



OCCUPATIONAL HEALTH AND SAFETY MANAGEMENT SYSTEM

PROCEDURES

TITLE: PROCEDURE FOR HEALTH & SAFETY SYSTEM AUDIT

Document No.: HSP-HSA-1

Revision No.: 00

Effective Date: 20-10-2016

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Scope: Applies to whole of OHS Management System of POWER GRID COMPANY OF BANGLADESH LTD.

Purpose: To provide evidence of conformance to requirements and of effective operation processes of OHSMS

SI No.	Activity (including Check Points)	Ref. Doc.	Responsibility	Freq./ Time	Output
1.0	Planning				
1.1	DEFINITIONS: <u>Audit:</u> Is a systemic and independent examination to determine whether OHS system activities and related results comply with planned arrangements and whether these arrangements are implemented effectively and are suitable to achieve objectives. <u>Auditee:</u> An auditee is an organization (or part of an organization) that is being audited. <u>Auditor:</u> A person who has the qualifications and is authorized to perform all or any portion of a OHS audit. <u>Audit criteria:</u> set of policies, procedures or requirements <u>Audit plan:</u> description of the activities and arrangements for an audit <u>Audit scope:</u> extent and boundaries of an audit <u>Objective evidence:</u> data supporting the existence or verity of something <u>Audit conclusion:</u> outcome of an audit provided by the audit team after consideration of the audit objectives and all audit findings	OHSAS 18001: 2007			
1.2	<u>Audit Objectives:</u> Internal Audit is to be conducted to determine and provide information on whether the Health & Safety system i) conforms to planned arrangements ii) is properly implemented and maintained iii) is effective in meeting organization's policies and objectives and iv) has opportunities for improvement in the integrated management system. Audit Objectives are 1. Discover opportunity for improvement. 2. Reveal deficiencies in the documented system. 3. Reveal deficiencies in the implementation of the documented system. 4. Constant measures achievement in terms of management compliance. 5. Serves as a tool for corrective action. 6. Examine effectiveness of improvement system				
1.3	Audit planning is done depending on the importance and status of the activities of the department.		DMR	Quarterly	HSF-HSA-01

Reviewed by (MR):

Approved by (MD):



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1.4	Scheduling of Audit in the Audit Plan is done as per convenience of the Auditor and Auditee.	HSF-HSA-01	DMR	-do-	HSF-HSA-01
1.5	Circular is sent to the Auditor and Auditee as per schedule.				HSF-HSA-02
1.6	The Department Head, responsible for the area or element to be audited, will be notified in advance of the scheduled audit. The notification will list the date(s) & time, the objectives and name of the auditor(s).		-do-		
1.7	Audits shall be scheduled on the basis of importance and status of the activities undertaken by a department.		DMR		
1.8	While selecting Auditor, care should be taken to restrict persons having direct responsibility in the functions to be audited.		-do-	-do-	
1.9	Auditor Qualification and Independence: a) Only qualified auditors shall participate in internal auditing. Qualification may be obtained via training and/or experience. b) Auditors shall be assigned such that they are not directly responsible to perform the activities being audited.		MR		
2.0	Implementation				
2.1	After getting the Circular Auditor makes necessary checklist and prepares himself on the scope of audit.	HSF-HSA-02	Auditors	When required	HSF-HSA-03
2.2	DMR refers auditor's copy of OHS Manual and copies of other Documents to Auditor in the case he needs that.		DMR	At the time of audit	
2.3	The assigned Auditor conducts audit as per the scope mentioned in the circular and records the necessary findings along with nonconformity, if any.	HSF-HSA-02	Auditors	When required	HSF-HSA-03 HSF-HSA-04
3.0	Reporting:				
3.1	Upon completion of the audit, a closing meeting shall be held between the auditor(s) and the auditee responsible for the area being audited. At this time, any observation/ noncompliance detected during audit shall be brought to the attention of auditee. After recording the findings Auditee's signature is taken as an evidence of his agreement to the findings in the nonconforming report.	HSF-HSA-04	Auditees		HSF-HSA-05
3.2	Auditor shall give Original of Nonconformity Report to the Auditee for follow up actions of noncompliance, keep one with himself and send the copy to MR along with audit report (check list).		-do-	-do-	SF-HSA-04

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4.0	Corrective Action:				
4.1	Noncompliances are studied and the competent people of the department take corrective actions responsible for non-compliance.	HSF-HSA-04			
4.2	Corrective action is proposed in the specified space of the audit findings / Nonconformity Report.		-do-	-do-	HSF-HSA-04
4.3	Auditee informs the Audit Findings to MR and also to his superior by sending a copy of Nonconformity Report.	HSF-HSA-04	Auditees	-do-	
5.0	Follow-up Audits:				
5.1	Follow-up audit on noncompliance after agreed period of corrective action shall be performed by the same person(s) who conducted the audit or person designated by the Management Representative. A report of the follow-up audit will be sent to MR.	HSF-HSA-04			
5.2	Follow-up audits shall verify and record the implementation and effectiveness of the corrective action.		-do-	-do-	
5.3	Corrective action is taken as per agreed date and MR is informed on this.		Auditees,	-do-	HSF-HSA-04
6.0	Closing of Corrective Action Request/Report:				
6.1	Management Representative shall close the Non-compliance Report upon receipt of follow-up audit report if corrective action implemented and effective.		Auditors	-do-	HSF-HSA-04
7.0	Monitoring				
7.1	The result of the Audit Findings and Follow up Audit Findings are maintained.		MR		
7.2	MR will fill-up the CAR log for record keeping and analysis.				HSF-HSA-06
7.3	Audit Result is analyzed and report is generated.		MR, Auditors	After audit	HSF-HSA-07, HSF-HSA-08
7.4	Audit Result are placed for Management Review		MR		
8.0	Procedure for Health & Safety System Audit is checked and reviewed to ascertain conformity to the requirement of OHSAS 18001 Standards and its effectiveness.	HSF-HSA-05 HSF-MNG-06	Functional Heads, MR	At least 2 times in a year	Review of record control OHS system
9.0	Review consideration will be raised in MRC Meeting for decision		MR		HSF-MNG-01
10.0	Corrective actions will be taken to improve the OHS system on the basis of review		MR	At least 2 times in a year	Improvement

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