



STONE APPLICATIONS UK LTD T:+44 [0] 20 7738 7212
MANAGEMENT OFFICE F:+44 [0] 20 7738 7613
46 LANSDOWNE RD info@stoneapp.co.uk
LONDON E18 2BB www.stoneapp.co.uk

Stone Applications: Achilles Building Confidence Explained

The heart of the Achilles solution is a systematic supplier qualification programme with data capture through online questionnaires and rigorous validation through our assessment teams and qualified auditors. The services offered by Achilles are scalable and lend themselves to adaptation to any sector or geographical region. Supplier Application and Registration A buyer specific questionnaire that is free to suppliers and gives procurement teams a complete view of supply chain risk whilst

Validating and maintaining information about all suppliers, regardless of size, in one central location.

Qualification Questionnaire A solution used by buyers to source and select suppliers with the required standards and capabilities. We review data formats, cross-check answers for consistency, validate responses against additional documents provided (e.g. insurance certificates) and use feeds from trusted third-party providers for specialist data such as company registrations

and financial records. Specialist Qualification We offer specialist modules to buyers that provide more detailed supplier information on areas of the highest importance including

Financial Analysis, CSR / Sustainability, Carbon Reduction and Multi-tier supplier visibility.

Audit

We can provide further levels of rigour in the qualification process through desk-top and on-site audits carried out by fully-qualified lead assessors.

The Achilles Building Confidence Programme outlines the vigorous assessment process so buyers can be confident that an Achilles Approved supplier meets the very highest standards in all compliance framework.



Level 4 Audit Module



Contractor/Installer Protocol

Version 2.2



Achilles Information Limited

30 Park Gate, Milton Park, Abingdon, Oxon OX14 4SH

Tel: +44 (0)1235 838140 Fax: +44 (0)1235 821093

Email: construction@achilles.com Website: www.achilles.com



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Preface

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

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

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 2007. Questions without legislative or specific CDM requirements are left blank

CDM	Legislative requirement against CDM Regulations 2007
L	Legislative requirement other than CDM Regulations 2007

Auditor application of the guidance notes

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

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

Suitably Qualified and Experience People (SQEP)

This protocol has been reviewed to ensure that it is aligned with the principles of SQEP, a term that has been adopted most notably by the nuclear industry. Organisations accredited to the BuildingConfidence standard can have confidence that they are also aligned with these principles.

Assessment Requirements

1. Management Controls

1.1 (MC.1.1) Introductory Question - 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 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)*
- *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 industry?*

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

L

Guidance:

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

1.3 (MC.4.1) How does the Organisation clarify its management structure and responsibilities?

L

<PQQ Section 2.1, 10.1 to 10.3>

Guidance:

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

1.4 (MC.5.2) How does the Organisation assure itself and its clients that it has control of its activities?

L

<PQQ Section(s) 12.7 to 12.14>

Guidance:

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

Guidance:

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

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 (e.g. ISO supporting information, Constructing Excellence advice)*
- *Does the Organisation use recognised levels of performance (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.1.3) How does the Organisation ensure that it is:

L

a) Aware existing legislation relevant to its activities

b) Aware of proposed changes to/ new legislation?

Guidance:

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

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

L

<PQQ Section(s) 11.17 to 11.56, 12.15 to 12.19>

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.*
- *How the Organisation ensures that all applicable physical site issues are incorporated into the relevant risk assessments. (Limitations of size, gradient, climate, time the activity is to be completed etc.)*
- *How the Organisation ensures that all applicable site issues are incorporated into the relevant risk/aspect assessments.(If applicable) (e.g. 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.11.1) How does the Organisation ensure it identifies and controls the effects of potentially harmful substances?

L

Guidance:

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

2.4 (LC.8.1) How does the Organisation comply with the relevant requirements within the Construction (Design and Management) Regulations 2007?

L

CDM

PQQ Section(s) 11.20 to 11.25; 11.30 to 11.37 and 11.38 to 11.45 and 11.50 >

Guidance:

- If the Organisation acts as a Client, can it demonstrate mechanisms for:
 1. Verifying the competence of appointed parties
 2. Ensuring sufficient resources and time
 3. Providing pre construction information to appointed parties
- If the Organisation acts as a CDM Co-ordinator, can it demonstrate mechanisms for:

Ensuring demonstrable competence of personnel to meet the requirements of CDM 2007

 1. Providing advice and guidance to the Client on meeting the requirements of CDM 2007
 2. Verifying the client is aware of his duties
 3. Process to review pre-construction information and advise Client of any gaps.
 4. What are the Organisation's processes to notify the Health & Safety Executive of the project?
 5. Manage the flow of information (including Health & Safety) between the Client, Designers, Principal Contractors and Contractors
 6. The Organisation has processes in place to meet their duties in the compilation of the Health & Safety File.
- If the Organisation acts as a Designer can it demonstrate mechanisms for:
 1. Ensuring demonstrable competence of personnel to meet the Designer requirements of CDM 2007
 2. Verifying the client is aware of his duties and, where applicable, CDM Co-ordinator has been appointed
 3. Ensure that the design eliminates health & safety risks at source
 4. Communicate unmitigated risks present in the design to other parties.
 5. There are processes in place to assist the CDM Co-ordinator in their duties and the compilation of the Health & Safety File
- If the Organisation acts as a Principal Contractor can it demonstrate mechanisms for:
 1. Plan and coordinate the construction phase in liaison with other Contractors.
 2. Develop and implement a written plan and site rules (the initial plan must be completed before the construction phase begins).
 3. Give other Contractors relevant parts of the plan in time to allow their own safety plans to be prepared.
 4. Ensuring suitable welfare facilities are provided
 5. Verifying competencies of contractors appointed
 6. Ensuring all workers have site inductions and further information and training as required.
 7. If working as Principal Contractor, what is the mechanism for planning, coordination of mitigation measures to control the potential for risk from fire during the construction process?
- If the Organisation acts as a Contractor can it demonstrate mechanisms for-
 1. It has processes to communicate and co-operate with others to ensure the safety of all personnel
 2. Has the capability to meet the expectations of the Principal Contractor's requirements for the related work package
 3. Implement site rules
 4. Manage the flow of information (including Health & Safety) between the client, designers, principal contractors and contractors

2.5 (LC.10.1) What are the Organisations arrangements for the issuing, checking and monitoring of Personal Protective Equipment (PPE)?

L

<PQQ Section 11.24 and 11.25>

Guidance:

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

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

L

<PQQ Section(s) 11.34-11.36>

Guidance:

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

Occupational Health Records

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

2.7 (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*

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

L

<PQQ Section(s) 13.13 & 13.14>

Guidance:

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

3. Quality Management Controls

3.1 (QM.5.1) How does the Organisation ensure that its work equipment is fit for purpose?

L

Guidance:

- Does the Organisation have a process to identify each item of plant or machinery?
- What are the Organisation's arrangements to ensure that all plant, small hand tools and equipment are approved prior to use?
- How are calibration requirements controlled (if applicable)?
- If the Organisation uses equipment from a third party, how does it assure itself that the equipment is fit for purpose?
- Does the Organisation have processes in place to identify and deliver statutory and other inspections/ service maintenance?
- Lifting and its ancillary (chains/ slings/ strops) equipment are used; does the Organisation possess processes to ensure they remain safe (if applicable)?
- The competence requirements for internal staff involved in maintenance, inspections and servicing of equipment.
- That maintenance work plans are signed by a competent person.

3.2 (QM.1.2) How does the Organisation identify and ensure that its product/service will meet?

a) Specification

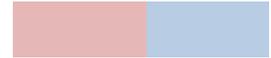
b) Client's Requirements and Expectations?

<PQQ Section(s) 10.17 to 10.18>

Guidance:

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

3.3 (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?*

3.4 (QM.4.1) What controls are in place to manage the design process within the Organisation (if applicable)?

L

CDM

Guidance:

- *There is a documented process for submission of designs (including revision status, change process etc).*
- *Does the Organisation have processes in place to ensure that the proposed designs meet the specification and the design brief?*
- *Does the Organisation use third party checking of the designs*
- *Does the Organisation set design quality performance indicators*
- *How does the Organisation assess the designs for value and functionality*

4. Training and Competence

4.1 (TC.1.2) How does the Organisation control competency management?

L

CDM

Guidance:

- *How does the Organisation identify competence requirements for particular activity?*
- *Evidence of identifying and meeting statutory competence requirements. (e.g. Schedule 4 of CDM2007 ACoP) as distinct from client-specific competencies.*
- *Evidence that current personnel have experience with that workload (for multi-disciplinary organisations)*
- *That the Organisation has the capability to meet the professional qualification requirements and review and changes or updates for its activities? (if applicable)*
- *How does the Organisation record what training or levels of competency required for the position?*
- *Has the Organisation a process for certification expiry/re-training event dates.*
- *How does the Organisation identify and meet client-specific competence/ training requirements? (e.g. SQEP in Nuclear, Network Rail etc.)*
- *Have the relevant competency standards been documented; these may be drawn from external organisations (e.g. SQEP, Construction Skills, RIBA, CABE, CITB and City & Guilds based on an approved industry standard or developed internally.)*
- *Where competency standards have been developed internally these must be signed off by competent personnel*
- *How are remote workers advised of their need to be re-assessed? (if applicable)*
- *Are there appraisals of personnel performance and personal training plans put in place?*

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

L

<PQQ Section(s) 2.3 and 1.4>

Guidance:

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

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

L

<PQQ Section(s) 10.1 to 10.3; 11.1 to 11.3 and 12.1 to 12.3>

Guidance:

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

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.5.1) Does the Organisation actively engage with the Considerate Constructors Scheme?

Guidance:

- *Is the Organisation registered with the Considerate Constructors' Scheme (Registration Number)?*
- *Has the Organisation received a scored Monitor's Site Report? (check the report is within 12 months of the audit date)*
- *Has the Organisation received a Considerate Constructors Scheme National Award?*

**Auditor Note – auditor to observe if the organisation is not registered and works out on site*

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

L

<PQQ Section(s) 13.15 -13.18, 13.20-13.21>

Guidance:

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

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

L

<PQQ Section(s) 13.5>

Guidance:

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

6. Supply Chain Management

6.1 (SCM.10.1) What criteria does the Organisation apply to ensure transparency of the subcontract selection process?

L

<PQQ Section(s) 13.1-4, 13.8-13.10>

Guidance:

- *Does the Organisation maintain an approved supply chain register?*
- *How does the Organisation select criteria for the assessment of its supply chain?*
- *How are these selection criteria communicated to the supply chain?*
- *Have Commercial staff/ buyers been trained to deliver the process?*

6.2 (SCM.5.1) What criteria does the Organisation apply to assist it with the sourcing of products?

L

<PQQ Section(s) 13.1-4, 13.8-13.10>

Guidance:

- *Does the Organisation has a documented process that cover Material Suppliers?*
- *Does the Organisation maintain an approved supply chain register?*
- *How does the Organisation select criteria for the assessment of its supply chain?*
- *Are standard criteria used for all material orders?*
- *How are these selection criteria communicated to the supply chain?*
- *Have Commercial staff/ buyers been trained to deliver the process?*

6.3 (SCM.11.1) What criteria does the Organisation apply to control the sustainable ethical sourcing of products/ services?

L

<PQQ Section(s) 13.1-4, 13.8-13.10>

Guidance:

- *Does the Organisation conduct anti-bribery and corruption risk assessments and/or due diligence?*
- *Does the Organisation use ethical supply chains (if applicable)*
- *Does the Organisation participate in 1st, 2nd, 3rd party ethical audit?*
- *How does the Organisation assure itself that child labour is not utilised?*
- *How does the Organisation assure itself that its supply chain pay a living-to its personnel?*
- *Are the supply chain required to provide evidence of working hours monitoring the supply chain?*
- *Does the supply chain handle timber from legal and sustainable sources? Can they demonstrate full chain of custody?*
- *Are suppliers required to publish Corporate Social Responsibility and Environmental Policies?*
- *Does the Organisation actively influence decision-makers to avoid specifying materials that can be sourced from oppressive regimes*
- *Record evidence of how the Organisation has assessed the risk associated with each country*

6.4 (SCM.1.7) How does the Organisation ensure effective supply chain management?

L

CDM

<PQQ Section(s) 9.6 to 9.11>

Guidance:

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

7. Emergency Preparedness and Site Security

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

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<PQQ Section(s) 11.46 to 11.49>

Guidance:

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

Auditor Note: Establishment of a safe situation, a command and control structure, Communications person appointed to deal with media (where applicable), a communication structure including liaison with Client/Principal Contractor, Reporting to the HSE process, Liaison with enforcement authorities, Process for preservation of evidence
 - b) An accident/ incident investigation process**

Auditor Note: This should include: competent people are undertaking the investigation; all operatives are aware of the investigative process; a mechanism for feeding into the Clients formal enquiry process; that arrangements are in place to assist and provide records to enforcement agencies (Police, Environment Agency, HSE)
 - c) Business continuity plan (Ref BS 25999)**

Auditor Note: This should include loss of personnel, IT, sites, data loss, phased recovery plan, communication plan, command structure
- Are site (permanent or temporary) security arrangements risk assessed?
- Does the organisation have emergency evacuation plans in place for all permanent and temporary (if applicable) sites?
- The Organisation has communicated the accident reporting process to its workforce and, where applicable, contracted personnel.
- That the Organisation has a requirement for testing the emergency processes
- If working under a Principal Contractor's emergency arrangements, has a copy been received, reviewed and communicated to personnel.
- Is training provided to personnel to minimise the impact of an accident/ incident?
- Are accident/ incident/ business continuity plans tested and performance reviewed either under test or real conditions?
- How does the Organisation ensure that its permanent and temporary (if applicable) sites are secure?
- Does the Organisation have to work to specific legal requirements in the event of a site evacuation?
- If the site is evacuated does it have any impact on third parties if so how is this managed?
- Has there been a review of other emergency situations (e.g. terrorism etc.)

8. Sustainability

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

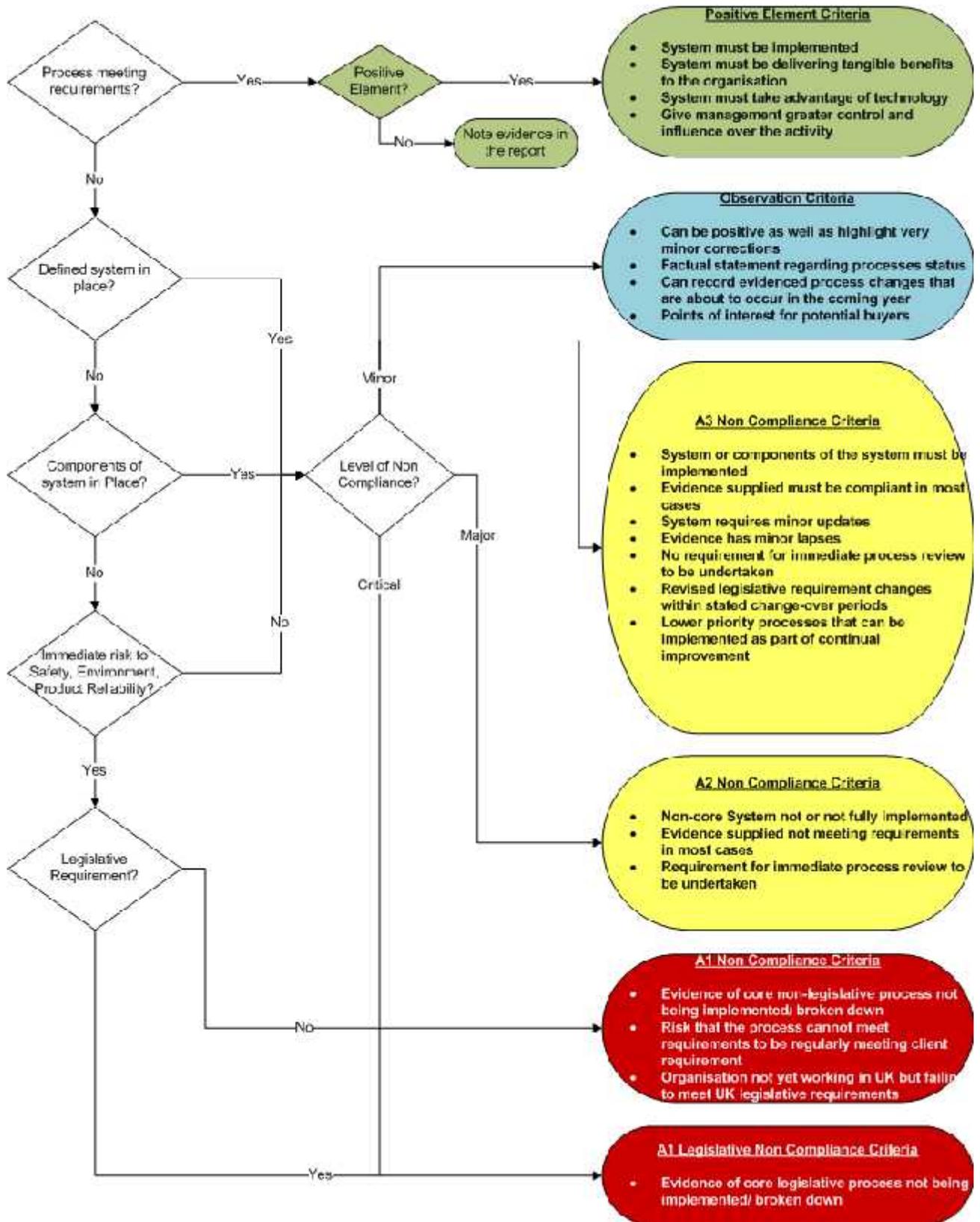
<PQQ Section(s) 13.8 to 13.10>

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?*

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

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

1. Construction (Design and Management) Regulations 2007
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 (Reissue 2012)
6. Control of Vibration at Work Regulations 2005
7. Control of Substances Hazardous to Health 2002
8. Site Waste Management Plan Regulations 2008
9. Environmental (Duty of Care) Regulations 1991
10. The List of Wastes Regulations 2005
11. Provision and Use of Work Equipment Regulation 1998
12. Lifting and Other Lifting Equipment Regulations 1998
13. Town and Country Planning (Environmental Impact Assessment) Regulations 1999
14. Environmental Noise Regulations 2010
15. Noise at Work Regulations 2005
16. Hazardous Waste Regulations 2005
17. Management of Health Safety (at Work) Regulations 1999
18. Work at Height Regulations 2005
19. Confined Spaces Regulations 1997
20. Producer Responsibility Obligations (Packaging Waste) Regulations 2007
21. The Safety Representatives and Safety Committees Regulations 1977
22. National Minimum Wage Regulations 1999
23. Working Time Regulations 2005
24. Agency Workers Regulations 2011
25. Environmental Permitting Regulations 2010

BEST PRACTICE GUIDANCE

1. ISO 9001 (2008) – Quality Management Requirements
2. ISO 14001 (2004) – Environmental Management Systems
3. OHSAS 18001 (2007) – Occupational Health & Safety Management Systems
4. ISO 27001 – Information Security Management Systems (2005)
5. Forest Stewardship Council (FSC) – Sustainable Timber Chain of Custody
6. FSC-STD-40-004
7. The Programme for the Endorsement of Forest Certification (PEFC) – Chain of Custody of Forest Based Products - Requirements (Annex 4)
8. Strategic Forum for Construction’s Health & Safety Code
9. Constructing Excellence– Constructing Excellence Requirements (Chapters 1-6)
10. BS EN 365:2004 - Fall Arrest & Fall Prevention Equipment
11. IND 367 - Fall arrest equipment made from webbing or rope
12. HSG - Guide to measuring health and safety performance
13. BS 8555 - Environmental Management – Work Book
14. HSG 61 – Health Surveillance at Work
15. Considerate Contractors Requirements
16. BRE Environmental Assessment Method - BREEAM
17. Constructing Excellence Advice
18. BS 25999 – Business Continuity Management
19. BES 6001 – Responsible Sourcing of Construction
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

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	20.11.11	S. Long	Protocol amended and updated following feedback from 2.0 release
2.2	14.03.12	W. Nelson	Protocol aligned with 2.2 release

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