

COMAH Competent Authority

Assessment and Inspection Procedure

Author: COMAH Remodelling Project Output

Target Audience: All COMAH competent authority staff

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1. Changing the Regulatory Activities under COMAH Remodelling

- 1.1 The purpose of this document is to guide staff through the remodelled procedures for COMAH safety report assessment and inspection.
- 1.2 The procedures provide a step by step process to clarify what you need to know about:
 - a) the main regulatory changes arising as a result of COMAH Remodelling;
 - b) individual roles and responsibilities under the remodelled regime;
 - c) changes to the recording of assessment, intervention plans and inspection on COIN, and use of revised templates and documentation.

2. Summary of Changes to Assessment and Inspection

- 2.1 Key elements of the remodelled assessment process for Safety Report (SR) five year revisions are:
 - a) introduction of formal pre-receipt procedures: engagement with operators at least six months prior to submission;
 - b) assessment of revisions by Predictive Specialist, Health and Safety Executive (HSE) Regulatory Specialist and Environment Agency (EA) Inspector only;
 - c) tighter arrangements for the timing, pace and conclusion of assessment process (assessment conclusion within 4 months of receipt).
- 2.2 Key elements of the remodelled inspection process are:
 - a) overall greater focus on inspection;
 - b) post-assessment 'read through' of safety report revisions by Competent Authority (CA) Discipline Specialists (within 3 months of assessment conclusion) in preparation for first post-assessment inspection;
 - c) specialist generation of 'significant issues register' as input to intervention planning process (to identify gaps in information and items for verification);
 - d) increased availability of Discipline Specialists to verify demonstrations in the safety report on the ground and identify specific topics to pursue in subsequent years;
 - e) greater emphasis on multidisciplinary team inspections where appropriate;
 - f) greater emphasis on inspection of CA strategic topics, and reporting on standards of compliance.

3. Introduction to Revised Procedures

- 3.1 The following procedural steps will be used by the CA to support assessment and inspection. The steps are described more fully in the remainder of the document to provide guidance on:
 - roles and responsibilities;
 - timescales;
 - key documentation needed to record information;
 - what to record on COIN.

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Part 1 - Safety Report Assessment Procedures

4. Application

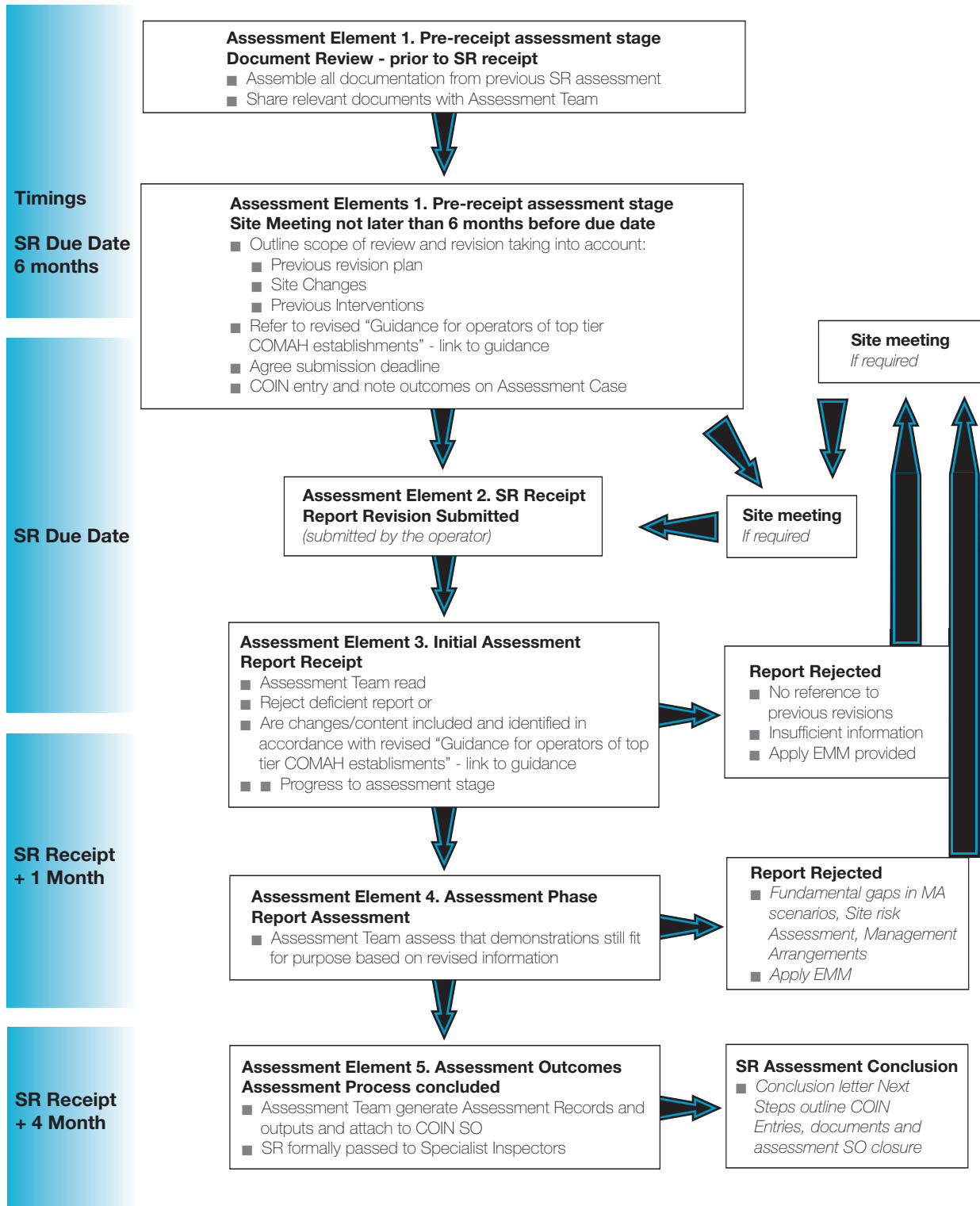
- 4.1 These arrangements apply to all Safety Reports submitted to the COMAH CA following a five year review by the COMAH Operator as required by Regulation 8 (1) (c) of the COMAH Regulations.
- 4.2 Reports modified because of changes to the safety management system (Regulation 8 (1) (a)) or to take into account new facts or new technical knowledge (Regulation 8 (1) (b)) should also be dealt with under these arrangements unless the circumstances of the revision dictate that full Discipline Specialist assessment is necessary under existing Safety Report Assessment Manual (SRAM) procedures.
- 4.3 The decision to undertake full Discipline Specialist assessment for Regulation 8(1) (a) and (b) reports should be made by the **Regulatory Inspector** in consultation with **Discipline Specialist** and **Agency** colleagues when the operator advises the CA of the scope and extent of the revision. Discipline Specialist resource allocation to Regulation 8 (1) (a) and 8 (1) (b) assessment should be signed off by the **Regulatory Team leader** in agreement with the **Specialist Band 2 Team Leader**. Where agreement cannot be reached about allocation of Discipline Specialist resource, the decision should be referred to the **Band 1 Head of Unit** for resolution.
- 4.4 New Safety Reports submitted under COMAH Regulation 7 (new notifications or sites coming into scope of the regulations) and modification reports (under COMAH Regulation 8 (4)) will be assessed as per the existing SRAM procedures available on the Intranet.
- 4.5 Further advice may be sought from the **CA Business Support Team** on the application of assessment procedures.

5. Purpose of assessment of five year Review Safety reports

- 5.1 The purpose of assessment of revised COMAH safety reports is:
- a) to ensure that operators continue to show that they are managing Major Accident Hazards effectively following the five year review and revision process of the site safety report as required by COMAH;
 - b) to ensure that the information required by Schedule 4, Part 2 of the Regulations is present, up to date, remains fit for purpose taking account of the site review of activities, and that site risks continue to be controlled as low as reasonably practicable;
 - c) to ensure that the report continues to make the demonstrations required by Schedule 4, Part 1 of the Regulations, although verification of these demonstrations will now be part of the site intervention process.
- 5.2 At the five year revision stage of a safety report, the Competent Authority will assess **any changes** to the safety report in order to ensure that the information within the report still reflects activities on the site, and continues to satisfy the requirements of the COMAH Regulations.

6. Key changes to the Revised Assessment process

- 6.1 A significant change is the introduction of pre-receipt procedures at least six months prior to submission of revised safety reports. This will involve engagement with the operator by **Regulatory** and **Agency Inspectors** with advice from Discipline Specialists if required to agree the scope, depth and presentation of the review and report revision. A submission deadline will then be agreed. Guidance to operators on CA expectations regarding the content and presentation of revisions has been published on the HSE website.
- 6.2 On receipt of the safety report, the **Regulatory** and **Agency inspectors** will undertake a completeness check within four weeks to confirm that the report contains the expected agreed revisions.
- 6.3 **Regulatory, Agency Inspectors** and **Predictive Specialists** will then carry out formal assessment of the changes and the continued suitability of major accident scenarios, safety management systems and site risk assessment. **Discipline Specialists will not be involved in the formal Assessment Process.**
- 6.4 The report can still be rejected at the completeness check or during the assessment stage in line with current guidelines on enforcement ('Use of Enforcement Management Model By the COMAH Competent Authority'). Otherwise, the assessment will be concluded and a conclusions letter sent to the operator within four months of the report submission. This contrasts with the current six month assessment period. This marks the end of the formal safety report assessment and transition to the inspection phase.
- 6.5 The Assessment Manager for the assessment process will be the **Regulatory Inspector**, subsequent references refer to **Regulatory Inspector** and not to Assessment Manager. In cases where the hazards presented by a site are purely environmental in nature, the Assessment Manager role will still normally reside with the **Regulatory Inspector** but the **Agency Inspector** may take the lead at pre-receipt meetings, report writing and intervention planning.



7. Procedures for five year revision safety report assessment

- 7.1 The overall process for assessment and post-safety report inspection planning has been divided into elements. Each of these elements is broken down into a number of key steps that identify the main actions, people responsible plus any supporting documentation and COIN activity required to complete the process.
- 7.2 The elements in the new procedures are:
- **Assessment Element 1. Pre-receipt assessment stage**
 - **Assessment Element 2. Safety Report Receipt**
 - **Assessment Element 3. Initial Assessment**
 - **Assessment Element 4. Assessment Phase**
 - **Assessment Element 5. Assessment Outcomes**
- 7.3 This marks the end of 'Assessment' Activities. The role of Discipline Specialist Inspectors in the safety report review, as part of inspection planning, is defined in Inspection Element 2: Safety Report Read Through (as outlined on page 21).

8. Assessment Element 1 – Pre-receipt Assessment stage

Pre-planning

- 8.1 Operational Teams should maintain accurate records of the five year resubmission dates for safety reports under their control. A list of due dates for safety report submission has been generated centrally for the next three years (see 'COMAH Remodelling – Safety Report submission dates – HID CI, SI' TRIM ref 2009/405733).
- 8.2 **Team Administrators** will maintain the spreadsheet at local (Team) level showing the safety report information, five year revision due date and the responsible Regulatory Inspector.
- 8.3 The **Regulatory Inspector** will ensure that future revision dates are included in the Site Intervention Plans for TT sites. This is very important for future resource planning activities.

Setting up COIN records

- 8.4 The **Team Administrator**, in consultation with the **Regulatory Inspector**, will regularly review the assessment due date timetable to monitor when safety reports are due to be revised.
- 8.5 No later than **SIX months** prior to the SR revision due date the **Team Administrator** will raise a five year Review Safety Report Case.
- 8.6 The **Team Administrator** will allocate the Case to the **Regulatory Inspector**. Guidance on setting up COMAH Safety Report records on COIN is given in 'How to record COMAH Safety Reports on COIN'.

Pre-receipt Activities

Timing

- 8.7 Continued dialogue with the operator during the intervention cycle will inform the **Regulatory Inspector** as to the best time for pre-receipt activities to begin, but the site visit should be **no later than six months prior to submission of the report**.

Collation and review of previous documents

- 8.8 The **Regulatory Inspector** will assemble previous safety report documentation where available. This will include:
- previous assessment reports;
 - previous conclusions documentation including revision plans;
 - revised documentation from previous assessment outputs, if submitted prior to the upcoming review and revision date.
- 8.9 A review of these documents will be part of the preparation for the engagement with the site. The **Regulatory Inspector** should forward any previous predictive assessments to the allocated Predictive Inspector and previous environmental assessments to the Agency Inspector.
- 8.10 The **Regulatory Inspector** should consult as necessary with **Agency Inspectors** and **Discipline Specialists** at this stage in order to get as much relevant information from previous assessment documents as possible.

Recording the documentation review on COIN

- 8.11 The COIN five year revision assessment case will be used to capture pre-receipt activities. It is not necessary to attach previous documentation to the case but reference to the documentation reviewed should be made in the Notes field.

Site meeting

- 8.12 The **Regulatory Inspector** should organise a site meeting with the operator as soon as possible after documentation has been collected and reviewed. It is important that the site has sufficient time to review and revise their safety report to ensure all required amendments will be present and in a format that will allow efficient assessment by the CA.
- 8.13 Where a revision plan was issued following previous assessment, it should form a key agenda point for the on-site discussions with the operator. The **Regulatory Inspector** should ensure that the operator has a copy prior to any site discussions.

- 8.14 The meeting should be arranged at least **six months prior** to the due date so that the discussions can be incorporated by the site operator during the review of their safety report. Discussions should start before this where there has been significant inspection activity on the site or the site is particularly complex.

Who should attend the meeting?

- 8.15 The meeting should be led by the **Regulatory Inspector**. The **Predictive** and **Agency Inspectors** should attend the meeting where appropriate depending on the complexity of the site, local site knowledge, anticipated changes to the safety report and availability of CA personnel.
- 8.16 Personnel from the operator should include any representatives from consultants if they are being used for the review and revision process.

Meeting Agenda

- 8.17 The core discussion topic at the 'pre-receipt' meeting will be the scope of and reasons for any revisions to the report.
- 8.18 The agenda should include:
- a) plant/site changes (including organisational) and their significance for SR revision;
 - b) previous safety report revision plan supplied by the CA;
 - c) relevant key interventions since last submission that may have an effect on the SR content;
 - d) progress with and incorporation of COMAH Improvement Plans included in previous SR submissions;
 - e) taking the operator through the updated Review & Revision Guidance instructions (i.e. the 'Guidance to Operators of Top Tier COMAH Sites – Review and Revision of COMAH Safety Reports') which spells out the steps that operators should take when reviewing their reports. Using this guidance is KEY to efficient assessment;
 - f) the revised process for safety report assessment and Discipline Specialist verification inspections;
 - g) current arrangements for requesting applications for exclusion of material from the public register version of the safety report document on the grounds of commercial and/or personal confidentiality ('COMAH: Public Registers, Disclosure of Information and the Environmental Information Regulations 2004').

Meeting Outcomes and Outputs

- 8.19 At the conclusion of the pre-receipt meeting the CA and operator should be able to:
- agree the scope and depth of any revised information required;
 - agree how the revised information will be presented in the report;
 - agree a submission deadline date. The legal duty is for the site operator to complete the SR Review by the fifth anniversary of the previous submission and to revise the report "forthwith". Existing guidance on the submission of five year safety report revisions(SPC/PERM/23), 'Review and revision of COMAH safety reports', allows some flexibility for submission dates of up to three months from the due date;
 - agree the required number of copies needed for the assessment phase. Three copies are needed for assessment and should be submitted to their local HSE office on or before the agreed due date. Operators should also be advised that further copies will be required at the Discipline Specialist Read Through stage. The lead time for provision of further copies should be identified so that they can be requested in time for the Discipline Specialist Read Through immediately after the assessment stage.
- 8.20 A record of the site visit should be written by the **Regulatory Inspector** on the Word template 'Regulatory Inspector Contact Report 5 Year Review Safety Report Pre-Receipt Activities'.
- 8.21 A covering letter should be sent to the operator by the **Regulatory Inspector** confirming what has been agreed at the meeting, the agreed submission date and the number of copies required. A framework layout is included in the appendices to this procedure (see [Appendix 5](#)). This letter is based on Framework Letter 1 in SRAM Section 4 Appendix 4.6 but has been adapted to reflect the new assessment procedures.
- 8.22 The covering letter and the Inspection Contact Report should be attached by the **Regulatory Inspector** to the pre-receipt COIN five year review and revision case **within one month of the visit** with a suitable note. The Note Summary line should include the phrase 'Pre-receipt Activities'.
- 8.23 The letter and Inspection Contact Report should be forwarded to all relevant discipline specialist inspectors for the site by the **Team Administrator**. (This information will be useful for future structured reading of the SR).

The following guidance on Assessment Elements 2 to 5 sets out the main changes to the current SRAM arrangements for 5 year Safety Report revisions. The Team Administrator and Assessment Team (Regulatory, Agency and Predictive) should continue to consult existing guidance in Sections 1 to 7 of SRAM to ensure that all necessary steps are covered.

9. Assessment Element 2. Safety Report Receipt

- 9.1 The purpose of this element is to document the receipt of safety reports, update COIN records and ensure timely distribution of SR copies.

Booking in Reports

- 9.2 Existing arrangements for booking in five year revision safety reports will not change in the remodelled approach. **Section 4: Assessment Procedures of SRAM - Element 2.1 – Processing Arrangements for safety report documents** should be followed by:
- a) **all personnel** working with the safety report to ensure adequate security arrangements for storage and handling of the document;
 - b) the **Team Administrator** to ensure that the report is documented and distributed to the appropriate inspectors.

COIN Recording

- 9.3 The **Team Administrator** should create a five year review and revision assessment service order in accordance with guidance 'How to record COMAH Safety Reports on COIN'. The service order should be related to the five year review and revision SR assessment case and allocated to the **Regulatory Inspector**.

Providing Safety Report Documents for the Public Register

- 9.4 Existing arrangements for considering application for exclusion of information from the public register will not change in the remodelled approach. **Section 4: Assessment Procedures of SRAM - Element 2.2 – Providing safety report documents for the public register and Appendix 4** should be applied to determine applications for exclusion of material from the public register version of the safety report document on the grounds of commercial and/or personal confidentiality.
- 9.5 **Team Administrators, Regulatory and Agency Inspectors** should note the 28 day deadline for consideration of such applications.

Enforcement Expectation

- 9.6 The Enforcement Expectation for operators failing to submit a safety report revision on time is the same as in the original SRAM. The **Regulatory Inspector** should refer to **Section 4: Assessment Procedures of SRAM – Element 2.3 - Failure to submit report or notify details of 5 year review/revision** and 'Use of the Enforcement Management Model by the COMAH Competent Authority' for guidance on the new EMM Guidance.

10. Assessment Element 3. Initial Assessment

Timings

10.1 Initial assessment should be completed within **four weeks** of receipt of the safety report.

Initial Assessment Activities

10.2 The purpose of this element is to ensure that the operator has supplied the relevant information in the format agreed during the pre-receipt visit.

10.3 The **Assessment Team (Regulatory, Predictive and Agency Inspector)** will review the content of the submitted report to ensure that the relevant sections and layouts are in logical order and still cover the headline requirements of COMAH Schedule 4 pt 2. At this stage the team is looking for an easily understandable setting out of the revisions in the report.

10.4 The **Assessment Team** will review the new inclusions and revisions within the safety report to ensure that they are suitable for assessment and are in line with the pre-receipt discussions. Checks should be made against previous revision plans and review and revision guidance to confirm that agreed changes have been included and that the changes are presented logically for ease of assessment. At this stage the Team is checking the presence and layout of the amended information.

10.5 During this process, communications should be maintained within the **Assessment Team** to ensure that the initial check has not shown any immediate problems.

Enforcement Expectation

10.6 Consideration should be given to returning the report and issuing an Improvement Notice if information is obviously missing that was agreed during the pre-receipt visit. The severity of the deficiency should be tested through the HSE Enforcement Management Model (as outlined in the 'Use of the Enforcement Management Model by the COMAH Competent Authority Guidance'). Scottish Environment Protection Agency (SEPA) officers should use SEPA's enforcement policy to determine if and what enforcement action is necessary. This course of action should be agreed by the **Assessment Team** and HSE/Agency Team Leaders.

10.7 It is not possible to enforce where information has been included but is not in a format that can be assessed easily since the COMAH Regulations do not specify a format for information sent to the CA. However this issue should be related to the Operator at the end of initial assessment.

Closing out initial assessment phase

10.8 The outcome of the initial assessment phase should be recorded by the **Regulatory Inspector**, with agreement from the **Assessment Team**, on Word Template (see [Appendix 3](#)).

- 10.9 The Regulatory Inspector should inform the operator by letter that the SR has been progressed to the assessment phase. Any comments regarding the format of the report should be included in this letter. Existing 'Framework Letter 3' in Section 4 Appendix 4.6 of the current SRAM can be used as a basis for this communication.
- 10.10 At this stage the **Regulatory Inspector** should take account of the lead time for additional SR copies and advise the operator if further copies are required.

COIN Recording

- 10.11 The completion check report and any supporting letter should be attached to the 'Initial Check by Assessment Team' service order line on the COIN five year review and revision safety report service order.

11. Assessment Element 4. Assessment Phase

Timings

- 11.1 The assessment process should be concluded, including communications to site, **within four months of initial receipt of the Report.**

Assessment Activities

- 11.2 Assessment should focus on the changes to the report from the previous submission in order to ensure that the report continues to demonstrate the suitability of major accident scenarios, the safety management system and site risk assessments.
- 11.3 Full use should be made of previous assessment documentation and findings. Assessment/Demonstration criteria can be labelled as 'criterion already met' if it has been previously assessed and there are no indicated changes to systems or procedures that affect the criterion following the site review and revision process.

Regulatory Inspector

- 11.4 The **Regulatory Inspector** will assess the revised report focusing on the changes to the report using the existing safety report assessment guidance documentation available in SRAM Sections 9 (Descriptive), 11 (MAPP/SMS) and 14 (Emergency Preparedness) as outlined in SRAM. Assessment outcomes should be recorded on the existing individual Word template for each of the sections.

Agency Inspector

- 11.5 The **Agency Inspector** will assess the revised report focusing on the changes to the report using the revised assessment guidance in SRAM Section 13 'Guidance for Environmental Assessment'. Environmental assessment outcomes should be recorded on the revised SRAM Section 13 Word template.
- 11.6 The environmental assessment should focus on:
- a) review of hazard analysis including the review of potential major accident scenarios, with a view to checking that the MA representative set is still appropriate. Where there is a variation to any MATTE scenario, then the appropriateness of the site environmental risk assessment should be reviewed;
 - b) review of risk assessment, considering whether the site risk assessment is still relevant and valid for current site operations and whether the methods used are still proportionate to the nature of the hazards. Account should be taken of whether there has been a full review of any changes to surrounding land use or designation, or any changes to conservation status of surrounding areas. The **Agency Inspector** may seek advice from the **Predictive Assessor** when assessing the frequency presented in the risk assessment. This will ensure a consistent CA approach to the assessment process.

Predictive Assessor

- 11.7 The **Predictive Inspector** will assess the revised report focusing on the changes to the report using the assessment guidance in SRAM Section 10 'Predictive Aspects'. Predictive assessment outcomes should be recorded on the SRAM Section 10 Word template.
- 11.8 The Predictive Assessment should focus on:
- a) review of hazard analysis, including the review of potential major accident scenarios, with a view to checking that the MA representative set is still appropriate. Where there is a variation to the MA scenario set, the appropriateness of the site predictive risk assessment should be reviewed;
 - b) review of risk assessment, considering whether the site risk assessment is still relevant and valid for current site operations and whether the methods used are still proportionate to the nature of the hazards. Where the hazard level has increased (e.g. because of changes on site or in response to new facts or technical knowledge), a more rigorous risk assessment process should be demonstrated.

Assessment Enforcement Expectation

Minor Gaps in Information

- 11.9 Further information should not be requested for minor gaps in information but should be raised with the operator at the end of the assessment process.

Key Information Missing

- 11.10 Consideration should be given to serving an **Improvement Notice** if key information is missing that requires the safety report to be resubmitted. The severity of the deficiency should be tested through the Enforcement Management Model, as outlined in the 'Use of the Enforcement Management Model by the COMAH Competent Authority Guidance'. SEPA officers should use SEPA's enforcement policy to determine if and what enforcement action is necessary. The course of action should be agreed by the **Assessment Team** and the relevant **Line Managers** on the EMM-C form.

Potential Serious Deficiencies

- 11.11 Where potential serious deficiencies or omissions in the measures described in the safety report are identified, it will be necessary for one or more of the **Assessment Team** to visit the site. The site visit would be outside the normal site intervention planning process and would be used to verify conditions on site. A COMAH Prohibition Notice should be considered under COMAH Regulation 18. For guidance on Serious Deficiency and Prohibition under Regulation 18 COMAH see SRAM Section 8 paras 26-31 and Chapter 6 of the COMAH Manual.

Link to the inspection cycle

- 11.12 **Assessment Team** members should identify any key inspection agenda items that result from assessment and include them at the end of the assessment record template.
- 11.13 The inspection topics should be prioritised as either for *inspection in the first year* of the Intervention Plan or to be considered *in subsequent years* of the Intervention Plan. First year topics will be included in the intervention planning process following conclusion of the assessment process and any subsequent years topics will be reviewed as part of the annual Intervention Plan review.

12. Assessment Element 5. Assessment Outcome

Timings

- 12.1 The assessment process should be concluded, including communications to site, **within four months of initial receipt of the Report.**

Assessment Outcome Activities

- 12.2 The Assessment Team should meet to agree and record assessment conclusions using the Team Assessment Conclusions Record (5 Yr Review Reports) template. The Assessment Team should agree:
- whether the report contains the minimum information required by Schedule 4 part 2;
 - how well the demonstrations required by Schedule 4 part 1 **continue to be made** for the site taking into account local site knowledge, the scope and depth of any report changes and any additional intelligence obtained from the operator during the assessment process;
 - whether or not serious deficiencies on site are indicated;
 - whether there are any issues arising from the assessment of the revised safety report that should be included in the inspection planning process for the site in particular which issues should be dealt with by inspection in the first year of an updated Intervention Plan;
 - whether a revision plan is required at this stage of the process.
- 12.3 The Line Manager to the Regulatory Inspector should sign off the Team Assessment Conclusions record.

Addressing inadequate demonstrations

- 12.4 Where inadequate demonstrations are apparent from regulatory, agency or predictive assessment (e.g. SMS gaps, MA scenarios missed, inappropriate modelling etc), a site visit may be arranged if immediate amendments are required to the SR or to establish a revision timetable with the operator.
- 12.5 Any revision work required from Operators should not stop the assessment conclusions process since assessments can be concluded with reports needing revision.

Conclusions Letter

- 12.6 The **Regulatory Inspector** will generate a conclusions letter outlining the outcomes of the assessment process as well as the limits of the process. Reference should be made to the ongoing involvement of the safety report in the inspection process and continued demonstrations of major accident control by the site operator. Reference should also be made to the timetable for the inspection planning process and intervention plans, which will be shared with the operator. Any immediate revision plan from the assessment process will be included with this conclusions letter. A framework layout and example letter is included in the appendices to this procedure (see **Appendix 5**). This letter is based on Framework Letter 7 in SRAM Section 4 Appendix 4.6 but has been adapted to reflect the new assessment procedures.

Distribution of Safety Report and Assessment Records

12.7 When the **Assessment Team** is satisfied that the safety report is suitable to proceed to the inspection planning stage, the **Regulatory Inspector** will arrange with the **Team Administrator** for copies of the safety report and assessment documentation to be forwarded to the allocated Discipline Specialists in order for them to begin the Inspection Planning read through.

COIN recording

12.8 The **Regulatory Inspector** will attach to the assessment service order, with links to the appropriate SO line, the following documentation:

- a) descriptive assessment documents and summary;
- b) MAPP/SMS assessment documents and summary;
- c) agency assessment documents and summary;
- d) predictive assessment documents and summary;
- e) team conclusions document;
- f) conclusions letter to duty holder;
- g) other conclusions information such as revision Items and prioritised inspection topics.

This is the end of formal assessment of the safety report.

Part 2 – Inspection Procedures

13. Application

13.1 These procedures apply to the inspection of COMAH lower tier and top tier sites.

14. Purpose of COMAH inspection

14.1 The objective of the COMAH inspection programme is to verify by means of site inspection that:

- a) COMAH site operators have in place the appropriate measures to control and minimise the risk and consequence of major accident hazards (to people and the environment);
- b) information provided by the operator adequately reflects conditions in the establishment as appropriate.

14.2 COMAH Regulation 19 requires the Competent Authority to organise an adequate system of inspections of establishments or other measures of control appropriate to the type of establishment concerned. The inspections of control measures should not be dependent upon the receipt of a safety report. The inspections should target areas to prevent and mitigate major accidents and verify safety report information.

15. Key changes to inspection

15.1 For top tier sites in an assessment year specialists will now read through the safety report as part of the inspection process and verify the safety report demonstrations onsite as part of an inspection. This approach will increase the availability of specialist effort onsite and increase the ability to hold operators accountable for how they actually assure process safety against the information they have provided in their safety report. The change will apply to all disciplines of Specialist, with the exception of Predictive Specialists who will maintain a role in the assessment of five year review safety report submissions.

15.2 Inspections outside of the assessment year will focus more on delivery of the CA strategic priorities but with scope for addressing residual safety report and site-specific issues. The centrally driven strategic priority topics will have clear success criteria detailed in delivery guides (as featured on the HSE intranet site).

15.3 Success criteria for site-specific inspection topics will be determined by the inspection team at the inspection planning stage.

15.4 Intervention plans for the 2010-11 work year will focus on addressing existing legacy, with strategic priorities and other site specific issues addressed as resource permits. See SPC/Admin/70 'Review of COMAH Intervention Plans in December 2009 – transition to the remodelled regime' for guidance.

15.5 In subsequent years the inspection programme will be used to deliver the CA's priorities, placing a greater emphasis on cross-cutting programmes of inspection to assess strategic priority topics, and report on standards of compliance in a common format.

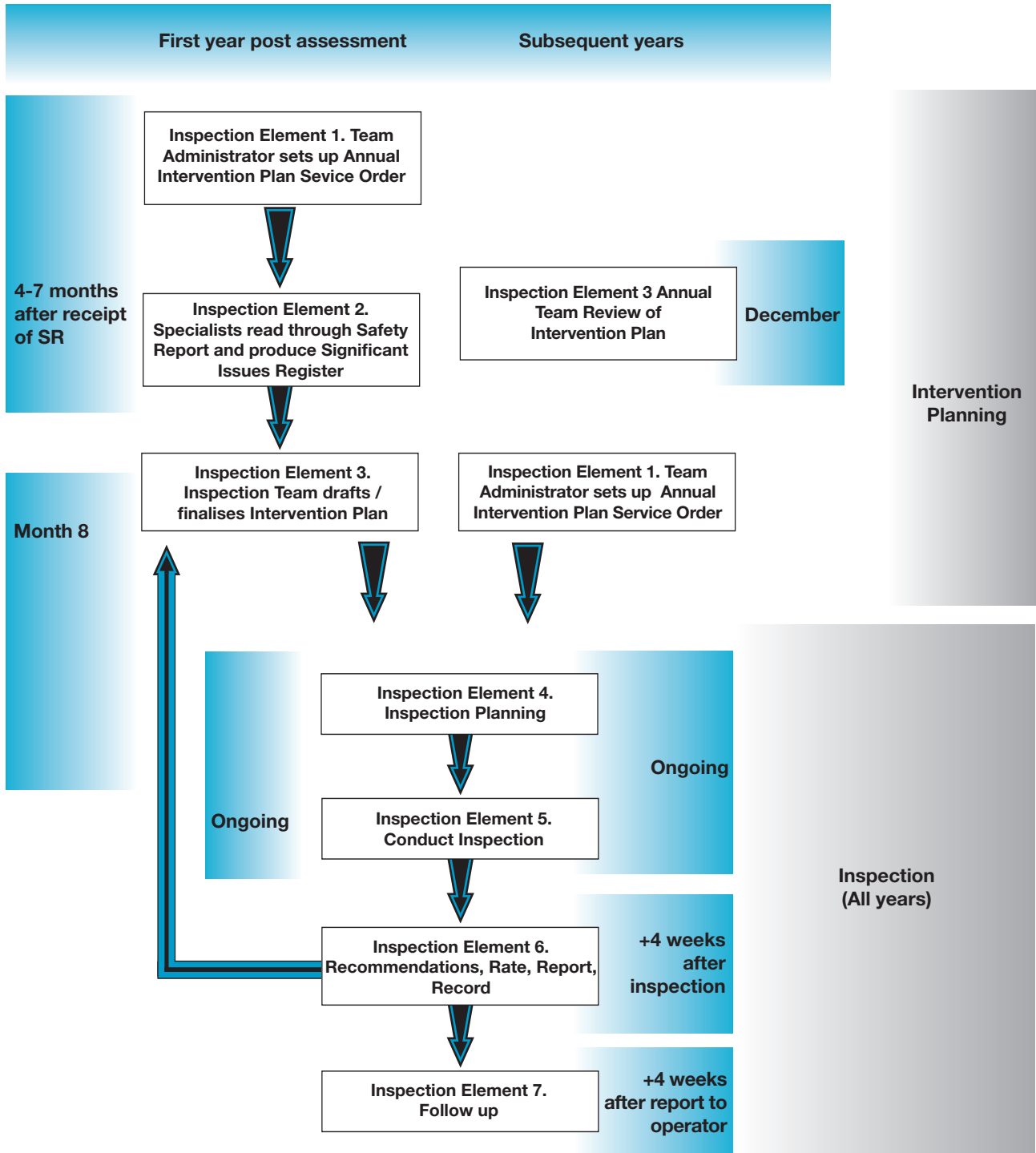
- 15.6 All COMAH inspections will focus on 'sampling' the arrangements duty holders have in place to prevent and mitigate major accidents - the regulatory regime does not and cannot provide wall to wall safety management assessment and assurance for the entire sector. The CA will target what it wants to inspect and by sampling, test the duty holders' arrangements to provide assurance of acceptable performance or otherwise.
- 15.7 There will be a greater emphasis on team inspections where appropriate to jointly inspect, discuss and compare findings and reach a shared CA view across the range of disciplines about what we want to examine and achieve with the duty holder.

16. Procedures for Remodelled Inspection

16.1 The overall process has been divided into elements; each of these elements is broken down in to a number of key steps that identify the main actions, timescales, people responsible, supporting documentation and COIN activity to complete the process.

16.2 **The elements of the new inspection procedure are:**

- **Inspection Element 1. Team Administrator sets up COIN Annual Intervention Plan Service Order**
- **Inspection Element 2. Specialists read safety report and prepare Significant Issues Register/Demonstration Record**
- **Inspection Element 3. Intervention planning/Intervention Plan Review**
- **Inspection Element 4. Inspection Planning**
- **Inspection Element 5. Conduct Inspection**
- **Inspection Element 6. Report, Rate, Record**
- **Inspection Element 7. Follow up the inspection**



17. Inspection Element 1. - Team Administrator sets up Annual Intervention Plan Service Order

- 17.1 At the start of each work year the **Team Administrator** will open and set up the next annual intervention plan service order for the site on COIN and attach it to the existing site intervention case. See guidance on recording COMAH Intervention Plan Inspections on COIN published on the intranet.
- 17.2 In consultation with the **Regulatory Inspector**, the **Team Administrator** will assign discipline service order lines to individual inspectors and ensure that the line status is marked 'Open'. If a discipline service order line is not needed, mark the line status 'not relevant'.
- 17.3 Service order line 1 (COMAH IP: Intervention Plan Agreed) should be completed by the **Regulatory Inspector** at the start of the work year to record that the intervention plan has been reviewed, agreed and signed off by management. Brief details of the factors influencing the content of the intervention plan should be entered into the note associated with this line. The **Regulatory inspector** should check that the intervention plan document has been attached to the case before changing the status of the line to 'completed'.

18. Inspection Element 2 – Specialists read safety report and prepare Significant Issues Register & Demonstration Record

- 18.1 For safety report revision reports, **Discipline Specialists** will no longer be involved in the formal assessment process but will now verify the demonstrations made in the safety report as part of onsite inspection.

Timing

- 18.2 Specialist read through of the safety report and completion of the significant issues register should be undertaken after formal assessment has concluded - **within three months of them receiving the safety report (within seven months of receipt of the safety report by the CA)**.

Preplanning

- 18.3 **Discipline Specialists** should be aware of the sites they have responsibility for as part of their annual work planning and note when the five year safety report revision is due. They should maintain a dialogue with the **Regulatory Inspector** regarding progress of the safety report revision assessment but should expect to receive the safety report after assessment has been 'concluded' by the assessment team.

Safety Report Read Through

- 18.4 The **Discipline Specialist** read through of the safety report is to ascertain whether the known changes to the site or the identified improvements to the safety report have been adequately expressed, and that there are no obvious omissions in the **NEW** or **AMENDED** information. The read through is not to address all the demonstration criteria set out in the SRAM sections.
- 18.5 On receipt of the report the **Discipline Specialist** will open a 'Significant Issues Register' document and a 'Demonstrations Record – Technical Aspects' document for the safety report received. These documents are available as a Word template (see **Appendices 6 and 7**).

Significant Issues Register

- 18.6 Discipline Specialists should consider the safety report along with knowledge of the site and industry to generate inspection topics and record them on the **Significant Issues Register**.
- 18.7 The topics should be prioritised as follows:

Category of entry onto the Significant Issues Register**Category A**

- 18.8 Potential serious deficiencies (omissions or errors) in the information provided in the safety report revision that prevent conclusions being made about the suitability of the measures in place to prevent a major accident should carry the highest priority on the **Significant Issues Register**. Where potential serious deficiencies are identified, they should be addressed through an immediate site visit to verify site conditions and consider prohibition under Regulation 18 of COMAH. The **Discipline Specialist** should arrange this visit at the earliest opportunity and notify the **Inspection Team** that the visit is taking place.
- 18.9 For guidance on Serious Deficiency and Prohibition under Regulation 18 COMAH, see SRAM Section 8 paras 26-31 at and Chapter 6 of the COMAH Manual.

Category A items should be addressed immediately.

Category B

- 18.10 Issues identified in the read through of the safety report revision which are linked to prevention or mitigation of a major accident and are suspected to require “further measures” to be taken by the site operator will take the second level of priority.
- 18.11 In addition to the safety report read through issues may also be included in the **Significant Issues Register** to address the critical control measures to prevent or mitigate a major accident. These measures would be regarded as the most critical in the control of risk based on issues such as site or process complexity and industry practice (the ‘Must See’ issues for any particular site).
- 18.12 **Category B items should receive priority in the first year intervention programme.**

Category C

- 18.13 Issues identified that are simply about demonstration and do not have a likely outcome of further necessary measures should receive low priority. Low priority items should be included for consideration in subsequent years intervention planning.
- 18.14 **Category C items should be considered in subsequent years of the intervention programme (build into subsequent intervention planning and update).**

Technical Demonstration Record

- 18.15 The **Demonstration Record** follows the Technical Criteria guidance available in **SRAM Section 12)**. It will provide a link from the inspection process back into the safety report. **Discipline Specialists** will record information about demonstrations following site verification. The record can then be used to communicate with the operator when preparing for the next safety report review and revision.
- 18.16 Each **Discipline Specialist** will make initial entries in the Demonstration Record based on information gained from the read through of the safety report revision.
- 18.17 The initial **Demonstration Record** will be considered along with the **Significant Issues Register** to inform the intervention planning process.
- 18.18 The **Demonstration Record** will then be updated following each inspection. (see Inspection Element 6).

COIN Recording

- 18.19 At the end of the read through stage, the **Discipline Specialist** will attach the Significant Issues Register and Demonstration Record to their own service order line on the COIN annual intervention plan service order. It is the responsibility of the **Discipline Specialist** to ensure the latest version of the document is attached to COIN.

19. Inspection Element 3: Intervention Planning / Intervention Plan Review

Purpose of intervention plans

- 19.1 The purpose of an intervention plan is to describe CA regulatory intent at a site in accordance with Regulation 19 COMAH¹. Regulation 19 requires the Competent Authority to organise, for all COMAH establishments, an adequate system of inspections of establishments or other measures of control appropriate to the type of establishment concerned. In the UK this commitment is demonstrated through site intervention plans.
- 19.2 For top tier sites, there should be at least one on-site inspection by the CA every 12 months (unless the programme of inspections is based upon a systematic appraisal of major accident hazards of the particular establishment concerned).
- 19.3 For lower tier sites there should be a programme of inspections in place for each site. This may or may not involve an inspection by the CA every 12 months, and will be dependent upon the complexities and performance of the site involved.
- 19.4 Inspection of control measures should not be dependent upon the receipt of the safety report (for top tier sites) and should be sufficient for a planned and systematic examination of the technical, organisational and management systems being employed at the establishment, to ensure:
- that the operator can demonstrate that they have taken appropriate measures to prevent major accidents;
 - that the operator can demonstrate that they have provided appropriate means for the limiting the consequences of major accidents both inside and outside the establishment;
 - that the information contained in any report sent to the Competent Authority by the operator of the establishment adequately reflects the conditions in the establishment.

Common intervention plan format

- 19.5 A common intervention plan format will be used for all top tier and lower tier sites to improve consistency and intelligence gathering.

Intervention Planning/Review Procedure

Timings

- 19.6 Intervention plans should be developed for **top tier sites** following the five year safety report revision assessment **within one month of the specialist read through** (no later than eight months after receipt of the safety report from the Operator). **The plans should then be reviewed and signed off within one month of the verification inspection.**
- 19.7 For both **top** and **lower tier sites** the plans should be **reviewed and signed off every December** to support the planning and resource allocation for the coming year.

Overview

- 19.8 This procedure provides guidance on drafting and finalising intervention plans.
- 19.9 The intervention plan will identify, in order of priority, the major hazard inspection considered necessary at the site, including an estimate of regulatory, specialist and agency resource to undertake the work.
- 19.10 Intervention plans should be developed for all establishments coming within scope of the COMAH regulations, both top tier and lower tier.
- 19.11 COMAH intervention plans will cover three years (2010-2011, 2011-12 and 2012 - 2013)
- 19.12 The intervention plan should not set out to examine every aspect of a duty holder's operations. The intention should be to 'sample' the control measures and systems in place in a proportionate way to provide assurance that the site is managing its major hazard risks appropriately.

Completing the Intervention Plan

- 19.13 **A team approach** should be taken to the preparation and review of intervention plans. Regulatory, specialist and agency inspectors should jointly develop, agree and review plans.
- 19.14 **Regulatory inspectors** (supported by **Team Administrators**) are responsible for populating the intervention plan template.

Intervention Plan Part A:

- 19.15 **Part A: Site Information Summary** - The **Regulatory Inspector** should complete this section to provide basic establishment details.
- 19.16 **Part A: Intervention plan review and sign-off** – Following each review the **HSE inspector, Agency Inspector, Team Leader and Head of Operations** should complete this section to show that the plan has been signed off.

19.17 **Part B: Intervention Groupings**

Inspection items should be grouped into the following sections:

- a) Legacy Issues;
- b) Site Specific Issues;
- c) Competent Authority Strategic Priorities.

- 19.18 Each inspection item should be prioritised and grouped by agreement of the Inspection team to avoid production of many discrete inspection items that can become difficult to close out.

Legacy Issues

19.19 Legacy issues are defined as inspection items that have been raised with the duty holder and not yet inspected, or inspected but not closed out. It is intended that the legacy issues section will be removed when existing legacy has been closed out and/or teams are confident they have oversight of the status of all issues raised with the site. Until this is achieved, inspection items that meet the definition should be recorded in this section.

Site-specific Issues

19.20 Site-specific issues should be agreed by the Inspection Team and can arise from:

- a) Safety Report Assessment.
(Source: MAPP, SMS, Predictive or Agency Assessment Records);
- b) Specialist Inspector read through of the safety report (source Significant Issues Register/ Demonstration Record);
- c) Key risk control systems relating to the operator's major accident hazard potential. (Source - assessment process, specialist read through, inspector knowledge of site or industry sector);
- d) Site investigations;
- e) Site enforcement.

Competent Authority Strategic Priorities

19.21 Competent Authority national strategic inspection priorities are evidence based and agreed by the Competent Authority Strategic Management Group. Current priorities are available in the CA Annual Plan of Work and are pre-populated in the Intervention Plan Template (see current plan of work (2010/11) and 2010/11 Intervention Plan Template).

Part C: Annual Intervention Plan

19.22 Following the five year safety report assessment and every December, the intervention plan should be reviewed by the **Inspection Team** and a programme of inspection agreed for the following year.

Focus of annual intervention plan

19.23 **Following the five year safety report revision assessment and specialist read through** the intervention plan should focus on the issues identified by the **Assessment Team** and **Discipline Specialists** as year one priority items to address any obvious weaknesses identified in the safety report and verify that the key risk control systems exist as described. There may be overlap between these items and the CA strategic topics. The opportunity should also be taken to address relevant strategic topics where appropriate and where resources permit.

At the Annual Intervention Plan Review

- 19.24 The intervention plan should be reviewed and signed off each December.
- 19.25 The annual intervention plan review should be a team exercise and involve **all inspectors** expecting to be involved with the site in the coming year.
- 19.26 The purpose of the review is to:
- confirm whether the previous years inspection items have been satisfactorily concluded;
 - provide an auditable vehicle through which decisions made regarding items not inspected or completely closed out can be recorded;
 - update site specific issues and CA strategic priorities;
 - ensure the Hazard Rating for the site is correct;
 - formulate the plan of next years inspections;
 - identify resource required to implement the plan.

Generation of inspection items

19.27 Inspection items should be grouped together into packages of work that can be undertaken together, with multidisciplinary involvement as required.

a) 2010/11 Work Year

To facilitate the transition from existing arrangements to the remodelled approach to intervention planning HSE instituted a review of existing intervention plans by Inspection Teams in December 2009. The review was supported by guidance SPC/Admin/70 'Review of COMAH Intervention Plans in December 2009 – transition to the remodelled regime'. The priority in 2010 – 11 is the close out of legacy issues.

b) In subsequent years

The intervention plan in subsequent years should focus on relevant CA strategic topics and site-specific issues.

19.28 All inspection items should include the following elements:

- a) clear description of the inspection so that it is clear what needs to be inspected (important at handover should new inspectors be allocated to the site);
- b) the group (the origin of the inspection from Part B), either:
 - Legacy;
 - Site-specific;
 - Strategic priority from Part B).
- c) discipline resource needed;
- d) resource days;
- e) target completion date;
- f) status of the item, either:
 - Completed and closed out;
 - follow up inspection required to check compliance;
 - Improvement Notice Issued;
 - carry over to next year.

Intervention Plan Resource Allocation

19.29 It is intended that in future resource allocation will be supported by the developing risk ranking (hazard and performance) methodology.

19.30 Until these arrangements are introduced the following should be implemented to support resource allocation.

a) **First year post assessment**

For the read through and the first year post assessment inspection the **Regulatory Inspector/Regulatory Team Leader** will need to agree resource requirements with **Specialist/Agency colleagues** in the year before the safety report is due so that the resource bid can be considered in the specialist planning spreadsheet resource allocation process.

b) **Subsequent years**

For inspection outside the safety report assessment year, the intervention plan will provide the basis of resource allocation decisions. Resource estimates for specific inspections should be calculated by the Inspection Team as part of the annual review and recorded on the intervention plan. Resource bids are then prepared via the specialist planning spreadsheet and resource allocated. Depending on resourcing it may be necessary to re-prioritise inspection topics accordingly. The intervention plan should be clearly annotated by the **Regulatory Inspector** to indicate that this has been done with reasons clearly stated.

Items not resourced

- 19.31 Following the annual review of all plans and the specialist resource allocation, **Regulatory Team Leaders** should discuss items not being transferred to the following year with **HSE Head of Units** and **EA Team Leaders/SEPA PEU Team leaders** to obtain sign off (for all top tier plans, and also lower tier sites if there is significant disagreement). Both **Regulatory Team Leader** and **Head of Units** should add a note to COIN to indicate that the sign-off has taken place (attached to the 'COMAH IP: Annual Review' service order line). Until EA/SEPA access to COIN is arranged the **Regulatory Team Leader** will be responsible for noting agency agreement on the 'COMAH IP: Annual Review' service order line.
- 19.32 The primary purposes of the Head of Unit sign off is to acknowledge at a senior management level within the CA that the review process has taken place and that, due to resourcing constraints, it is not always possible to fully deliver what the Inspection Team consider an appropriate inspection programme to achieve the aims and objectives of the CA.

COIN Recording

Intervention Plan Word Template

- 19.33. The signed off intervention plan should be attached to COIN by the **Team Administrator** against the intervention plan case.

Annual Intervention Plan Service Order

- 19.34 At the start of each work year the **Team Administrator** will open and set up the next annual intervention plan service order for the site on COIN and attach it to the existing site Intervention Case. See guidance on recording COMAH Intervention Plan Inspections on COIN on the intranet.

COMAH Intervention Plan IRF Tab - Site hazard and performance rating

- 19.35 The **Regulatory Inspector** should amend the hazard rating on the inspection rating form tab on the COIN COMAH annual intervention plan service order if necessary following the intervention plan review, attaching a note to the COMAH IP: Annual Review line summarising why the establishment has been re-rated.
- 19.36 The **Regulatory Inspector** should record which strategic topics are relevant to the site on the IRF/Ratings tab on the annual intervention plan service order in the Present/Discussed drop down menu. COIN guidance is available on completing the COMAH IRF.

Service Order Line 11 - COMAH IP: Annual Review

19.37 Following the annual intervention plan review meeting in December, the note associated with the 'Annual Review' service order line should be updated by the **Regulatory Inspector** to indicate that the intervention plan has been reviewed and the line status should be marked as 'completed'.

20 Element 4: Inspection Planning

Timings

Safety report verification inspection

20.1 Following the assessment stage, a date should be agreed in advance with the operator for the safety report verification inspection. The inspection should be **within one month of the specialist read through of the safety report**. The subject of the inspection should be communicated to the site following the intervention planning meeting.

Inspection in subsequent years

20.2 Following annual review and sign off of the intervention plan, the **Team Administrator** should agree provisional inspection dates with the Inspection Team.

20.3 Provisional Quarter 1 inspections (April- June) will need to be agreed before the intervention plan is signed off.

20.4 Proposed inspection dates and inspection topics for the forthcoming year should be communicated to the COMAH establishment operator by the **Regulatory Inspector** no later than the end of May each year.

Overview

20.5 Where appropriate the intervention plan should be delivered via multi-disciplinary team inspection comprising HSE and Agency representation. In practice the composition of that team will vary depending on the hazard profile/complexity of the site and the inspection topics identified. The make up of the inspection team and scope of inspection(s) for the year will have been agreed as part of the intervention planning process.

20.6 This guidance refers to multidisciplinary inspections but also applies to single discipline inspections.

Pre-inspection planning

- 20.7 All inspections should be thoroughly planned. The **Inspection Team** should agree the scope and expected outcomes of the inspection including performance benchmarks against which the operator can be measured.
- 20.8 For strategic topics, performance benchmarks are provided in the topic Delivery Guide. Performance benchmarks for all other topics (arising from safety report read through or site related) should be agreed and recorded in advance of the inspection.
- 20.9 An inspection plan should be prepared to provide a structure to the inspection (e.g. who is interviewing whom and when) to avoid any unnecessary duplication and logistic difficulties whilst on site.
- 20.10 The plan should contain the following elements:
- a) introductory meeting between the CA and company personnel who are to be interviewed during the course of the inspection;
 - b) meeting with safety representatives to establish if they have any concerns with regards to the topics being covered plus any thing else they may wish to discuss;
 - c) inspection topics;
 - d) inspection team review meeting (usually at the end of each day);
 - ie) nformal feed back session with operator (after inspection team review at the end of each day);
 - f) formal feed back at conclusion of inspection (senior managers, interviewees and safety reps).

Communicating with the Operator

- 20.11 When the plan is agreed, the **Regulatory Inspector** should forward it to the **Team Administrator** who should liaise with the relevant inspectors and COMAH operator to confirm inspection dates.
- 20.12 The **Team Administrator** should also forward the inspection plan to the operator to ensure that the appropriate resources and personnel can be made available.
- 20.13 The **Team Administrator** should also confirm the following administrative arrangements with the site:
- a) PPE requirements;
 - b) dates for submission of supporting documentation if required;
 - c) onsite CA accommodation requirements E.g. lockable office for storing PPE/ papers/ team reviews etc;
 - d) availability of office equipment e.g. projector for final feedback session.

COIN Recording

- 20.14 For multidisciplinary inspections, the **Regulatory Inspector** should record the plan against the 'COMAH IP: Regulatory Inspector' service order line.
- 20.15 For single discipline inspections the inspection plan should be recorded by the **relevant inspector** against their discipline service order line.

21. Inspection Element 5: Conduct Inspection

Enforcement

- 21.1 During the course of an inspection, or afterwards, enforcement action may need to be considered (e.g. cautions, enforcement notices, prosecution). All enforcement considerations and actions should adhere to the relevant CA, HSE and EA/SEPA enforcement policies and procedures, including the EMM and EMM-C procedures. COMAH Prohibition should also adhere to the CA COMAH PN Guidance. All COMAH enforcement action taken should be approved and agreed jointly by HSE and EA/SEPA in accordance with the CA Enforcement Procedures.

Team review meeting and communications with the operator

- 21.2 At the end of the inspection (or after each day) the Inspection Team should meet to discuss and agree:
- key findings;
 - initial performance rating for strategic topics;
 - any immediate enforcement action;
 - appropriate time scales for response by Operator.
- 21.3 Preliminary conclusions should be presented to site representatives at the end of the inspection (or after each day):
- key findings;
 - confirm any formal enforcement;
 - advise operator when inspection letter/report can be expected;
 - submission of action plan by operator and discuss timescales for completion.

22. Inspection Element 6: Report, Rate and Record

Inspection Reporting

Timings

22.1 The CA letter and reports should be sent to the operator **within four weeks** of the COMAH Inspection.

Technical Demonstration Record

22.2 **Discipline Specialists** should review the Technical Demonstration Record following each inspection and update as appropriate.

22.3 Inspection findings can include (and this will be particularly relevant to the first post assessment inspection) matters which will need to be addressed within the safety report. Depending on the nature of the issue it may be appropriate for them to be dealt with at the next five year resubmission or it may require more immediate action. For example, inspection findings that shed doubt on the accuracy of their predictive analysis (which could result in additional preventative measures).

22.4 Issues for immediate consideration by the site should be communicated via the inspection report form (and subsequent letter to the operator), otherwise the demonstration record will be used when discussing the next five year safety report revision with the operator.

CA Inspection Reports

22.5 All inspectors involved in a COMAH inspection should record the visit on the standard inspection report format (see **Appendix 8**). The report should be forwarded to the **Regulatory Inspector** who will draw together the key findings and actions required into a composite report supported by each of the individual inspection reports annexed to the document.

22.6 The report should:

- a) clearly distinguish between legal requirements and advice/recommendations;
- b) describe what is at fault, in respect of legal compliance;
- c) describe what the operator has to do to comply with the law;
- d) be structured so that the contents are presented in a prioritised fashion with the most serious or important matters first.

22.7 For complex team inspections/audits the report should be supported by a CA presentation to the operator. This may be done as a close-out meeting at the end of the inspection, or as a separate, more formal, presentation once the Inspection Team have considered their findings fully.

Covering CA Letter

22.8 The **Regulatory Inspector** should also produce a covering CA headed letter in which the operator should be requested to submit a formal response, including (where appropriate), an action plan in response to CA recommendations within four weeks of receipt of the CA inspection report. The operator should be requested to include in the action plan:

- Responsibility for the action (named individual or department);
- Performance standards;
- Completion date.

22.9 Offshore Safety Division has produced guidance on the style and content of letters to duty holders. Whilst specifically an OSD instruction, the guidance reflects good practice and should be adopted for CA inspection communications.

Review and Dispatch to Operator

22.10 The final report and covering CA headed letter should be reviewed by the relevant **Discipline Specialists** prior to dispatch and sent to the operator by the **Regulatory Inspector within four weeks of the inspection.**

COIN Recording

22.11 It is important that inspection work is recorded accurately and in a timely manner on COIN to provide operational intelligence to inspectors and the Competent Authority Strategic Management Group. All inspection work should be recorded on the site COMAH annual intervention plan Inspection and IRF service order.

Timing

22.12 All COIN inspection recording should be undertaken within **one calendar month** of the inspection being carried out.

Inspection Reports and Letters/Demonstration Records

22.13 **All inspectors** should attach their own inspection report and demonstration record against their corresponding Discipline service order line.

22.14 **Agency inspectors** should ensure that all inspection documentation is forwarded to the **Regulatory Inspector** who should attach them to the COMAH IP: Environmental Aspects service order line.

22.15 The covering letter and final composite inspection report should be attached by the **Regulatory Inspector** to the COMAH IP: Regulatory Inspector service order line.

Service Order Line Status for Discipline Service Order Lines

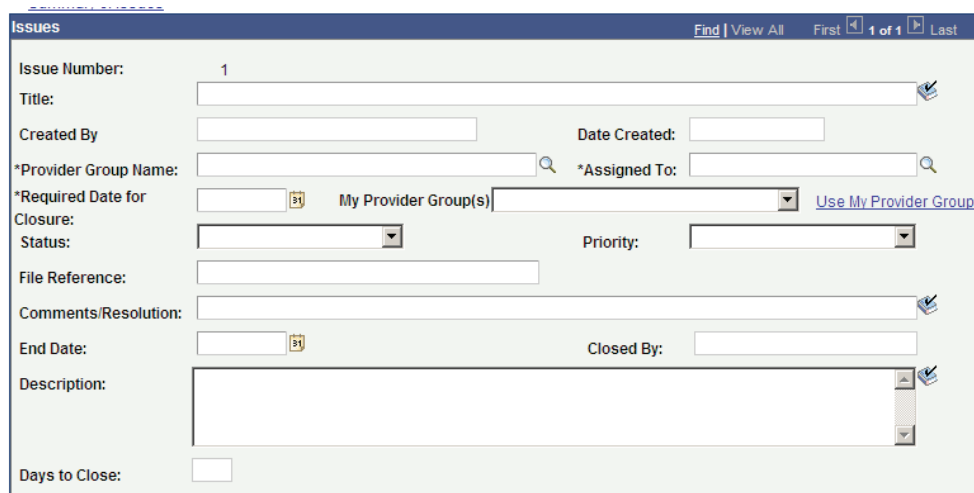
- 22.16 When all inspection topics against a Discipline service order line have been inspected and the resulting documents have been attached to COIN, the allocated **inspector** should change the status of the line to **'completed'**.
- 22.17 Where one or more of the inspection tasks identified in the note attached to a service order line remains incomplete such that further work will be needed before it can be closed out, the inspector filing the visit report should change the status of the relevant service order line to **'not completed'**. This step is particularly important as it will enable service order lines with outstanding tasks against them to be clearly identifiable from the service order.
- 22.18 By the end of the work year the status of all relevant discipline service order lines should be marked as **'completed'** or **'not completed'** because any lines left open when the service order itself is marked as 'complete' at the end of the year will automatically become marked as 'completed', and the ability to identify outstanding tasks in this way will be lost.

Service Order Line 12 - COMAH IP: SO Closure Review

- 22.19 At the end of the work year the **Team Administrator**, in consultation with the **Regulatory inspector** should review the service order to ensure that all lines have been marked with the appropriate status ('not relevant', 'completed' or 'not completed'). Any lines with an 'open' status should be followed up with the relevant inspector and the appropriate status checked. Details of this review should be recorded against line 12 of the service order: "SO Closure Review", which should then be marked as 'completed'. Taking this action should result in the status of the service order itself changing to 'complete', provided that none of the other service order lines remain 'open'.
- 22.20 *To prevent accidental closure of the whole service, order Line 12 should only be marked as completed by the Team Administrator following the review.*

Recording Follow up

22.21 Where an action plan is requested from the operator the Team Administrator should make a record on the COMAH annual intervention plan service order Issues tab within 1 week of the report being sent to the Operator. The 'Required Date for Closure' should be set for four weeks after the report was sent. The issue should be assigned to the Regulatory Inspector.



The screenshot shows a web-based form titled 'Issues'. At the top right, there are navigation options: 'Find | View All', 'First', '1 of 1', and 'Last'. The form fields include:

- Issue Number:** 1
- Title:** Text input field with a save icon.
- Created By:** Text input field.
- Date Created:** Text input field.
- *Provider Group Name:** Text input field with a search icon.
- *Assigned To:** Text input field with a search icon.
- *Required Date for Closure:** Text input field with a calendar icon, followed by a dropdown menu showing 'My Provider Group(s)' and a link 'Use My Provider Group'.
- Status:** Dropdown menu.
- Priority:** Dropdown menu.
- File Reference:** Text input field.
- Comments/Resolution:** Text input field with a save icon.
- End Date:** Text input field with a calendar icon.
- Closed By:** Text input field.
- Description:** Large text area with a save icon.
- Days to Close:** Text input field.

22.22 Further guidance on creating COIN Issues can be found at <http://intranet/information/coin/guidance/followupissues.pdf>

22.23 Follow the procedure from 'Creating and Issue' (bottom of page 1 onwards).

Site hazard and performance rating

22.24 The CA needs to demonstrate, clearly and transparently, that it is targeting more of its resources at those sites that are high hazard and/or 'poor' performers and that our interventions are improving the overall management of major accident hazard risk.

22.25 A methodology has been developed by HSL for the Competent Authority to rank sites based on hazard and performance.

Hazard ranking

22.26 Hazard ranking is based on both safety and environmental considerations.

How it works

22.27 A number (score) is attached to certain features about the site (relating to process type and location) to indicate the hazard presented by the site. For a few sites that present particularly high hazards, the site score is doubled. Sites can range from a score of 1 to 80.

22.28 The agencies attach a number (score) to environmental features in the same way.

22.29 The safety and environmental hazard scores then combine to give an overall CA site score. **The greater the score, the greater the hazard.**

Recording the Hazard Rating on COIN

22.30 The initial CA hazard score for each site is provided centrally and input to COIN (where it appears on the Inspection Rating Form – IRF).

22.31 It is anticipated that the hazard rating will remain fairly static. It will only change if the site changes its operations, or surrounding population/environment changes. If site conditions change (e.g. inventories change or a process stops/starts), the **Regulatory Inspector** should consider the hazard rating score and amend the rating on COIN in line with the methodology.

22.32 Until COIN access is resolved for agency staff, if EA/SEPA identify environmental changes they should contact the Regulatory Inspector who will amend COIN on their behalf.

22.33 The hazard rating should be reviewed by the **Inspection Team** as part of the annual intervention plan review process to ensure it adequately reflects site conditions.

Performance Rating

22.34 Performance rating complements the CA hazard ranking. The aim is to capture performance data against the strategic topics and combine this with the hazard score to numerically show the sites that need greatest regulatory effort.

22.35 The higher the number (score), the poorer the performance. When combined with the hazard score, the higher the total number, the higher the need for CA intervention.

How is performance data gathered?

22.36 Performance rating will be undertaken by the Inspection Team following inspection of strategic topics.

22.37 The information will be used to monitor operator performance, demonstrate CA delivery of strategic work, direct future resource allocation and support decision making on future priorities.

22.38 The following describes the scoring arrangements for each performance standard together with a description for each.

Standard	Description	Score
Unacceptable	Unacceptable - well below standard, enforcement action required. Poor operator attitude to required improvements.	60
Very poor	Somewhat below minimum legal or industry standard Many success criteria not met or not fully met. A lot more effort required. Enforcement action likely.	50
Poor	Almost meets minimum legal or industry standard. More effort necessary. Several success criteria not fully met. Follow-up may be required and possible need for enforcement action.	40
Broadly Compliant	Meets minimum legal requirement or industry standard. More effort necessary. Some success criteria not fully met. May not preclude close out depending on scope of improvements required and operator attitude. Will need confirmation (at least with a letter) of work required. May need follow-up.	30
Good	More than minimum legal standard or industry standard, good practice. Good practice in most respects. Most success criteria met. Provision of advice or confirmatory letter only with no plans for follow-up.	20
Exemplary	Proactive in identifying and implementing improvements – Good practice or above in all respects. All success criteria met. No action required.	10

Supporting Strategic Topic Delivery Guides

22.39 Each strategic inspection topic is supported by a Delivery Guide (DG) that sets out success criteria for the topic, defines performance benchmarks against a numerical score and advises when no further interventions are required in that particular intervention cycle. Each of the performance benchmarks will be tightly defined and only criteria that can be scored will be included. Where the aim of the intervention is intelligence gathering, this will be made explicit in the DG.

Making the performance rating

- 22.40 Ratings will only be applied to strategic topics. The rating should be agreed by the **Inspection Team** following the inspection. The rating should be based on the performance benchmarks provided in the relevant Delivery Guide.
- 22.41 It is important to note that there is no expectation that inspectors will carry out a retrospective rating exercise: the rating will be based on intelligence gathered during a site visit.
- 22.42 However, for strategic topics that have recently been inspected the Inspection Team should undertake a gap analysis to determine whether more should be done based on existing intelligence. If a significant gap is identified the topic should be incorporated within the Inspection plan and the site rated on the basis of its known performance.

Recording Performance Rating on COIN

- 22.43 Performance rating is recorded on the Inspection Rating Form (IRF). The IRF is part of the annual COMAH intervention plan service order.
- 22.44 **Click on the IRF tab**

The screenshot shows the COIN system interface. The 'IRF/Ratings' tab is highlighted in the navigation bar. The main content area displays the 'Service Order Line Information' section, which includes a 'View Line Summary' link and a 'Service Order Line Default Values' section. The 'Service Order Line Default Values' section contains the following fields:

- *Provider Group Name: Trainer 01
- *Group Member Name: Trainer 01
- Required Start Date: 01/04/2010
- Required End Date: 31/03/2011
- DQ Check:

Below this section is the 'Service Order Line Summary' table:

Line	Step	Activity Name	Status	Required End Date	Actual End Date	Group Member Name
1	10	COMAH IP: Plan Agreed	Open	31/03/2011		Trainer 01
2	20	COMAH IP: Regulatory Inspector	Open	31/03/2011		Trainer 01
3	30	COMAH IP: Process Safety	Open	31/03/2011		Trainer 01

22.45 When you first open the page the performance Rating Section is defaulted to 'No' and there are no values present in the Inspection Rating section.

Service Order | **IRF/Ratings** | Notes | Interaction History | Issues

*Return: 1 - Case
Timezone: My Time Zone 09/02/2010 12:10:39

Service Order ID	Customer	Site	Contact	Status	Priority
SVC0301159	MLE Professional Limited	Unit 20 Austin Way	MLE Profess 300028	Contact MLE Professional Limit	Open Normal

Customer Information
Service & Related Information
Service Order Line Information

View Line Summary

Service Order Line Default Values

*Provider Group Name: Trainer 01 My Provider Group(s): Trainer 01
*Group Member Name: Trainer 01 Use My Provider Group
Required Start Date: 01/04/2010 Required End Date: 31/03/2011
DQ Check

Line	Step	Activity Name	Status	Required End Date	Actual End Date	Group Member Name
1	10	COMAH IP: Plan Agreed	Open	31/03/2011		Trainer 01
2	20	COMAH IP: Regulatory Inspector	Open	31/03/2011		Trainer 01
3	30	COMAH IP: Process Safety	Open	31/03/2011		Trainer 01

22.46 Changing a **No** to a **Yes** opens up the Rating and date fields. Once you have selected a date the values will appear in the Inspection Rating section. Select the appropriate rating value.

Site Ranking

Type	*Base	Population	Societal	Sensitivity	Pathway	Total
Environmental	4			3	2	24
Safety	5	2	2			20

Performance Rating

Topic	Relevant	Rating	Date	Rating	Date	Rating	Date	Rating	Date
Ageing Plant	Yes							40	09/02/2010
Emer. Prepared Off-Site	No								
Emer. Prepared On-Site	No								
Future Strategic Topics	No								
Key Performance Indicators	No								
Overfill Protection	No								
Second/Tertiary Containment	No								

Inspection Rating

*Rating Type	*Score	*Date
Total Site Score	0	01/01/2009
Average Score Across Topics	0	01/01/2009
Total Topic Score	0	01/01/2009

22.47 Once you have saved the SO the Topic Rating value will move across and be greyed out and all the scores will be calculated for the Inspection Rating section

22.48 Where a further visit is made on the same topic, the site can be re-rated in the next ratings box allowing the trend in the site's performance to be captured. Ensure that the date the rating was made is also recorded for each new rating on the same topic.

23. Inspection Element 7: Follow up with the Operator

23.1 Follow up should be undertaken to ensure that the operator meets the required performance benchmark.

Operator Action Plan

23.2 Operators are initially requested to provide their timed action plan within four weeks of receipt of the CA inspection report.

23.3 If an action plan is not received within four weeks, the Team Administrator should initially follow this up with the site and then refer the matter to the **Regulatory Inspector** if the action plan is not forthcoming within the next two weeks.

23.4 When the operator provides the action plan, the **Regulatory Inspector** should liaise with the **Inspection Team** to ensure that the actions and timescales are reasonable.

23.5 If the action plan is unacceptable, this should be pursued by the **Inspection Team** with the operator and enforcement considered in line with CA enforcement guidance.

Outstanding Actions

23.6 Outstanding actions should be followed up with the operator to ensure that they have been closed out and re-rated against the performance benchmark. If a further site visit is required it should be considered as part of the intervention plan review and added to the site intervention plan.

23.7 When strategic priorities are followed up the Inspection Team should decide whether the performance rating has changed.

COIN Recording

COMAH Intervention Plan Service Order Issues Tab

- 23.8 When the action plan is agreed the **Regulatory Inspector** should close out the original action plan issue on the COMAH Intervention Service Order Issues tab and record any outstanding follow up and timescales on COIN as new issues.
- 23.9 The **Team Administrator** should then monitor deadlines via COIN report 17 and prompt the **Regulatory Inspector** to follow up at appropriate time.
- 23.10 See <http://intranet/information/coin/training/report17.pdf> for guidance on COIN Report 17.

COMAH Intervention Plan Service Order Issues tab

- 23.11 Where progress on strategic priorities are followed up the new Performance Rating should be recorded and dated on the COMAH Intervention Plan Service Order IRF tab by the **Regulatory Inspector** to reflect any change in performance.

Appendix 1 – Pre-receipt Inspection Contact Report

(Reference Assessment Element 1)

Name of Company	
COIN Case Number	
Site Address	
COIN Site	
Due Date of 5 Year Review	
Date of Visit(s)	
Reg. Inspector	
Unit	
Other Staff Attending	
Perons Seen	Position
Reason for Contact <ul style="list-style-type: none"> ■ Site Discussion prior to Operator Review of Safety Report 	
Issues Discussed: <i>(Make reference to Safety Report Review and Revision Guidance for Operators Use previous Assessment documentation as intelligence Scope and depth of any changes Effects on subsequent stages of process Assessment, Read Through, Intervention Planning).</i>	

Actions Required by Company:

*(Outputs from Duty Holder Review, inclusions in SR, presentation of data etc)
Outline expectations of revised report inc likely Scope & depth of any changes
(ref Appendix 2 Review and Revision Guidance)*

Follow-up Action Required by HSE/CA? (prior to final submission)

Further site visit? involvement of Technical Specialists?

Author			
Unit		Date	
Copies to	COIN Assessment Case Agency Site Predictive Inspector Other Attendees		

Appendix 2 – Pre-receipt framework letter

Framework letter to operator advising of safety report due date following pre-receipt meeting (based on SRAM Section 4 Appendix 4.6 Framework letter 1 to operator advising of safety report due date).

This letter should be sent to the operator within one month of the pre-receipt meeting.

Joint CA letterhead paper should be used.

Content:

- a) identify the operator/address/installation (if multi-installation establishment);
- b) due date for safety report;
- c) who the assigned AM is and where he/she is located;
- d) number of copies of the report required;
- e) agreed scope and depth of any revised information and how the information will be presented in the report
- f) reminder of the requirement to, at the time the report is submitted i) make applications to the CA for exempting information in the safety report from the COMAH Public Register on the grounds of personal or commercial confidentiality, and ii) inform the CA of any application being made to the Secretary of State (AM to provide contact point – see Appendix 2) on the grounds of national security;
- g) inform the operator he may wish to discuss with AM the scope of any applications covered in para (e) in advance of submitting them;
- h) ask operator to specify when he submits his report whether he wants redundant copies of safety reports to be returned or destroyed by the CA on completion of assessment. (Note – need to consider implications for assessment of revisions if all copies are destroyed).

Appendix 3 – Completeness Check

RECORD OF COMPLETION CHECK OF REVISED INFORMATION IN SAFETY REPORT

Please note – all rows are expandable

Add following boxes:

- Name of Company*
- COIN Case No*
- Site Address*
- COIN Site ID*

Completeness check items	Outcome and Comments	Follow Up Actions (if required)
<p>Is the layout of the report in a logical and clear order?</p>		
<p>Are there relevant sections covering the requirements of COMAH Sh4 pt 2?</p>		
<p>Is there information about the review process carried out by the site operator and who was involved?</p>		

Completeness check items	Outcome and Comments	Follow Up Actions (if required)
Have new inclusions and revised material been suitably identified to allow assessment?		
Is there reference to issues discussed at pre-receipt meetings?		
Is there reference to previous revision plans or previous CA interventions?		
Can the safety report be progressed to the assessment phase to include predictive and agency Inspectors?		

The revised safety report can be progressed to the assessment phase YES/NO

Signed:

Role:
(Site Reg Insp, AM etc)

Date:

Appendix 4 – Team Assessment Conclusions Record

COMAH Assessment Conclusions Record – 5 Yr Revision Safety Report

Add following boxes:

Name of Company
 COIN 5 Yr Review SR Assessment Service Order No
 Site Address
 COIN Site ID

1. Serious deficiency Reference COMAH regulation 18		
Question	Answer (y/n)	Action Agreed CA action required In case of 'yes'
1.1 Is there any evidence of a serious deficiency in the measures for the prevention and mitigation of major accidents as described by the revised safety report?		

2 Minimum information provided Reference: COMAH Schedule 4 part 2		
Question	Answer (y/n)	Action Agreed CA action required in case of the answer being 'no'.
2.1 Does the report still contain the minimum information required by schedule 4 part 2?		

3 Review and Revision Information Reference: Review and Revision of Safety Report Guidance and SPC/PERM/23		
Question	Answer (y/n)	Action Agreed CA action required in case of the answer being 'no'.
3.1 Does the report contain information of the review process carried out by the duty holder		

3 Review and Revision Information
Reference: Review and Revision of Safety Report Guidance and SPC/PERM/23

<p>3.2 Does the report contain references to changes to the report including details of:</p> <ul style="list-style-type: none"> ■ Operator's change review ■ Previous safety report revision plan ■ Outcomes of interventions by CA ■ Nature of the changes 		
---	--	--

4 Demonstrations
Reference: COMAH Schedule 4 part 1

Question	Answer (y/n)	Action Agreed CA action required in case of the answer being 'no'.
<p>4.1 Does the report demonstrate that the major accident prevention policy and SMS for implementing it have been reviewed?</p> <p>(ref: Sched 4 part 1 para 1)</p>		
<p>4.2 Does the report demonstrate that the duty holder has reviewed the potential major accident scenarios to check that the representative set is still appropriate?</p> <p>(ref: Sched 4 part 1 para 2)</p>		
<p>4.3 Does the report demonstrate that the duty holder has considered whether the site risk assessment is still relevant/valid and whether the methods used are still proportionate to the nature of the hazards</p> <p>(ref: Review and Revision Guidance)</p>		
<p>4.4 Does the report describe any changes to site risks and the control and mitigation measures in place</p> <p>(ref: Sched 4 part 1 para 3)</p>		
<p>4.5 Does the report show that the site ALARP demonstration has been reviewed following the changes</p>		

4 Demonstrations Reference: COMAH Schedule 4 part 1		
4.6 Does the safety report demonstrate that the on-site emergency plan is still relevant for site activities? (ref: Sched 4 part 1 para 4)		

5. Assessment Process Conclusion Reference: COMAH Schedule 4 part 1		
Question	Answer (y/n)	Action Agreed CA action required in case of the answer being 'no'.
5.1 Does the safety report contain sufficient information and in a suitable format to proceed to intervention planning process and inspection cycle (ref: Review and Revision Guidance for Operators and SPC/Perm/23)		

6. Assessment Conclusions Sign-off	
Comments:	
Role	Assessor
Assessment Manager	
Predictive Assessor	
Environmental Assessor	
Other Assessor	
Line Manager to AM	
Line Manager to Agency Inspector	
Date:	

Notes for Assessment Conclusions Record

(5 yr Review Safety Reports)

1. Serious Deficiency

An omission of information leading to the return of a safety report would apply to significant or large-scale omission of information required to meet the demonstrations and not to smaller discrete omissions. For a revised safety report this may include the failure to incorporate significant revisions from previous SR assessments.

An example might include failure to provide sufficient information on the process used for re-assessing and confirming the listed major hazards. In this example, there might be a failure to describe who has re-assessed the hazards, no description of the methods that were employed or how suitable methods were determined, and no information to confirm that the identified hazards that were developed into representative scenarios are still relevant.

This omission would be a large gap in a significant area of the total risk assessment review process and has strong implications for the assessment of later stages in the risk assessment cycle, including selection of measures.

Failure to identify a possible major accident scenario may not by itself be so deficient as to warrant return of the safety report as measures may exist that provide a level of protection that is not 'seriously deficient'. Similarly, failure to describe risk assessment team competencies would not on its own be so deficient for return of the report if methodology for hazard identification and scenario selection and prioritisation were broadly described.

There should be no action to prohibit an activity, following the return of a report, unless a 'serious deficiency' in applied measures were also established at a site visit.

2. Minimum Information (COMAH Schedule 4 pt 2 – L111)

The safety report should still provide the required information as described in Schedule 4 pt 2 of COMAH. This section is to verify that the presented safety report still covers the areas required by the Regulations.

3. Review and Revision Information

(Ref Review and Revision Guidance for Duty Holders and SPC/Perm/23)

The report should contain information regarding the revisions required from the following:

- nature of the changes;
- details of the sections/paragraphs revised;
- reasons for their revision, e.g:
 - a) Operator's change review/five year review;
 - b) Safety report revision plan issued by the CA;
 - c) Outcome of interventions by the CA requiring SR amendment.

Incorporation of revisions and changes into the safety report with suitable indexing or labelling is required for release of the safety report to the Technical Specialists and thus progression to the Intervention cycle.

4. Demonstrations

This section is to demonstrate that the required reviews have taken place and that the information required in Schedule 4 pt 1 is present in the revised safety report. Full demonstration that the necessary measures have been taken and that major accidents are being controlled to a risk level as low as reasonably practicable will be achieved through the intervention cycle. For example, a typical action may be measures to prevent and limit MAs present and reviewed – suitability to be confirmed by Site Intervention Programme.

Full demonstration may not be achieved from assessment process alone and it is expected that Inspection planning will take into account the need to ensure the site demonstrations are adequate for the key SR criteria.

5. Assessment Process Conclusions

This section asks if the report has sufficient information to progress to the inspection phase of the demonstration process. If not already made available, at this point the Technical Specialists should receive copies of the safety report.

6. Sign Off

Sign off of "Assessment Process only" by the initial assessors and the regulatory line manager.

Appendix 5 – Assessment conclusions framework letter**Adapted from SRAM Framework letter 7 Assessment conclusions for five year Review Report**

1. Joint CA letterhead paper should be used.
2. The CA assigned reference number for the safety report document should be included. Also, any unique identifier marked on the document by the operator should be included.
3. Content
 - 3.1 identify the operator/address/installation (if multi-installation establishment)/safety report document by name/type of document;
 - 3.2 a statement advising the operator that he is responsible for ensuring that all necessary measures have been taken on site to prevent major accidents and their consequences to people and the environment;
 - 3.3 statement informing the operator that the report was examined using the new assessment process for 5 Year Review and Revision safety reports (which can be found on the HSE web site at **www.hse.gov.uk/comah**) to check whether the report still contains the minimum information required by Schedule 4 Part 2 of COMAH following any revisions made.
 - 3.4 statement that the revised assessment process for 5 Year Review and Revision safety reports will not test all aspects of the report under Schedule 4 Part 1 of COMAH, as a structured inspection programme will test whether the site demonstrations are adequate for key safety report criteria.
 - 3.5 statement that the letter contains the conclusions of the CA under COMAH Regulation 17(1)(a) and is agreed by both parts of the competent authority. If necessary, consideration should be given to 17 (1) (b).
 - 3.6 confirmation about what actions were taken during the assessment process, e.g:
 - details of pre-submission discussions with the site operator;
 - sources of further information used, e.g. responses to previous safety report assessment, letters with dates from the operator;
 - depth of assessment undertaken and how the report will be used during the inspection cycle .

- 3.7 The conclusions from the assessment process should be specified. They should include confirmation:
- i. whether the safety report document contains the minimum information specified in Schedule 4 Part 2;
 - ii. the extent to which the Revised Assessment process can show where the provision in Schedule 4 Part 1 have been achieved and confirm any improvements needed to the safety report (revision plan) or intervention plans following the revised assessment procedure.
 - iii. explanation of how the demonstrations required under Schedule 4 part 1 not covered by the assessment phase will be tested following the conclusion of the assessment process by a planned, structured multi-disciplined inspection programme. Comment also that possible outcomes from these inspections may include further revision requirements to the safety report.
 - iv. Explanation of how this inspection programme will use the information in the safety report document to help the CA determine its priorities. The Inspection Planning process will include a review of the Report by the relevant Technical Specialists. This will lead to a prioritised Intervention Plan that will focus on any significant inspection issues arising from both the Assessment phase and the Inspection planning phase.
- 3.8 Request the operator to specify whether redundant copies of safety report documents should be returned or destroyed, bearing in mind that multiple copies may be required in the future, as and when revisions are submitted for assessment;
- 3.9 A statement advising the operator that:
- i. under Schedule 8 of COMAH this letter communicating the conclusions of the CA assessment of the safety report document will be made available to the public via the COMAH public register;
 - ii. if the letter contains any information they believe should be excluded from the register, on the grounds of commercial or personal confidentiality, they should apply to the Assessment Manager, within 28 days of receipt of this letter, for its exclusion to be considered;
 - iii. if the letter contains any information they believe should be excluded from the register, on the grounds of national security, they should apply to the Secretary of State (AM to provide contact point - see Appendix 4.2) for its exclusion to be considered and notify the assessment manager that they have made such an application within 28 days - the AM should also request a copy of the application;
 - iv. if there are no issues of confidentiality or national security they should confirm this in writing to the Assessment Manager.

Example letterHazardous Installations
DirectorateACME
Site Operator Address

F.A.O.

Date 7th August 2009

Reference PN/SR/2008conc

Dear

**CONTROL OF MAJOR ACCIDENT HAZARDS REGULATIONS 1999
SAFETY REPORT: ACME Chemicals xxx/1234/2009 (Installation if relevant)**

I refer to the above COMAH report. This letter is to inform you of the conclusions of the Competent Authority (CA) following the assessment of the above report.

The report was assessed using the new assessment procedures for 5 Year Review and Revision safety reports (which can be found on the HSE COMAH web site at www.hse.gov.uk) to check whether the report still contains the minimum information requirement under Schedule 4 Part 2 of COMAH following any revisions made.

The revised assessment process for 5 Year Review and Revision safety reports uses a team approach to assess the amended report, comprising of HSE Inspectors (Regulatory and Predictive) and an Agency Inspector. As such the assessment process does not fully test the demonstration of the purposes of the report as defined under Schedule 4 Part 1 of COMAH as a structured inspection programme will test whether the site demonstrations are adequate for key safety report criteria.

In accordance with Regulation 17(1)(a), this letter contains the conclusions of the assessment by the COMAH Competent Authority. The assessment procedure and conclusions do not remove the duty placed on the operator of the establishment to ensure that all necessary measures have been taken on site to prevent major accidents and their consequences to people and the environment.

Assessment Process

The latest safety report was scheduled for receipt in November 2009. This was a five year review report following initial safety report submission under COMAH in 2004.

Prior to receipt of this report a site meeting was held on 19th June 2009 to discuss the scope and depth of the safety report review. At this meeting we discussed the Review and Revision Guidance for Operators [found on the Internet at www.hse.gov.uk/comah].

Following receipt of this report a team of assessors was set up to review the report. The team included the Site Regulatory Inspector, the Agency Inspector and a Predictive Specialist who carried out a formal assessment of the changes and the continued suitability of major accident scenarios, safety management systems and site risk assessment. **Other technical specialists were not involved in this formal assessment process.**

The assessment focused on any changes to the safety report in order to ensure that the information within the report still reflects activities on the site, and continues to satisfy the requirements of the COMAH Regulations.

Documentation from the previous report assessment and its conclusion, as well as communications from site also contributed to the review process.

Assessment conclusions were generated from review of safety report information and from site visits where appropriate. (Any Site visits during Assessment Process - note dates and content.)

Team Conclusions

The assessment of the reviewed 2009 report began fully in December 2009. This covered assessment of the site five year Review of the report and the subsequent changes and amendments to that report.

The Team has now completed the examination of the safety report and concluded that no serious deficiencies, in the necessary measures to prevent major accidents, were indicated in the text of the report. **The report contains the minimum information specified in Schedule 4 Part 2.**

However, it is the team's conclusion that the report has not fully achieved the required purposes in **Schedule 4 Part 1 of the COMAH 1999 Regulations** in that the duty to take all measures necessary to prevent or mitigate major accidents as created under Regulation 4 and the duty to demonstrate it by Regulation 15(1) has not been completed sufficiently to demonstrate all risks are ALARP.

Any inadequate demonstrations identified in the safety report will be covered either by short-term amendments to the safety report (see Appendix 1) or further amendments that may arise following inspections put into the site inspection plan. Any such amendments would then be consolidated in the safety report review submission in 2014.

Appendix 1 accompanying this letter outlines additional information required in the safety report based on the above Assessment process. **You should note** the timetable for this information. Any clarifications as to what is required can be obtained from the relevant site assessor/inspector.

Intervention Planning

Under COMAH Regulation 19 the Competent Authority is required to organise an inspection plan for the site. The plan will be derived from a number of sources but those issues identified by this assessment process are identified in **Appendix 2**.

Following this assessment process the safety report will be forwarded to Technical Specialist Inspectors who will review the changes to the report as part of the inspection planning process. This process will provide input into the full intervention plans for the site.

The demonstrations required under Schedule 4 part 1 are not covered by the assessment phase and will be tested by a planned, structured multi-disciplined inspection programme. Possible outcomes from these inspections may include further revision requirements to the safety report.

This inspection process will use the information in the safety report document to determine inspection priorities for your site. This will lead to a prioritised Intervention Plan that will focus on any significant inspection issues arising from both the Assessment phase and the Inspection planning phase.

Final intervention plans will be shared with site operators approximately 3 - 4 months following completion of the assessment process.

It must be emphasised again that, regardless of the preparation, submission and assessment of these reports, it remains your responsibility as the operator of the establishment to ensure that all necessary measures are taken at the site, on a continuing basis, to prevent major accidents and limit their consequences to persons and the environment.

Public Register

Under Schedule 8 of COMAH, a copy of this letter will be placed on the Public Register. At present, no safety reports are on the Public Register until further clarification on the security implications has been received. However, conclusions letters are placed on the register. If you feel that this letter should be excluded on the grounds of commercial or personal confidentiality, you should apply to me within 28 days of receipt.

If there are no issues of confidentiality or national security, then this should be confirmed in writing to this office.

You should also indicate if any previous confidentiality requests to the CA are to be maintained.

Information for Employees

In accordance with my duties under Section 28 of the Health and Safety at Work etc. Act 1974, in order to keep employees informed about matters concerning their health and safety, I have sent a copy of this letter to....



Redundant copies

Please specify whether redundant copies of the reports should be destroyed or returned to you.

Should you have any questions, please do not hesitate to contact me.

Yours faithfully

H.M Inspector of and Safety Report Assessment Manager

HID CI
etc

Encl

Appendix 1 – Safety Report Revision requirements and timetable

Appendix 2 – Site Inspection issues following assessment

Appendix 6 – Significant Issues Register

Add following boxes: (Version in COMAH Remodelling Training – Session Supporting Documents already has similar

- Operator Name**
- Site Address**
- COIN Company ID**
- COIN Site ID**
- Inspector**
- Team/unit**

At read through, the safety report should have information present that shows:

- Identification of installations and other activities of establishment that could present major accident hazard;
- Description of areas where major accident may occur;
- Description of main activities, sources of major accident risks and conditions under which such a major accident could happen, together with description of proposed preventive measures;
- Description of processes, in particular operating methods;
- Description of dangerous substances, including inventory and conditions of storage;
- Presence of data describing physical, chemical, toxicological characteristics of dangerous substance and indication of hazards for people and environment;
- Presence of data describing physical and chemical behaviour of dangerous substance under normal conditions of use or under foreseeable accidental conditions;
- Descriptions of possible major accident scenarios and their probability or the conditions under which they occur, including summary of events which would play role in triggering each of these scenarios. This should include a link between the scenarios and the preventive measures in place;
- Assessment of the extent and severity of the consequences of identified major accidents;
- Description of technical parameters and equipment used for the safety of installations including reference to relevant design standards;
- Description of equipment installed in the plant to limit the consequences of major accidents.

For guidance in completing this form please refer to the guidance document “Roles and Responsibilities – 5 yr Review and Revision Safety Reports

Date Safety Report Received by Specialist:

Safety Report Reference Number:

4XXXXX/5YrRR

Previous assessment information supplied for site?

Yes/No

(any comments on information)

e.g. I was not the SR assessor for last submission but have been Inspector for last 2 years.

List Sections of safety report reviewed during read through process:

(Chapter, section, page numbers, appendix reference etc)

Read through included:

Issues Register – TT COMAH Intervention Planning

Discipline: -----

Notes:

Cat A = Urgent inspection ASAP – requires immediate clarification with site operator

Cat B = Priority for first work year inspection agenda

Cat C = To be considered in second work year inspection agenda

Derivation:

Issue from SR read through (RI)

Known Outstanding Significant Issue from previous inspection plans (OI)

Technical discipline National/Industry Sector priority issues (Sector)

Technical discipline issues from known incidents (National or Local) (Incident)

Signed:

Date initiated:

:

Last Updated:

Inspection Issues	Derivation	Safety Report Ref If applicable	Relevant SR Criteria If applicable	Cat
<p>Issue:</p>				
<p>Comment/update:</p>				
<p>Issue:</p>				
<p>Comment/update:</p>				
<p>Issue:</p>				
<p>Comment/update:</p>				
<p>Issue:</p>				
<p>Comment/update:</p>				

Inspection Issues	Derivation	Safety Report Ref If applicable	Relevant SR Criteria If applicable	Cat
<p>Issue:</p> <p>Comment/update:</p>				
<p>Issue:</p> <p>Comment/update:</p>				
<p>Issue:</p> <p>Comment/update:</p>				
<p>Issue:</p> <p>Comment/update:</p>				

Appendix 7 Technical Demonstrations Record

DEMONSTRATION RECORD - TECHNICAL ASPECTS (Mechanical/EC&I/Process Safety etc)

(For further information on the use of this document see CA Guidance on Roles and Responsibilities for review of five year safety report revisions)

Throughout the inspection cycle the duty holder, through safety report information and inspection response, must:
Demonstrate that the necessary measures have been taken to prevent and limit the consequences of major accidents;
Demonstrate that a systematic and sufficiently comprehensive approach to the identification of risk reduction measures has taken place;

Demonstrate that adequate safety and reliability have been incorporated into:

- (a) the design,
- (b) construction,
- (c) operation,
- (d) maintenance, linked to the major accident hazards in the establishment.

N.B. At any time during the intervention cycle

The Technical Specialist should ask if there is any apparent evidence that there is a serious deficiency in the measures taken to prevent, limit and mitigate a major accident on site?
(if yes then remedial action is required by the Duty Holder which may include any relevant safety report amendments.)

Completion of Document

The Site Inspector/Assessor will complete relevant criteria as early as possible during the Intervention cycle and identify where changes/amendments/improvements should be made to the site safety report either in the short term (high priority issues) or in time for the next review of the safety report.

Previous assessment records should be consulted and the findings within those reports should be used (e.g. Criterion Previously met) where it is known that there have been no changes that would affect the relevant criterion

Reference can be made to any relevant criteria guidance during site inspection to ensure major technical requirements are covered

Date Initiated:

Signed:

Add following boxes:

Name of Co

COIN Service Order Number

Site Address

COIN Site ID

	Technical Criterion	Safety Report Refs
	<p>Link with predictive criteria</p> <p>12.1 The safety report should show a clear link between the measures taken and the major accident hazards described.</p> <p>Comments:</p>	
	<p>General principles</p> <p>12.2 The safety report should demonstrate how the measures taken will prevent foreseeable failures which could lead to major accidents.</p> <p>Comments:</p>	

Technical Criterion	Safety Report Refs
<p style="text-align: center;">Design</p> <p>12.2.1.1 The safety report should show that the establishment and installations have been designed to an appropriate standard.</p> <p>Comments:</p>	
<p>12.2.1.2 The safety report should show that a hierarchical approach to the selection of measures has been used.</p> <p>Comments:</p>	
<p>12.2.1.3 Layout of the plant should limit the risk during operations, inspection, testing, maintenance, modification, repair and replacement.</p> <p>Comments:</p>	
<p>12.2.1.4 Utilities that are needed to implement any measure defined in the safety report should have suitable reliability, availability and survivability.</p> <p>Comments:</p>	
<p>12.2.1.5 The safety report should show that appropriate measures have been taken to prevent and effectively contain releases of dangerous substances.</p> <p>Comments:</p>	

Technical Criterion	Safety Report Refs
<p>12.2.1.6 The safety report should show that all foreseeable direct causes of major accidents have been taken into account in the design of the installation.</p> <p>Comments:</p>	
<p>12.2.1.7 The safety report should show how structures important to safety have been designed to provide adequate integrity.</p> <p>Comments:</p>	
<p>12.2.1.8 The safety report should show how the containment structure has been designed to withstand the loads experienced during normal operation of the plant and all foreseeable operational extremes during its expected life.</p> <p>Comments:</p>	
<p>12.2.1.9 The safety report should show that materials of construction used in the plant are suitable for the application.</p> <p>Comments:</p>	
<p>12.2.1.10 The safety report should show that adequate safeguards have been provided to protect the plant against excursions beyond design conditions.</p> <p>Comments:</p>	

Technical Criterion	Safety Report Refs
<p>12.2.1.11 The safety report should describe how safety-related control systems have been designed to ensure safety and reliability.</p> <p>Comments:</p>	
<p>12.2.1.12 The safety report should show how systems which require human interaction have been designed to take into account the needs of the user and be reliable.</p> <p>Comments:</p>	
<p>12.2.1.13 The safety report should describe the systems for identifying locations where flammable substances could be present and how the equipment has been designed to take account of the risk.</p> <p>Comments:</p>	
Construction	
<p>12.2.2.1 The safety report should show that the installations have been constructed to appropriate standards to prevent major accidents and reduce loss of containment.</p> <p>Comments:</p>	
<p>12.2.2.2 The safety report should describe how the construction of all plant and systems is assessed, and verified against the appropriate standards to ensure adequate safety.</p> <p>Comments:</p>	

Technical Criterion	Safety Report Refs
<p>Operation</p>	
<p>12.2.3.1 The safety report should show that safe operating procedures have been established and are documented for all reasonably foreseeable conditions.</p>	
<p>Comments:</p>	
<p>Maintenance</p>	
<p>12.2.4.1 The safety report should show that an appropriate maintenance scheme is established for plant and systems to prevent major accidents or reduce the loss of containment in the event of such accidents.</p>	
<p>Comments:</p>	
<p>12.2.4.2 The safety report should show that there are appropriate procedures for maintenance that take account of any hazardous conditions within the working environment.</p>	
<p>Comments:</p>	
<p>12.2.4.3 The safety report should show that systems are in place to ensure that safety critical plant and systems are examined at appropriate intervals by a competent person.</p>	
<p>Comments:</p>	
<p>12.2.4.4 The safety report should show that there is a system in place to ensure the continued safety of the installations based on the results of periodic examinations and maintenance.</p>	
<p>Comments:</p>	

Technical Criterion	Safety Report Refs
<p>Modifications</p> <p>12.2.5.1 The safety report should describe the system in place for ensuring modifications are adequately conceived, designed, installed and tested.</p>	
<p>Comments:</p>	

Appendix 8 – COMAH Intervention Plan

COMAH Competent Authority Intervention Plan: Period covered April 2010 – March 2013

This intervention plan describes the regulatory intent of the COMAH competent Authority for this site in accordance with Regulation 19 of the Control of Major Accident Hazard Regulations 1999 (as amended). The purpose of delivering the plan is to ensure that the:

1. Operator can demonstrate that he has taken appropriate measures to prevent major accidents
2. Operator can demonstrate they have provided appropriate means for limiting the consequences of major accidents both inside and outside the establishment
3. Information contained in any report sent to the competent authority by the operator of the establishment adequately reflects the conditions in the establishment.

Part A:

Site Information Summary

Client name			COMAH Status	
COIN Site ID.		COIN Case No.	TT/LT	
Safety report 5-year review - Re-submission date.				
Site and site processes: overview				
Site inspector		Email / Tel:		Sign off date:
Agency Inspector		Email / Tel:		Sign off date:

Part A (continued):

Intervention plan review and sign – off

Original Intervention plan			
	Name	Signature	Sign off date:
HSE inspector Agency inspector Team Leader HSE Team Leader (agency) Head of Operations			
1st Review 2010			
	Name	Signature	Sign off date:
HSE inspector Agency inspector Team Leader HSE Team Leader (agency) Head of Operations			
2nd Review 2011			
	Name	Signature	Sign off date:
HSE inspector Agency inspector Team Leader HSE Team Leader (agency) Head of Operations			

3rd Review 2011			
	Name	Signature	Sign off date:
HSE inspector			
Agency inspector			
Team Leader HSE			
Team Leader (agency)			
Head of Operations			

Part B: INTERVENTION GROUPINGS

Enforcement, investigation of serious incidents and complaints and the completion of planned inspections remain priorities for the Competent Authority. The CA will sample systems and arrangements to test the control and mitigation arrangements on site. Planned inspections will focus on the following areas.

1 LEGACY ISSUES Items that have been raised with the duty holder or inspected but not yet closed out.				
Reference (previous plan)	Origin	Description	Status * see note 13	Date raised

2. SITE SPECIFIC PRIORITIES FOR INSPECTION				
Reference (previous plan)	Origin	Description	Status * see note 13	Date raised

3. COMPETENT AUTHORITY STRATEGIC PRIORITIES National priorities in the Competent Authority business plan.					
Reference (previous plan)	Origin	Description	Delivery Guide	Status * see note 13	Date raised
	Strong leadership	Development and implementation of process safety KPIs	DG 2e		
	Management of Integrity	Ageing Plant	DG 2K		
	Buncefield follow up and application of the CA Containment Policy	Overflow Protection	DG 2p		
		Secondary and tertiary containment	DG 2q		
	Mitigating the consequences High standards of Emergency preparedness and response	On -site	DG 6		
		Off-site	DG 7b		

Part C: ANNUAL INTERVENTION PLAN

INTERVENTION PLAN: 2010 - 11						
No.	Description	Group (from part B) *see note 14	Specialist Resource *see note 15	Resource days	Target completion date	Outcome *see note 16
COIN ref / 1						
COIN ref / 2						
Total						

INTERVENTION PLAN: 2011 – 12						
No.	Description	Group (from part B) *see note 14	Specialist Resource *see note 15	Resource days	Target completion date	Outcome *see note 16
COIN ref / 1						
COIN ref / 2						
Total						

INTERVENTION PLAN: 2012 – 13						
No.	Description	Group (from part B) *see note 14	Specialist Resource *see note 15	Resource days	Target completion date	Outcome *see note 16
COIN ref / 1						
COIN ref / 2						
Total						

Notes

Part A: Sign off

1. Sign – off: The Combined effect of the B2 and B1 countersignatures is to assure that there is an appropriate COMAH Regulation 19 intervention plan.

Team Leader (Band 2) should ensure that the plan covers the appropriate issues as defined in intervention plan guidance and either allocates the necessary priority and resources or if not, identifies the outstanding issues for the Band. For top tier sites this plan MUST be signed off by B1 Head of Operations prior to input to COIN.

Head of Operations (Band 1) should ensure that the intervention plan meets the criteria laid down in the paragraph above, that any outstanding issues (especially resourcing) are progressed and that the proposals in the plan are consistent with the overall CA, HSE and CID strategies.
2. As part of the annual review of plans: the work to review plans described by SPC /Admin/70 and the effort required to transfer to this standard template is fully cost recoverable.

Part A: Site information summary

3. The information in the summary should reflect the information contained in COIN

Part B: Intervention Groupings:

Part B – 1 : Legacy Issues

4. The definition of 'legacy' issues is: those items on the plan that have already been raised with the company or inspected but not closed out.
5. A discussion should take place to consider whether or not enough has already been done on the particular issue concerned and / or whether it can be brigaded into other tasks, or closed out on the plan. Whatever decision is made, it must be recorded clearly on the existing plan with appropriate justifications given.
6. Record interventions related to checking compliance with enforcement notices

Part B – 2 : Site Specific Priorities

7. Record any intervention related to a critical aspect of the duty holders control / mitigation arrangements (Discipline specialist advice may be necessary here)

Part B – 3: Competent Authority Strategic Priorities

8. If the CA strategic priorities are not reflected in the plan then they should be added where appropriate
9. If the CA strategic topic has already been inspected, complete a gap analysis using the relevant Delivery Guide to see if any further work is needed and restrict any intervention to closing the gap

Part C: Annual Intervention Plan.

10. Having produced a prioritised list of interventions in Part B, inspectors should then brigade related topics / common themes where possible. This allows the opportunity to close out in as few site visits as possible and may inform decision making about team inspections.
11. Experience indicates that one effective way of doing this is to base the inspection around a key major accident hazard scenario.
12. Alternatively, interventions can be grouped into packages of work that that can be done at the same time according to the allocated priority.
13. Describing the intervention issue STATUS of individual topics consistently: You should only select one of the following four values below:
Completed and closed out |OR| Follow up inspection required to check compliance |OR| Improvement Notice issued |OR| Carry over to next year
14. Describing the intervention issue ORIGIN of the topic should be done consistently in Part C:- Grouping interventions: You should only select one of the following three values
Legacy |OR| Site priority |OR| Strategic priority
15. SPECIALIST RESOURCES should be denoted as: EA, SEPA, RI, PS, ME, CI, P, HF, Well Engineer, Geologist, Other

16. Describing the intervention issue OUTCOME of the topic should be done consistently (Part C:- Outcome column): You should only select one of the following five values
Complete |OR| outstanding |OR| abandoned |OR| deferred |OR| not resourced
17. Record the resources needed and of what specialism, including regulatory resource (to cover total preparation, site time and write-up time). Resources should be recorded to the nearest half day. This information will then form the basis of allocating resources for the relevant year work plan.

Appendix 9

COMAH Competent Authority Inspection Report

Guidance on how to complete this inspection template can be found at the end of the form

SITE DETAILS	
Company:	Location:
Inspection Title:	
Inspection Date:	
Case/Service order:	
Intervention plan ref:	

Part 1 SUPPORTING INFORMATION	
<p>Intervention Report (discipline): <i>See note 2 to enable drop down menus</i></p>	
<p>Keyword:</p> <p>Keywords relevant to topics being considered.</p> <p><i>Please select appropriate key word (S) from drop down menu.</i></p>	<p>Strong Leadership</p> <p>ITKY09_2_01 - Process safety management</p> <div style="border: 1px solid black; padding: 5px;"> <p>ITKY09_2_02 - High resilience organisations</p> <p>ITKY09_2_03 – Process Safety Performance Indicators</p> <p>ITKY09_2_04 – Competence – from board to front line</p> <p>ITKY09_2_05 – Development of new establishments (HID SI)</p> <p>ITKY09_2_06 – Oversight of design and new</p> </div> <p>Containment</p> <p>ITKY09_3_01 - MOI Ageing Plant</p> <div style="border: 1px solid black; padding: 5px;"> <p>ITKY09_3_02 – Buncefield containment policy</p> </div> <p>Mitigating the consequences of MAH</p> <div style="border: 1px solid black; padding: 5px;"> <p>ITKY09_4_01 - Emergency Preparedness</p> </div>

Persons Seen & Position:		
Inspector (s):		
Relevant Documentation seen:		
Intervention Summary:		
Recommendations - follow up action allocation: <i>(insert additional rows as required)</i>		Inspector responsible for follow up:
Item no.		
Report author:	Date of report:	Location:
Part 2 INSPECTION REPORT		
Purpose of visit:		
Method:		
Discussion:		
Findings and conclusion:		
Actions for the duty holder (legal):		
Recommendations for the duty holder (advice/best practice):		
Recommendations for the Inspector / CA Action:		

Guidance on completing the Inspection template

Disclosure to Operators

The report should be written in the expectation that it may be copied in its entirety to the duty holder **except for the following sections:**

PART 1

- Recommendations follow up allocation and Inspector Responsible for FU boxes
- Where the inspection report forms part of a composite team inspection report then the Site details section should also be deleted.

PART 2

- Recommendations for inspector

The inspector writing to the operator (usually the Site Reg. Inspector) has the responsibility of ensuring that the relevant details are deleted.

PART 1:

1. **Intervention plan Ref:** Appropriate reference from the inspection plan.
2. **Intervention Report and Keywords:** Select appropriate entry from drop down menu. If unable to select, from the Word Menu select Tools – Macro – Security – Medium.

Note: the key words reflect the CA's Priority Topics and so will not reflect all inspection topics covered.

3. **Intervention summary:** The purpose of the summary is to provide sufficient information to enable the reader them to determine if the rest of the report is of relevance to them (eg when review intervention reports for operational intelligence purposes). The following information should be included:
 - Purpose of intervention (eg why and what is being inspected)
 - Conclusions
 - Actions (eg HSE actions letter/ enforcement action)

4. **Recommendations - follow up allocation:** The purpose of this section is to capture who is responsible for taking forwards any legally enforceable follow up action (ie potential legacy issue if not addressed), including enforcement. Depending on the issues involved it maybe appropriate for the Site Regulatory Inspector or Specialist to take ownership of the follow up actions. **This section is a record of actions already agreed.**

If the report is being shared with the duty holder (as part of a team inspection report this section should be deleted).

Part 2:

5. **Purpose of visit:** Why & what was being inspected. Record information necessary to put the intervention into context i.e. national initiative arising from a number of incidents; issues identified for inspection/inspection from a safety report;
6. **Method:** Provide a brief explanation of how the inspection was conducted i.e. interviewed cross section of maintenance staff; Including: Head of Maintenance, field service engineers etc.
7. **Discussion:** This section provides an opportunity for the issues identified to be put into context, with reference to supporting material – ACOPS, standards etc.

Within this section it can often be helpful to include a technical description of the process being inspected, both for future reference, and as a means of putting issues identified into their proper context.

8. **Findings and conclusion:** Describe the inspection findings and any conclusions that can be drawn from those findings. **Identify here any inspection items that were planned but not covered.**
9. **Actions for the duty holder (legal)** the practical steps the duty holder should take to address the concerns raised necessary in the Inspectors' opinion to comply with the law (to include ref to the appropriate legislation/ACOP's etc).

In general these will be the issues that the CA will wish to actively follow up and should be included in the PART 1 **Recommendations Follow up Allocation** boxes

10. **Recommendations for the duty holder(advice/ best practice):** Recommendations to the duty holder as to best practice – but not legally enforceable.

11. **Recommendations for the Inspector:** In this Section the author of the report should provide a steer to the Site inspector how best the issues identified can be taken forwards including advice with respect to the compliance gap and potential enforcement action.

The inspection team should normally agree the level of enforcement needed at the end of the inspection - and this should be reflected in recommendations given in inspection report completed by each of the inspectors.

If the inspection report is being prepared by the site inspector then it should simply detail their proposed action.

This section should not be copied to the operator.