

مركز أبوظبي للصحة المهنية
ABU DHABI OCCUPATIONAL SAFETY AND HEALTH CENTER

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oshad

Abu Dhabi Occupational Safety and Health System Framework

(OSHAD-SF)

Mechanisms

Mechanism 4.0 – OSHMS Submission, Review and Approval

Version 3.1

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ABU DHABI PUBLIC
HEALTH CENTRE

مركز أبوظبي
للصحة العامة



Important Note:

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1. Introduction

This mechanism is designed to define the procedures to be utilized by OSHAD and Sector Regulatory Authorities (SRA's) to manage the review, approval and implementation of entities' developed OSHMS.

OSHAD shall manage the OSHMS approval and implementation process for Government Entities and where required, for those not currently under the control of an appointed SRA.

This mechanism has been designed to ensure fair, transparent and consistent implementation of the *OSHAD-SF*.

2. Requirements

2.1 OSHMS Submission Process

- (a) When an entity has completed the development of their OSH MS (documentation), it shall be submitted to the concerned SRA for review against the minimum requirements of the *OSHAD-SF*.
- (b) Submittal of the entity OSH MS shall include a completed and authorized *OSHAD-SF – Form C*.
- (c) If the entity utilizes a consultant to help develop their OSHMS, its name and Qudorat registration number shall be recorded on *OSHAD-SF - Form C*.
- (d) The consultancy office shall be registered and approved, at the time of submission, to perform this work by OSHAD. If the consultancy office is not registered and approved, at the time of submission, by OSHAD, the OSHMS shall be automatically rejected.

Note: It is the responsibility of the entity to ensure that the consultancy office utilized to develop their OSH MS is approved at the time of appointment through to completion and approval of the OSH MS.

- (e) Appendix 1 sets out the process of submission, review and approval of the individual nominated entities OSHMS.

2.2 Review and Approval of a Developed OSHMS

- (a) This process has been developed to ensure consistency in the evaluation of the *OSHAD-SF* minimum requirements that shall be incorporated in OSHMS developed by entities across all concerned Sectors.
- (b) Each of the minimum requirements of the *OSHAD-SF* has been incorporated in *OSHAD-SF – Form I* and weightings apportioned relevant to their importance for an effective and compliant OSHMS.
- (c) *OSHAD-SF – Form I – Evaluation of OSHSM* shall be completed by the SRA as part of the review process for all submitted OSHMS.
- (d) Where a consultant is utilized to develop the OSH MS, the SRA shall submit the completed *OSHAD-SF – Form I* to OSHAD. The final determined grade of each OSH MS developed by approved OSH Consultancy Office shall be recorded. OSHAD shall utilize this information as part of the annual renewal of the professional entity registration process.
- (e) The concerned SRA shall undertake review of submitted entities' OSHSM and provide official feedback to the entity within 60 calendar days from the submission date.
- (f) Following review of the OSHMS, the SRA shall provide the entity official feedback on the outcome of the OSH MS review. If the system is deemed non-compliant this feedback shall include specific information on any changes, updates or modification required.
- (g) Where approval is not awarded following two reviews of the submitted OSH MS (original submission and first revision) the concerned SRA shall meet with the entity to review the OSH MS, the feedback provided and any other issues related to the system. The review

meeting shall be documented and attended by a representative of the entity's top management.

- (h) Following this review meeting, a detailed action plan will be developed by the entity, including timescales, to bring the system up to approval standard.

2.3 Conditions for Approval

- (a) Approval of the entity's OSHMS is based on a desktop review of the submitted system.
- (b) For an entity to maintain official approval of its system it shall demonstrate it has implemented an effective OSHMS that is:
 - (i) compliant with all relevant Federal and Local Laws;
 - (ii) compliant with all requirements of the *OSHAD-SF*;
 - (iii) implemented starting within one month of the approval date;
 - (iv) monitored with performance reports submitted to the SRA on quarterly basis in accordance with *OSHAD-SF* requirements; and
 - (v) Undergoing external 3rd party audit by an auditing company registered with OSHAD, within 12 months from system approval date and annually thereafter, with the audit reports submitted to the SRA.

2.4 Certificate of Compliant OSHMS

- (a) OSHAD has developed an "Approved OSHMS Certificate" template to be issued to entities upon approval of their OSH MS.
- (b) The Approved OSH MS Certificate shall be issued for a 3 year timescale.
- (c) Each approval certificate shall highlight key conditions set by OSHAD for OSHMS approval, as per section 2.3 of this document.
- (d) SRA's shall manage the process of issuing the standard Entity OSHMS certificates in their concerned Sector.
- (e) The Approval Certificate shall be re-issued by the end of the 3rd year in accordance with the requirements of section 2.5 of this document.
- (f) The Approval Certificate shall be revoked at any time by the SRA in case of non-compliance with the implementation requirements of the *OSHAD-SF*.
- (g) The SRA shall submit the list of approved entities, including the approval certificate details to OSHAD on quarterly basis.

2.5 OSHMS Approval Certificate Renewal

- (a) Each SRA shall develop, document, implement and maintain a systematic procedure for the renewal of entities' approved OSHMS certificates.
- (b) This procedure shall, at a minimum, address the following areas:
 - (i) Identification of renewal dates;
 - (ii) Review process;
 - (iii) Criteria for renewal, including consideration of requirements set within section 2.5(d) of this document;
 - (iv) Cancellation / suspension process as per the requirements of clause 2.5.1; and
 - (v) Feedback, to entity and OSHAD.
- (c) Approval Certificate shall be re issued with a three year timescale
- (d) When reviewing an entity's approval certificate, the concerned SRA shall ensure that following criteria are, as a minimum, examined:
 - (i) performance Reporting requirements, as required by *OSHAD-SF – Mechanism 6.0 – OSH Performance Monitoring and Reporting*;
 - (ii) incident reporting requirements as required by *OSHAD-SF - Mechanism 11.0 – OSH Incident Notification, Investigation and Reporting*;
 - (iii) annual external third party audits completed and submitted as per the requirements of *OSHAD-SF – Element 8 – Audit and Inspection*;
 - (iv) results of SRA audits, inspections or other tools as decided by the SRA; and
 - (v) noncompliance corrective action plans submitted as required and implemented as agreed.

2.5.1 Criteria for Cancellation or Suspension of an Approval Certificate

- (a) Each SRA shall document, as part of the procedure required by Section 2.5 the criteria for cancellation or suspension of an entity's approved OSHMS certificate.
- (b) As a minimum the criteria shall include the following:
 - (i) non-compliance to OSH Performance reporting requirements;
 - (ii) non-compliance to serious incident reporting requirements;
 - (iii) non-compliance to Annual external third party audit requirements;
 - (iv) Non Compliance to *OSHAD-SF* requirements (evidenced by internal or external audits, major noncompliance(s), OSH performance reporting data, incident reports and statistics);
 - (v) failure to implement or comply with agreed timescales for submitted corrective action plans;
 - (vi) entity ceases operation / trading; and
 - (vii) change of legal name of the entity as identified on the trade license.

2.5.2 Process for Cancellation or Suspension of an Approval certificate

- (a) The SRA shall monitor the performance of all approved entities within the concerned sector for implementation of OSHAD-SF requirements
- (b) Prior to suspension or cancellation of an approval certificate, the SRA shall officially inform the entity of the proposed cancellation or suspension along with the associated evidence of the non-compliance.
- (c) The SRA shall set a timescale, no longer than 2 weeks for the entity to contact the SRA and agree an action plan to rectify the non-compliance.
- (d) In the event a corrective action plan is agreed, the entity's approved OSHMS certificate shall be suspended until the plan has been fully implemented.
- (e) The SRA shall verify the implementation of the corrective actions through audit, inspection or other tools as decided by the SRA. If the corrective actions are verified and fully implemented, the SRA shall reissue an approval certificate for the entity's OSHMS.
- (f) If the SRA is unable to verify the implementation of the corrective actions the SRA shall cancel the approval certificate and officially inform the entity of the required actions.
- (g) In the event that an entity is unable to agree an action plan or does not make contact, the SRA shall cancel the approval certificate. The SRA shall officially contact the entity to inform them their certificate is cancelled and of the required actions.
- (h) OSHAD can, at any time, request an SRA to cancel or revoke an approval certificate, following consultation with the concerned SRA, if there is sufficient evidence of poor performance.
- (i) If an entity has the OSHMS approval cancelled they shall:
 - (i) return the original "Approved OSHMS Certificate" to the concerned SRA;
 - (ii) officially inform relevant stakeholders, in particular stakeholders that require *OSHAD-SF* compliance in contractual arrangements and agreements; and
 - (iii) immediately remove any reference to compliance to the *OSHAD-SF* from entity publications (including webpages).
- (j) The SRA shall formally notify OSHAD, within 3 working days from the date of cancellation, of the cancellation / suspension and its justification.

2.6 Process to Appeal Cancellation or Suspension of Approval Certificate

- (a) An entity may file an appeal with OSHAD within 20 working days from the date of receipt of the notification from the SRA to cancel / suspend their approval if they have reasonable grounds to believe that the suspension or cancellation was unjust.
- (b) The appeal filed by the entity shall provide clear justification and supporting evidence as to why they believe that the suspension or cancellation was unjust.
- (c) OSHAD shall review each appeal that is filed for legitimacy and validity, and shall provide an initial response, in writing, to the applicant. In its response OSHAD shall state decision to either:
 - (i) proceed with the appeal, together with identification of any further requirements from the applicant, or
 - (ii) deny the appeal, together with justification for denial.
- (d) If the appeal is deemed valid, OSHAD shall review all the evidence presented and where required meet with all concerned parties.
- (e) Following the review, a decision shall be made by the Director General of OSHAD.
- (f) The decision of OSHAD shall be deemed final in all appeals.

3. OSHAD-SF - Standard Forms

Form C – Submission of OSH MS (available at www.oshad.ae)

This form is to be used when the nominated entity has completed the development of their OSHMS. It is to be submitted in conjunction with documents that make up the nominated entity's OSHMS. The entity is to highlight on the form the elements of their OSHMS that meet the minimum requirements of the OSHAD-SF.

Form I – OSH MS Evaluation Form (not available on website)

This form summarizes the minimum requirements of the OSHAD-SF and shall guide SRA reviewers on assessing the compliance of the submitted system. It has been designed to provide a level of consistency for the review and to supply feedback to the Competent Authority on approved OSH Consultancy Offices performance in developing an OSHMS.

4. Document Amendment Record

Version	Revision Date	Description of Amendment	Page/s Affected
2.0	Feb 2012	New Document	N/A
3.0	1 st July 2016	Change of Logo	All
		Change from AD EHS Center to OSHAD	throughout
		Change of document title: AD EHSMS RF to OSHAD-SF	Throughout
		EHS changes to OSH	Throughout
		Minor amendments and editorial changes to provide further clarification without changing requirements.	Throughout
		Introduction updated to provide further clarity on scope	3
		Clause(s) 2.1(c) & (d) added	4
		Clause 2.2(d), (e), (f) & (g) deleted and Replaced with 2.2 (d), (e), (f), (g) & (h)	4
		Clause 2.3(b)(iii),(iv) & (v) added	5
		Clause 2.4 updated	5
		Old Clause 2.5 deleted and replaced with Clause 2.5 and 2.6	6-8
		Figure 3.1 deleted and replaced with Appendix 1	11
Old Appendix A deleted	N/A		
3.1	19 th March 2017	Minor editorial changes to provide further clarification without changing requirements	Throughout

Appendix 1: OSHMS Submission, Review and Approval Flowchart



