

ISO 45001 assessment process

CLIENT INFORMATION NOTE

Overview

This Client information note explains the main stages of our process for ISO 45001 Occupational Health & Safety (OHS) Management System assessment and certification.

The assessment process normally includes two separate audit activities before we can proceed to a recommendation for approval. We call these:

- Stage 1 (document review and planning audit), and
- Stage 2 (initial assessment).

Once we have issued your approval certificate, we will carry out periodic surveillance audits to maintain/reconfirm your approval.

At each audit, our auditors will be open and helpful, and will follow a practical approach. In this way we believe that we add value to the assessment process.

Wherever possible and permitted under the terms of our accreditation our default audit delivery will be by using remote technology assessments through the use of agreed Information Communication Technology (ICT) such as Skype or TEAMS. Please refer to our [Remote Audit Client](#)

[Information Note](#) for more detail about remote audits.

Before the audit, we will discuss and agree with you the audit dates, start and finish times, the audit team members, how long the audit will last, and which parts of your business will be audited. Audits will be carried out and reported in your national language unless otherwise agreed.

Stage 1 - Document review and planning audit

Purpose of the audit

We do this audit to:

The Stage 1 assessment is to determine that the documented requirements of the Standard have been achieved. Successful completion of the Stage 1 permits the Stage 2 audit to be undertaken.

- assess the risks and opportunities identification, assessment and treatment process and the methods required to ensure effective management and effective implementation of the applicable controls
- collect information about your company's organisation, processes and activities so that we can develop a plan for the Stage 2 audit
- confirm the scope, audit team requirements, and timing for the Stage 2 audit

- answer any questions you may have about our service.

Our main focus is on the planning elements. This includes:

- how effective your system is in identifying risks and opportunities
- the way you have assessed the associated risks and opportunities, and
- how you plan the necessary control measures and improvement objectives together with the associated management programmes.

The audit will identify any weaknesses or omissions in your system that may need to be put right before the Stage 2 audit.

Carrying out the Stage 1

The audit starts with an opening meeting. The auditor will explain to your management team how we carry out audits, and you will be able to introduce your company. The auditor will agree a plan for the audit with you.

The auditor will then:

- conduct a site tour if the Stage 1 is on-site, or where off-site and appropriate undertake reviews of site plans or conduct a site video (virtual) tour
- produce a detailed assessment plan for the Stage 2 initial assessment audit
- produce a focused report which describes both positive findings and

any issues requiring your attention before the Stage 2 audit takes place. The report will identify the grading of these issues as if they were findings outstanding at the end of the Stage 2 audit.

The auditor will usually need to review the following:

- **The context of your organisation** – including the identification of interested parties
- **Occupational Health and Safety policy**
- **Identification of OH & S risks and opportunities, including their assessment and management**
- **access to applicable legal and other requirements**
- **objectives and OHS management programmes**
- **OHS performance measures and reporting**
- **internal audit programme and reports**
- **procedures to manage and control the identified**
- **OHS risks and opportunities**
- **emergency response plans**
- **management of the system** – including corrective action and management review
- **site activities** - to observe site layout and conditions, and operations and activities in progress; to confirm potential hazards and risks; to identify current control measures and OHS performance measures and indicators; and as familiarisation for the Stage 2 audit. If the audit is being conducted using ICT, this will be carried out as a live streaming activity as a virtual site tour but where appropriate this may be pre-recorded by you.

The Stage 1 audit ends with a closing meeting to present the audit report and agree the next stage of the audit process, including any health and safety (PPE), security and administrative issues.

If your organisation controls significant maintenance activity, involving either your own staff, or contractors and your staff, the Stage 2 audit may be arranged to coincide with a major shut down for maintenance. This will be based on

the auditor's assessment of the hazard content and the complexity of the applied controls likely to be assessable.

The documentation reviewed during the Stage 1 audit will be used at future audits as a baseline. However, you should continue to amend system documents as a result of internal improvement activities. At each audit we will need to identify the changes between the latest issue and the baseline.

Stage 2 - Initial assessment

Purpose of the audit

During this audit the auditor will focus on how your management system has been put into practice. The Stage 2 visit aims to confirm that:

- The context of your organisation, including the identification of interested parties
- The commitment of the leadership of your organisation including the consultation and participation of workers
- your policies, objectives, programmes and procedures are effectively put into practice
- there is a planned and systematic approach to improvement
- you are effectively managing the identified OHS risks and opportunities in the management system
- the management system meets all requirements of the assessment standard for the context and scope of your organisation

Carrying out the visit

Where the audit duration is two days or longer, up to 50% of the audit will be carried out remotely wherever possible and as appropriate.

The audit, which may have been arranged to coincide with a major shut down for maintenance, follows the plan prepared during the Stage 1 audit. Members of the audit team will audit areas with guides who can witness the findings and help the audit. The Stage 2 audit usually includes a meeting with the representative of senior management with overall responsibility

for the management system.

Our audit team will report, as a minimum, any findings related to:

- follow-up of findings from the Stage 1 audit
- activities, products and services identified in the agreed scope for the audit
- how effective the management system is at achieving your organisation's policy including legal compliance, continual improvement and control of risks and opportunities related to health and safety
- putting into practice the arrangements to manage OHS risks and opportunities
- progress to achieve objectives through management programmes
- putting into practice the systems needed by the management system and maintaining appropriate documented information
- putting into practice monitoring and measurement arrangements to assess how the management system performs and whether objectives are achieved
- how involved in, and committed to, the management system the senior management are and what consultation and participation the worker have had in the development and deployment of the OH & S management system, and
- how effective the internal audit, corrective action, and management review processes are.

The audit team will hold review meetings with you each day to discuss any findings. Appropriate staff should be present to confirm that you accept these findings. Please see below in the 'Reporting' section how we define findings. We finalise the grade of findings at the end of the audit as more evidence may become available.

The audit ends with a closing meeting to present a summary of the findings, and to agree the next stage of the assessment process. The auditor will give a complete report to your management representative. If we have not reported any Major Nonconformities, and you have informed the auditor of your proposed corrective action for any

Minor Nonconformities, the auditor will recommend approval to ISO 45001: 2018 (subject to an independent technical review by our office). However, if any Major Nonconformities have been reported, we will have to defer approval until we have carried out a follow up audit to review the corrective action taken and its effectiveness.

Our team leader will agree with you the arrangements for the follow up.

Surveillance audits

Purpose of the audit

Once we have certified your management system, we will begin a programme of surveillance audits, (which normally take place as a minimum of every twelve months). However, if you undertake major periods of shutdown maintenance (either by your own staff or using contractors), and your Stage 2 audit did not coincide with such a period, then we may arrange a surveillance audit to correspond with this activity.

Surveillance audits aim to confirm that your approved management system continues to:

- be maintained in line with assessment criteria, the context of your organisation and the required scope
- be in operation, and
- deliver continual improvements.

We also consider the implications of changes to the system or the context of your organisation. Such changes may have been carried out as a result of changes in your activities, products or services, or changes to the business environment.

We will then consider whether you continue to meet certification requirements.

Carrying out the audit

The scope for surveillance audits will normally have been agreed with you at your previous audit. We will confirm the details with you at an opening meeting.

At least one audit day per year has to be carried out as an on-site audit. On an annual basis at least 50% of the overall

surveillance audit has to be carried out as on-site audit of operational activity. Remote audit ICT may be utilised for the remainder of the surveillance assessment.

Areas chosen will allow us to review:

- The changes to the context of the organisation
- internal audit and management review processes
- how management programmes are operating and their progress in meeting OHS objectives
- corrective action processes including customer complaints
- changes to the system and the effectiveness of their implementation
- how you manage changes relating to responsibilities and authorities of main staff.

We will also review any outstanding findings and how you use LRQA and accreditation marks.

If we report any Minor Nonconformities during the surveillance audit, we will normally follow them up during our next scheduled audit, otherwise we will make arrangements with you for the follow up.

If we report a Major Nonconformity during a surveillance audit, we will arrange a special surveillance to follow up the necessary corrective action (normally within three months). This is the first phase of our suspension and withdrawal of approval process.

At the closing meeting, our auditor will report on the current audit and agree with you the theme for the next audit. If any Major Nonconformities have been reported, the auditor will also agree arrangements for follow up of actions you will take.

Certificate renewal

Planning for the certificate renewal

We conduct certificate renewals on a three-yearly basis, planned at the previous surveillance audit and agreed with you.

The certificate renewal planning process contains three steps: Review, Preview and Planning.

Review

This step includes the review of past performance such as:

- trend information on complaints and other performance indicators
- system documentation improvements
- Improvement Log projects
- lessons learned from audits
- trends in our findings.

Based on this review of past performance, our auditor will identify any potential risks in the present management system regarding successful implementation of the strategies and objectives.

Preview

The aim of the preview is to align our audit activities with your strategy and objectives. The auditor will use the conversation with senior management to understand your longer-term expectations, for example, strategy issues such as business and operational risks, competitive issues, changes to internal and external environment, etc. Our auditor will establish, through the interview, whether these expectations, objectives and strategies will impact your management system or the stakeholders of your organisation.

The preview stage will be used to identify further themes that can be used in the coming certificate renewal audit and for the next three-year cycle.

Planning

The next step is planning the certificate renewal. In this part of the audit our auditor will:

- identify any aspects of the system that have not been appropriately addressed during the surveillance cycle, and plan how to review these
- use the information gained during the review and preview stages to support the planning process
- if appropriate, consider how best to give attention to any themes identified (including the improvement tracking log)
- identify the areas, departments, processes and activities to be assessed

- agree with you sensible durations for each of these, commensurate with risk
- try to identify the best use of resources, and avoid duplication
- add appropriate time for reporting, consolidating and presenting reports
- consolidate the information into a sensible audit plan.

Our auditor will allow time for discussion with all relevant managers and for a review of records for all relevant departments.

Conducting certificate renewal visits

We conduct the certificate renewal audit similarly to a Stage 2 audit, with 50% of the audit being carried out remotely if the duration is two days or longer wherever possible based upon a risk review. In addition, we include a review of your system documentation to ensure that it:

- continues to meet needs of your business within the context of your organisation and the needs and expectations of your interested parties, and
- complies with the certification requirements and the scope of certification, including continual improvement.

Changes to your approval

For any increase or decrease in your certificate of approval, please submit a formal request for the change. LRQA will review the request to consider:

- additions or changes to competency requirements for the audit team(s)
- additions or reductions in audit duration requirements

and you will be notified of any changes by an amended contract.

If the change requested has meant a major change or addition to your documented system, we will undertake a separate document review audit (Stage 1).

We will conduct the change to approval audit in line with our process for Stage 2 audits, although we do not normally produce a formal audit plan. If we did

not need to conduct a document review (Stage 1), we will allow time during the audit for the team leader to review relevant documentation and to agree a plan for the audit.

Change to Approval audits may be performed as separate audits or may be combined with a scheduled (Surveillance or Certificate Renewal) audit.

LRQA will issue an amended certificate(s), using the same expiry date as on the current certificate.

Reporting

The reporting process for all our audits is similar. We complete audit reports to record findings, progress against the audit plan, positive comments, and also points of clarification or interpretation. We record audit findings, identifying them as Major Nonconformity or Minor Nonconformity. We define these findings as follows:

Major Nonconformity: The absence of, or the failure to implement and maintain, one or more management system elements, or a situation which would, on the basis of the available objective evidence, raise significant doubt of the management to achieve:

- the policy, objectives or public commitments of the organisation
- compliance with the applicable regulatory requirements
- conformance to applicable customer requirements
- conformance with the audit criteria deliverables.

Generally, a major nonconformity will be a system failure that:

- is already affecting system effectiveness or deliverables
- puts at risk the capability of the management system
- requires immediate containment
- requires immediate root cause analysis and corrective action.

Our team leader will make arrangements with you for follow up.

Minor Nonconformity: A finding indicative of a weakness in the implemented and maintained system, which has not significantly impacted on the capability of the management system or put at risk the system deliverables, but needs to be addressed to assure the future capability of the system.

Generally, a minor nonconformity will be a weakness in an internal facing process or procedure; or a finding where any further deterioration of control could reasonably be considered likely to result in the system becoming ineffective. Requires root cause investigation and corrective action.

If raised at an audit that results in a certificate being issued, then the auditor will ask you to indicate the corrective action you will take. This corrective action plan will form part of the independent review by our office before your certificate is issued. If raised at a surveillance audit, although you need to take corrective action within an appropriate time after the visit, you do not normally need to provide us with details of the action until we next audit you.

In both cases, at the next audit the auditor will review the action you have taken and fill in the corrective action review section in the report

Please keep copies of all our audit reports for three years. In exceptional circumstances, we may ask you to provide copies of previous reports.

Suggestions for improvements that could be made to a compliant management system that would improve the efficiency of the processes undertaken we will record in either:

- the executive summary, for strategic improvement suggestions, or
- the body of the report, for improvement suggestions that relate to a particular area.

Sampling

It is important to remember that even though a problem may not have been identified in an area of activity, it does not necessarily mean that there are no problems. As assessment work is based on sampling techniques, statistically there is always a possibility that issues will not be identified during an assessment. Please consider this when you audit your own management system.

Confidentiality

We will not pass on any of the information we gather about your organisation (including the contents of reports), to any other person or organisation without your permission (except as required by the accreditation body).

LRQA takes the security of your personal information very seriously. [Find out more.](#)

Further information

To find out more about how LRQA can help you to increase performance and reduce risk, please visit our website www.lrqa.com. From here you can also visit one of our country specific websites to find out about LRQA in your country.

Get in touch

Visit www.lrqa.com for more information

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The LRQA logo consists of the letters 'LRQA' in a bold, sans-serif font. The 'R' is stylized with a teal-colored element. The logo is enclosed within a teal square border.

YOUR FUTURE. OUR FOCUS.