the use of several forms, including:

- Contract of Employment
- Health & Safety Induction
- Sentinel Induction (rail staff)

Examples were available and were sampled via the organisation's SharePoint electronic database system. The organisation had not, however, undertaken any Sentinel Inductions as it was not yet sponsoring any individuals for Sentinel Competencies.

Major Nonconformities

None

Minor Nonconformities

None

Observations

None

Questionnaire Discrepancies

None

Positive Elements

None

6.2 On-going Competence Management

Appropriate competence management arrangements were in place for on-going competence management.

These were contained within documented procedures:

- On-boarding Direct Electricians, 6.5.3
- On-boarding of Apprentice Electricians, 6.5.6
- On-boarding of Overhead Staff, 6.5.22
- On-boarding of Senior Staff, 6.5.25

The arrangements in place included:

- Identification of training needs
- Competence recording on a spread sheet
- Provision
- Use of competent Assessors
- Use of competent Trainers
- Use of NSARE Approved organisations

The company maintained an HR Database for its staff on the SharePoint system which indicated:

- Name
- Competence
- Expiry date

This was colour coded:

- Red – expired
- Orange – 3 months or less to expiry
- Green – in date

At the time of audit the company confirmed that it was not yet sponsoring any individuals for Sentinel Competencies.

Major Nonconformities

None

Minor Nonconformities

None

Observations

None

Questionnaire Discrepancies

None

Positive Elements

None

7. Plant & Equipment

7.1 Management, Maintenance and Servicing

The company had a procedure in place covering the management, maintenance and servicing of plant and equipment. The arrangements were contained within documented procedure:

- Updating Tool Registers, 9.1.14

The organisation stated that plant for use on the rail infrastructure was to be hired in from an approved supplier. However, the organisation did have a selection of small hand tools/powered hand tools/test equipment for use during electrical installation work.

Tool registers were in place for the equipment owned and issued to personnel. This indicated:

- Description
- Item code
- Name
- Calibration date
- Date
- Location
- Country
- Job number

Examples of Calibration Records were seen cross referenced to the Tool Register 9.1.16, examples being:

- Certificate number P2636, ID1606, Installation Tester Fluke 1654B, 1797048, calibrated 11/12/2014, expiring 10/12/2015
- Certificate number 4151, ID4569, Electrical Tester Fluke T5-1000, 14341556, calibrated 07/01/2015, expiring 06/01/2016
- Certificate number 0139284, ID1606, Digital Multifunction Tester Fluke 1652C, 2562016, calibrated 08/07/2015, expiring 07/07/2016

Major Nonconformities

None

Minor Nonconformities

None

Observations

None

Questionnaire Discrepancies

None

Positive Elements

None

8. Human Resources including Occupational Health Management

8.1 Occupational Health

The supplier had arrangements in place for checking that sponsored workers under its control meet and maintain the health requirements in Network Rail Company Standards and Railway Group Standards. The arrangements were documented within the procedure:

- Occupational Health Standard, 6.5.30

The arrangements included:

- Carrying out pre-employment medical examinations
- Checking that persons engaged to work on Network Rail Managed Infrastructure meet the requirements set out for 'Pre-employment, pre-appointment & periodic testing for Drugs & Alcohol'
- A process for managing any employee declaring a negative change to their state of health and taking prescription drugs that may impact on the safety of themselves or others
- Obtaining medical self-certifications for Track Visitor Permits

Examples of competence specific medical fitness certificates were not available at the time of audit as the organisation was not yet sponsoring any individuals for Sentinel Competencies.

At the time of audit the company confirmed that it was Primary Sponsor for 0 individuals and Sub-Sponsor for 0 individuals. It did not allow any of its Primary Sponsored staff to have a Sub-Sponsor.

Additionally, the Occupational Health Standard, 6.5.30, contained information on:

- Reactive occupational health services
- Preventive occupational health services
- Additional occupational health services

The company had also recently contracted a confidential support service for employees "Employee Assistance Programme". This was a free 24 hour personal support service which helped an individual deal with relationships, work, substance abuse, family, stress and financial issues.

Major Nonconformities

None

Minor Nonconformities

None

Observations

None

Questionnaire Discrepancies

None

Positive Elements

None

8.2 Contract of Sponsorship Management

The company, when acting as the Primary Sponsor, had documented processes in place for establishing a 'Contract of Sponsorship' with each Individual Sentinel Card Holder.

The arrangements were documented within procedure:

- Sentinel Scheme Compliance, 6.5.120

As part of the contract of sponsorship requirements the company had processes for:

- Primary Sponsor Responsibilities
- Use of Primary Sponsored Personnel by Sub-Sponsors
- Primary sponsored personnel hours of work monitoring
- Primary sponsored personnel Sentinel Scheme Rule Breaches
- De-sponsoring Primary Sponsored Personnel

The company also presented a Contract of Sponsorship:

- Sentinel Scheme Compliance, 6.5.120

Completed examples of which were not available as the organisation was not yet sponsoring any individuals for PTS Competencies.

At the time of audit the company confirmed that it was Primary Sponsor for 0 individuals and Sub-Sponsor for 0 individuals. It did not allow any of its Primary Sponsored staff to have a Sub-Sponsor.

Major Nonconformities

None

Minor Nonconformities

None

Observations

None

Questionnaire Discrepancies

None

Positive Elements

None

8.3 Management of Sub Sponsors

The company, when acting as the Primary Sponsor, had documented processes in place for the management of Sub Sponsors. These arrangements confirmed that the organisation would not allow any of its Primary Sponsored staff to have a Sub-Sponsor.

These arrangements were detailed within:

- Sentinel Scheme Compliance, 6.5.120

At the time of audit the company confirmed that it was Primary Sponsor for 0 individuals and Sub-Sponsor for 0 individuals. It did not allow any of its Primary Sponsored staff to have a Sub-Sponsor.

Major Nonconformities

None

Minor Nonconformities

None

Observations

None

Questionnaire Discrepancies

None

Positive Elements

None

8.4 Misconduct Processes

The company had processes and documented responsibilities for a misconduct reporting and investigation process where any suspected misconduct event becomes apparent in relation to Sentinel Sponsorship. These documented requirements were contained within procedure:

- Sentinel Misconduct, 6.5.123

The documented processes included:

- The collection of information from sub-sponsors to enable the collation and conclusion of any required the Local Investigation.
- The Primary Sponsor is responsible for maintaining all records associated with the sponsorship of an individual, as required by the Sentinel Management System.
- The Primary Sponsor to maintain all records associated with a misconduct investigation and provide these to Network Rail in the event of a Formal Investigation or Appeal Hearing.

The organisation confirmed that it would not de-sponsor an individual on the grounds of misconduct without first conducting an investigation and misconduct hearing for that individual.

The company representative stated that it had not been involved in any misconduct events in the previous 12 months.

At the time of audit the company confirmed that it was Primary Sponsor for 0 individuals and Sub-Sponsor for 0 individuals. It did not allow any of its Primary Sponsored staff to have a Sub-Sponsor.

Major Nonconformities

None

Minor Nonconformities

None

Observations

None

Questionnaire Discrepancies

None

Positive Elements

None

8.5 Alcohol and Drugs Management

A policy for Drugs & Alcohol and Fatigue requirements were available and displayed within a public area of the premises in Carrick on Shannon:

- Drugs & Alcohol Policy – Drugs and Alcohol Policy, dated 29/09/2015, signed by the Directors

The policy stated the organisation's intent to comply with all relevant Safety, Quality and Environmental legislation.

The policy covered all areas of the business, met UK legislative requirements, was dated and current and endorsed by top level management.

Appropriate documented alcohol and drug arrangements were contained within the company procedure:

- Occupational Health Standard, 6.5.30

Which covered:

- Medication
- Policy
- 5% Random screening
- Refusals
- Fail Results
- 'For Cause' Screening
- Records (10 years, positive tests indefinite)

A 'For Cause' contract was in place with a RISQS approved supplier which had an expiry date of 30/09/2016

There was no evidence of random unannounced sampling having been undertaken in the last 12 months as the organisation was not yet sponsoring any individuals for Sentinel Competencies.

There had been no requirement for 'For Cause' testing, no positive tests and no refusals to take a test in the previous 12 months.

Major Nonconformities

None

Minor Nonconformities

None

Observations

None

Questionnaire Discrepancies

None

Positive Elements

None

8.6 Fatigue Management

A policy for Fatigue requirements were available and displayed within a public area of the premises in Carrick on Shannon:

- Fatigue Policy – Fatigue Management, dated 29/09/2015, signed by the Directors

The policy stated the organisation's intent to comply with all relevant Safety, Quality and Environmental legislation.

The policy covered all areas of the business, met UK legislative requirements, was dated and current and endorsed by top level management.

Appropriate arrangements for the management of employee fatigue were confirmed recorded in documented procedure:

- Occupational Health Standard, 6.5.30

This was compliant with the requirements of Network Rail company standard NR/L2/ERG/003.

The procedure covered:

- Working Hours Limits
- Rostered Hours (8 hour Shifts)
- Monitoring
- Exceedance of Working Hours Limits
- Risk Assessment

Evidence was not available of the implementation of the requirements as the organisation had not undertaken any rail related work in the last 12 month period.

The company representative confirmed that there had not been any authorised exceedances in the last 12 months.

Major Nonconformities

None

Minor Nonconformities

None

Observations

None

Questionnaire Discrepancies

None

Positive Elements

None