

Audit & Review

Safety Audit Arrangements



AR-002-01

Safety Audit Procedure

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1. Introduction

The OTHR Management Committee is responsible for establishing and managing the audit program.

Three levels of auditing may be undertaken:

- **Internal compliance audits:** performed by OTHR members (members, rail safety workers, contractors) with relevant experience and knowledge of position responsibilities, but independent of the position being audited.
- **Internal Operational Audits:** performed by OTHR managers on a regular basis
- **External compliance audits:** performed by the Regulatory Authorities.

2. Purpose

To establish a procedure for conducting both internal and, where required, external audits to measure compliance and due diligence to all relevant Acts, Regulations and Standards that are appropriate to OTHR's operations.

3. Scope

Covers the total OTHR operations. Audits are scheduled to include all areas of the documented Safety Management System, including compliance to the relevant standards, legislation, regulations.

4. Definitions

Audit - a systematic examination against defined criteria to determine whether activities and related results conform to planned arrangements and whether these arrangements are implemented effectively and are suitable to achieve the organisations policies and objectives.

SMS – Safety Management System

WH&S – Work Health and Safety

5. Summary of the Process:

It is the responsibility of the Safety Manager to maintain a regular programme of Audits and to ensure that Audit findings are actioned in a reasonable period of time (by the due dates).

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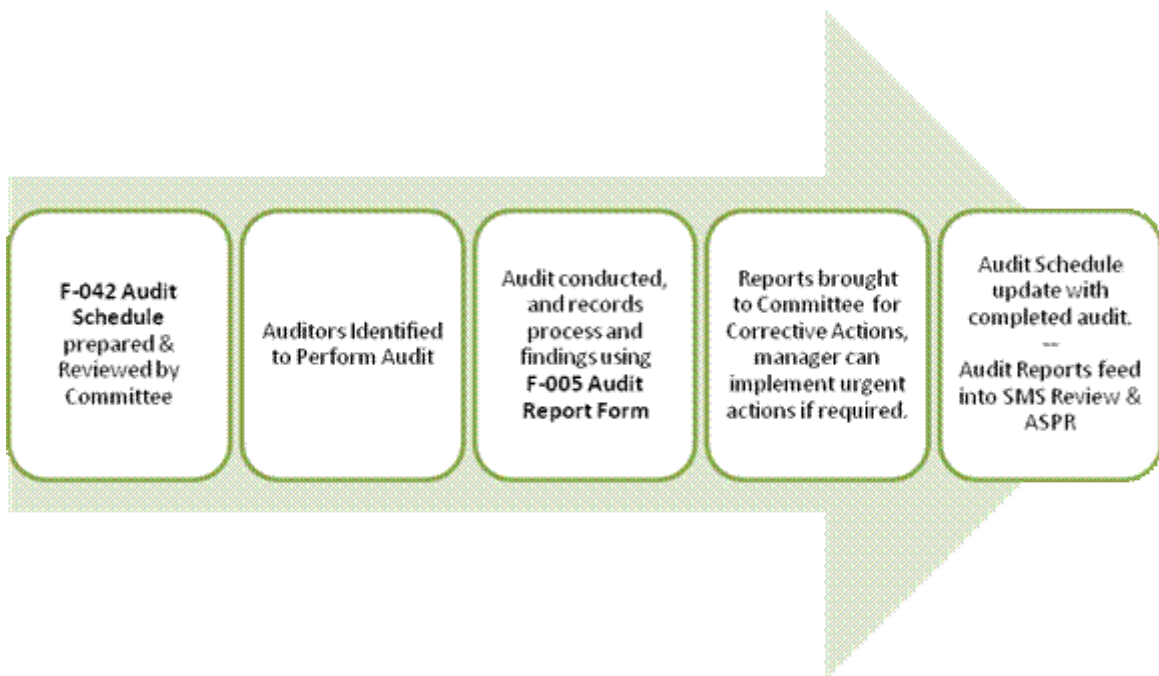
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Audits shall be defined as any audit that has been initiated from within the OTHR structure.

Areas include but shall not be limited to:

- a) SMS;
- b) System Procedures;
- c) Work Instructions;
- d) Policies;
- e) Management Plans



6. Audit Scheduling

The **Audit Schedule** will be maintained by the Safety Manager and shall indicate (where practical), the area, associated procedures, due date, proposed auditor(s).

The Management Committee prioritises the internal audit program considering various factors including:

- Previous audit findings and recommendations;

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- Recent rail safety performance; and
- Status and importance of activities to be audited, with particular consideration to giving high risk activities priority.

The schedule is updated with the date each audit is completed, and the audit program is monitored at meetings of the Management Committee to ensure that audits are proceeding according to schedule.

7. Planning

The audit programme shall be planned to take into consideration.

- a) status and importance of the processes and areas;
- b) results of previous audits.
- c) The audit criteria, scope, frequency and methods shall be defined. Policy and Procedures will be categorised as either:
 - Category 1 – Critical to company operations. Audited annually
 - Category 2 – Important to operational support. Audited every 2 years.
 - Category 3 – Others. Audited on an “as needs” basis.

Additional or more frequent Audits shall be scheduled in response to, Management Committee requests, where previous/current incidents require verification or where major changes have occurred.

The allocated auditor is responsible for planning, preparing, performing and reporting the audit. Each audit shall be assigned an identifying report number in succession.

It is the responsibility of the Safety Manager to maintain the Audit Schedule.

8. Method

The audit shall aim to uncover objective evidence to confirm that the process is being undertaken in accordance with the documented system.

This shall involve, but not be limited to, talking to persons, observations, viewing files and records, and making comparisons with documentation.

Auditees may be and/or include any client/employee/contractor that can give credence or input to the audit by way of providing proof through expertise, demonstrations or answering pertinent questions.

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Auditors shall, where necessary gain technical assistance from recognised authorities to assist in conducting the audit

Any discrepancies, inadequacies, suggestions for improvements, or positive feedback shall be noted for later reporting.

The *Audit Report Form F-002 Audit Report* will be utilised to:

- a) Summarise the auditor's findings;
- b) Provide positive feedback;
- c) Highlight deficiencies;
- d) Initiate corrective action;
- e) Assign responsibility;
- f) Set completion dates;
- g) Raise incident reports;
- h) Verify corrective actions;

Close and record the audit.

The persons nominated to conduct Audits are largely responsible for determining the content of the audit and preparing a check list of questions. The auditor will liaise with the relevant manager to gain access to the required documents and personnel.

The Auditor will study all related documents such as standards, forms, records, work instructions, previous audit reports and relevant incidents.

The *AR-002-03 Internal Audit Form* may be used by the auditor to make preparatory notes (i.e. questions, prompts etc.).

AR-002-05 Audit Report may be utilised to record findings from the audit.

9. Audit Reporting

Findings are documented on the *Audit Report Form AR-002-05* which will include details of the scope & audit, observations and non-conformances, a judgement about the compliance of the related documents and verification of correction actions performed as a result of previous audits.

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Any independent or external audits shall include the requirement to provide a written audit report.

Audit reports are given to the Manager and are reviewed at Management Committee meetings which will determine appropriate corrective actions. Corrective action items will be brought forward at each subsequent meeting until they are completed.

Once the audit report and incident reports are raised, the Safety Manager shall ensure a copy is made available to the Managers of the audited areas. The audit report and checklist shall be entered into the audit database.

The original audit report shall be filed by the Safety Manager.

Audit reports shall be further reviewed by the Management Committee.

Where findings from audits require urgent attention, the Safety Manager can assign corrective action items for the attention of relevant staff or arrange to convene a Management Committee meeting to review the findings and assign action.

10. Corrective Actions

Where a need for corrective action is found, is of a minor nature, can be readily rectified, poses no immediate risk and may not exist in other areas of the organisation, then corrective action should be taken immediately, and no Incident/Hazard report shall be necessary.

Where corrective actions are identified that cannot be immediately rectified, then they should be discussed with the Safety Manager, due dates for remedial action agreed upon and an *AR-002-06 Non Conformance Report* shall be raised and processed.

It is the responsibility of the Safety Manager to ensure the agreed actions are implemented and the desired outcome verified.

11. Follow Up Audits

Where there is a need for a follow up audit, it shall be scheduled by the Safety Manager to occur within a reasonable time period to allow for completion of corrective actions.

The follow-up Audit may only need to concentrate on the issue(s) that were previously non-conforming.