DISCUSSION PAPER

Framework

for

Assessing and Demonstrating HSE Compliance

Prepared by Upstream Petroleum Industry Regulators
for consultation with Oil and Gas Industry

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Contents

SCOPE OF PAPER

The purpose of this discussion paper is to stimulate discussion between the upstream petroleum industry – both the offshore and onshore sectors – and the relevant regulators for this industry on the need for and the form of an organizational assessment framework for the purpose of demonstrating HSE compliance. This paper suggests a number of issues that should be considered when seeking to establish such a framework and presents a "preliminary" concept for such a framework.

The objective of such a framework is to enable individual companies to demonstrate the level of effectiveness of their systems in delivering the necessary behaviour for achieving acceptable HSE compliance and performance. If appropriately embraced by both industry and regulators, it is intended to provide consistency in regulatory expectations of the assessment of HSE compliance for the industry Australia wide.

The paper is in no way intended to represent a preconceived point of view or a *fate-accompli* but instead a stimulus for discussion and the exchange of ideas to progress the development of an effective framework for this purpose.

The framework seeks to also clarify regulatory expectations to industry for such demonstrations and assist companies and contractors in understanding the areas they need to address when assessing their level of HSE compliance. It is not a mandatory tool but meant to invite individual companies and contractors to self-assess and demonstrate their HSE performance as part of their HSE regulatory compliance obligations.

BACKGROUND

Current Regulatory Philosophy

Since the early nineties, predominately under the influence of the findings of the Lord Cullen inquiry into the 1988 Piper Alpha Disaster in the UK, the health, safety and environment (HSE) regulation of the oil and gas industry underwent a shift from the traditional prescriptive regulatory regimes to performance/objective based regimes such as Safety Case legislation.

The key feature of such regimes has been the requirement for operators to:

- Assess and identify the HSE risks associated with their activities and operations.
- Develop the necessary policies, objectives and standards to address those risks.
- Implement systems and controls to mitigate the risks to acceptable levels.
- Ensure their workforce:

    a) Is aware of these risks.
    b) Has the necessary capability (competencies and motivation) to implement the systems and controls to manage these risks.
    c) Achieve the required HSE results and behaviour.

HSE Compliance Assessment Challenge

These features are common to all jurisdictional regulatory requirements in Australia, onshore and offshore. The key challenge facing regulators is ascertaining in an effective and efficient manner the level to which these requirements are being implemented by the industry and are achieving the desired industry behaviour. It is therefore the objective of this paper to facilitate discussions between the relevant regulatory bodies and industry in how this challenge can be addressed.

For a number of years regulators have continued to ensure that their role remains focussed on addressing this challenge. As part of this process, in early 2006 a number of Australian onshore upstream oil and gas industry regulators commenced discussions to progress a way forward in addressing this challenge in a consistent manner across all jurisdictions. The outcome of these initial discussions was that it was agreed that:

a) A consistent framework across all jurisdictions to allow industry to assess and demonstrate its level of HSE compliance is required.
b) Any such framework needs to assess and demonstrate the level of an operator's "capacity" and "motivation/willingness" – these terms are described in the proceeding section – to achieve HSE compliance.
c) The concept of any such framework needs to be developed through a process of partnership with the industry and that for it to be effective needs industry ownership and commitment.
d) A "preliminary" concept of the framework to be established to initiate this process with the industry.
e) The services of International Safety Risk Management (ISRM) be engaged to assist in establishing a "preliminary" concept of such a framework through research to identify any current or developing practices world-wide for this purpose.
f) Upon establishing a preliminary concept seek industry involvement and input – hence the purpose of this discussion paper.

Capacity and Motivation/Willingness

In 2001 some independent research[1] was commissioned by the South Australian regulator to investigate where to focus its regulatory scrutiny so as to satisfy the requirements and intent of its new objective/performance based regime.

In summary the research revealed that regulatory attention needs to focus on two key inter-related areas, referred to as an operators' capacity and motivation/willingness to comply.

Capacity to comply:
This refers to the extent to which an operator can demonstrate that it has:

- Sufficient financial and technical resources, including trained workforce and Fit for purpose designed and maintained equipment; and
- Effective Management systems to enable the company to systematically achieve HSE compliance, including its: HSE Policies, Work practices/procedures, Risk management processes (eg Hazops, PTW, JHA) and Performance review and improvement processes.

Motivation/Willingness to comply:
This refers to the extent to which an operator can demonstrate that its:

- Workforce is aware and comprehends its HSE responsibilities;
- Management have committed the necessary financial and human resources to achieve compliance;
- Workforce have adequate competency and knowledge in discharging their responsibilities;
- HSE Management System is understood and practiced by the workforce at all levels, including:
    a) Workforce behaviour reflect policies;

[1] Comments on PIRSA Discussion Draft: Guideline for Classifying the Level of Official Supervision of Activities under section 74 of the Petroleum Act 2000, Dr Fiona Haines, Senior Lecturer, Department of Criminology, University of Melbourne, October 2001

b) Declared practices and procedures are implemented;
c) Proactive reporting culture & response to issues raised;
d) HSE performance objectives and standards are being achieved.

As a result of the findings of this research, it was agreed by the onshore regulators through their discussions in early 2006 that these two areas should be addressed explicitly by any proposed framework for assessing HSE compliance.

PRELIMINARY CONCEPT

On the basis of current Australian regulatory requirements for the oil and gas industry and from the findings of research carried out by ISRM, the effective implementation of the following 8 core HSE management system elements were identified as critical to achieving and maintaining HSE compliance:

1) Policies, Standards and Systems;
2) Hazard Identification and Risk Management;
3) Competency Assessment and Training;
4) Maintenance;
5) Operating procedures and practices;
6) Emergency management;
7) Performance Management;
8) Incident Management (reporting and response)

Proposed Assessment Process

In order to achieve consistency in such assessment, ISRM recommended that any such framework needs to establish a set of clear criteria against which the above elements can be assessed against and ultimately demonstrated to be:

- In place; and
- Implemented and understood by the workforce at all levels.

For the purpose of initiating and facilitating discussion three levels against which the effectiveness of the implementation of these elements can be assessed are proposed. Each of the three levels are assigned a number of 1 to 3 where 1 represents above industry acceptable practice, 2 – acceptable industry practice and 3 – identifies opportunities for improvement (see Table below).

Level 1: Above Industry Acceptable Practice	**Level 2:** Industry Acceptable Practice	**Level 3:** Opportunities for Improvement
Systems have been reviewed and approved by corporate, acknowledged by signature and would typically be implemented company wide	Systems that have been reviewed by the company for use on project specific activity only (ie. specific drilling campaign)	Little or no evidence that systems exist or in place company wide or project specific

Assessing Capacity

For assessing an organisation's capacity against each of these three levels, it is proposed that this could be achieved by assessing each of the 8 elements against a set of criteria (e.g. as proposed in Table 1). For example, a method for determining the level using these criteria could be as follows:

Level 1: Above Industry Acceptable Practice
To achieve a level 1 for any of the 8 elements with respect to the organization's "capacity", it could be that the organization needs to clearly demonstrate through tangible implementation methodologies and documentary evidence that it has satisfied **all** the relevant criteria listed in Table 1 for this level.

Level 2: Industry Acceptable Practice
To achieve a level 2 for any of the elements, where an organization is unable attain a level 1 it is suggested that the organization needs to clearly demonstrate through tangible implementation evidence that it has satisfied all the relevant criteria listed in Table 1 for this level.

Level 3: Opportunities for Improvement
Failing to meet any of the criteria listed in the "Above Industry Acceptable Practice" or "Industry Acceptable Practice" for any particular element, should automatically result in an organization being assigned to a level 3 for that element.

Capacity Score
Coinciding with each of these respective levels, a score of 1 to 3 can be assigned to each element and these can in turn be represented on a "spider web" diagram plot as shown by a hypothetical example on Figure 1. Such a diagrammatic snap shot would enable organisations to identify which elements of their 'capacity' need attention and provides them with a tool to monitor their improvement once any corrective actions have been initiated.

Assessing Motivation/Willingness

In the case of assessing an organisation's motivation/willingness to achieve HSE compliance a more complex and convoluted process than that proposed for assessing capacity would be required as suggested by ISRM.

Such a process would require assessing the level of commitment an organisation has in implementing the 8 critical elements through ascertaining the level of "understanding" and "observed behaviours" of all employees with respect to these elements. To that end, it is a proposed that this could be achieved by assessing each of the 8 elements against the following attributes of such "understandings" and "behaviours":

1) Organisational understanding of the intent and objectives of the element;
2) Management commitment to implementation of the element;
3) Procedures and work instructions for implementing the element are understood and used by the workforce;
4) Workforce skill (competency) and capability to implement the element;
5) Verification, monitoring and evaluating the implementation of the element;
6) Systematic improvement and following up in element implementation; and
7) Performance review and accountability of personnel with respect to implementation of element.

Criteria to assess the level (1, 2 or 3) to which these attributes are achieved against each of the above 8 elements are suggested to be developed along the lines of those proposed by ISRM detailed in Table 2 for the Incident Management element.

Motivation/Willingness Score
Due to this multi-dimensional nature, it is suggested that the level of an organisation's motivation/willingness to achieve HSE compliance could be assessed simplistically by assigning a single score for each element as follows. All of the individual scores for each of the attributes for understanding and behaviour, ranging from 1 for level 1, 2 for level 2 or 3 for level 3 could be added

to give a total score for each of the 8 elements. Therefore resulting in single total scores ranging from best case scenario of 7 (in the case where each attribute is found to be at level 1) through to worst case scenario of 21 (in case where each attribute is found to be at level 3).

As with “capacity” it is proposed that the results can then be presented on a “spider web” diagram, as shown by the hypothetical example on figure 2, giving an instant visual snap shot of the organization’s demonstrated motivation/willingness to achieve HSE compliance.

INDUSTRY COMMENT AND INPUT INVITATION

To ensure that any such framework is effective and practical it needs to receive the endorsement and ownership of industry. Therefore the development of this framework must be carried out through an effective process where industry and regulators partnership its development. To facilitate the commencement of such a process, this discussion paper has been prepared to stimulate initial consultations and discussions between industry and regulators. To guide initial discussions the following list of questions are offered. Additional matters and questions relating to the development of such a framework are most welcome.

1) ***Is there a need for such a framework?***
   In light of the background information provided in this paper, it is suggested that an informed discussion on whether there is a need for such a self-auditing framework is warranted.

2) ***Does such a framework already exist?***
   It is suggested to explore whether such a framework already exists, including:

   a) The extent that any such existing framework addresses operator “capacity” and “motivation/willingness” to achieve HSE compliance.
   b) The extent to which it is widely used and accepted by the industry and regulators or whether it is predominately company specific.

3) ***Are the 8 proposed HSE MS elements appropriate?***
   Suggest the need to address whether the 8 HSE Management System elements proposed above in the preliminary concept for such a self-assessment framework capture the critical areas that any such assessment should be addressing.

4) ***Does the proposal to deal with Capacity and Motivation have merit?***
   It is suggest that the importance of the proposal to assess an operator’s capacity and motivation to achieve HSE compliance separately should be explored and agreed on.

5) ***Are the 3 suggested levels for assessing the various HSE MS elements appropriate?***
   Comments and suggestions on the proposal to use 3 levels of “Level1: Above Industry Acceptable Practice”, “Level 2: Acceptable Industry Practice” and “Level 3: Opportunities for Improvement” are invited.

   It is suggested that the practicality of being able to assess and clearly delineate between levels 1 and 2 needs to be discussed and addressed.

6) ***Are the proposed criteria for assessing capacity appropriate?***
   It is suggested that the suggested criteria for each of the 8 HSE Management System elements for levels 1, 2 and 3 listed in Table 1 should be discussed in terms of their practical application.

7) ***Is the proposed method for assessing motivation/willingness appropriate?***
   It suggested that comments and suggestions be made on:

a) The Proposed 7 attributes for assessing the level of commitment an organisation has in implementing the 8 critical HSE Management System elements.
b) Whether the form and content of criteria similar to those proposed in Table 2 for the Incident Management HSE MS element are appropriate for assessing the level to which an organisation reflects the 7 attributes of demonstrable understanding and behaviour.
c) The form and content of criteria for assessing the level to which an organisation reflects these 7 attributes for each of the 8 critical HSE Management System elements.

8) ***Is the "spider web" diagram a useful tool for displaying assessment results?***
Comments and suggestions are welcome on whether the use of the "spider web" diagrams as illustrated in figures 1 and 2 provide a useful graphical display of the results of any assessment of "capacity" and "motivation/willingness".

9) ***How should these assessments be carried out and by whom?***
Suggestions are sought after on how such assessments should be undertaken and by whom. That is, need to discuss the practicality for such assessments being ongoing or at regular intervals. Also whether such assessments should be carried out internally or by third parties and to what extent should regulators be involved in such assessments.

10) ***How should the results of these assessments be used?***
Suggestions on how the results of such assessments can be used are sought after. For example:

a) Scores of 3 for "capacity" and/ or scores of 21 for "motivation/willingness" against any of the 8 critical HSE MS elements could be considered as signals for operators to take urgent corrective action and to advise regulators of such action immediately. Also such results could signal what areas the operator needs to address prior to seeking regulatory approval.
b) In cases of scores of 1 and 7 respectively could signal the justification for less regulatory scrutiny requirements.
c) The results of such assessments could be used by operators to demonstrate to regulators one of two things, first, the level of "capacity" and "motivation/willingness" at any point in time and second, the extent of any progress of any corrective action implemented by any operator to address any identified shortcomings of any of the 8 critical HSE MS elements.

Table 1: Proposed Criteria for Assessing Organisational Capacity

Critical HSE MS Element		Above Industry Acceptable Practice	Industry Acceptable Practice	Opportunities for Improvement
Policies, Standards and Systems (PSS)		Sufficient documentary evidence is available and provided to demonstrate:		
	1	Approved PSS in place company wide	PSS are in place for the specific projects	Little or no evidence of PSS in place company wide or for specific projects
	2	Philosophy and expectations of PSS are communicated company wide	PSS are communicated to specific project field personnel	Little or no evidence of PSS communicated across company over past 12 months
	3	Management, supervisors and HSE Reps actively involved in PSS implementation process	Management, supervisors and HSE Reps are involved in PSS implementation	Little or no evidence of management, supervisors or HSE Reps involved in PSS implementation over past 12 months
	4	Deficiencies in PSS are continually assessed, tracked and actioned	Deficiencies in PSS are generally documented and acted upon	Little or no evidence of identification or tracking of PSS deficiencies documented or acted upon over past 12 months
	5	PSS is achieving discernible improvements	PSS implementation are achieving continuous improvements	Little or no evidence of any visible PSS improvement over previous 12 months
Hazard Identification and Risk Management System (HIRMS)		Sufficient documentary evidence is available and provided to demonstrate:		
	1	Approved HIRMS and processes in place company wide	HIRMS processes in place for specific projects	Little or no evidence of HIRMS processes in place company wide or for specific projects
	2	HIRMS and processes communicated company wide	HIRMS processes are communicated to specific project filed personnel	Little or no evidence of HIRMS processes communicated across company or specific projects in past 12 months
	3	Management, supervisors and HSE Reps actively involved in HIRMS processes	Management, supervisors and HSE Reps involved in implementation of HIRMS processes	Little or no evidence of management, supervisors or HSE Reps involved in HIRMS processes implementation over past 12 months
	4	Deficiencies in HIRMS processes are continually assessed, tracked and actioned	Deficiencies in HIRMS processes generally documented and acted upon for specific projects	Little or no evidence of identification or tracking of HIRMS deficiencies documented or acted upon over past 12 months
	5	HIRMS processes are achieving discernible improvements	Implementation of HIRMS processes are achieving continuous improvements	Little or no evidence of any improvements in HIRMS processes over past 12 months

Critical HSE MS Element		Above Industry Acceptable Practice	Industry Acceptable Practice	Opportunities for Improvement
Competency Assessment and Training System (CATS)		Sufficient documentary evidence is available and provided to demonstrate::		
	1	Approved CATS programs in place company wide	CATS processes in place for specific projects	Little or no evidence of CATS processes in place company wide or for specific projects
	2	CATS processes communicated company wide	CATS processes are communicated to specific project field personnel	Little or no evidence of CATS processes communicated company wide or for specific projects in past 12 months
	3	Management, supervisors and HSE Reps actively involved in CATS programs	Management, supervisors and HSE Reps involved in implementation of CATS programs	Little or no evidence of management, supervisors or HSE Reps involvement in CATS implementation over past 12 months
	4	Deficiencies in CATS programs and/or processes are continually assessed, tracked and actioned	Deficiencies in CATS processes generally documented and acted upon for specific projects	Little or no evidence of identification or tracking of CATS deficiencies documented or acted upon over past 12 months
	5	CATS programs and processes are achieving discernible improvements	Implementation of CATS processes are achieving continuous improvements	Little or no evidence of improvements with CATS over past 12 months
Planned Maintenance System (PMS)		Sufficient documentary evidence is available and provided to demonstrate:		
	1	Approved PMS systems in place company wide	PMS is in place for specific projects	Little or no evidence of PMS in place company wide or for specific projects
	2	PMS processes communicated company wide	PMS is communicated to specific project field personnel	Little or no evidence of PMS processes communicated company wide or for specific projects in past 12 months
	3	Management, supervisors and HSE Reps actively involved in PMS implementation and going management	Management, supervisors and HSE Reps involved in ongoing implementation of PMS	Little or no evidence of management, supervisors or HSE Reps involvement in PMS management over past 12 months
	4	Deficiencies in the PMS are continually assessed, tracked and actioned	Deficiencies in PMS are generally documented and acted upon for specific projects	Little or no evidence of identification or tracking of PMS deficiencies or close out actions over past 12 months
	5	PMS is achieving discernible improvements	Implementation of PMS is achieving continuous improvements	Little or no evidence of improvements with PMS over past 12 months

Critical HSE MS Element		Above Industry Acceptable Practice	Industry Acceptable Practice	Opportunities for Improvement
Standard Operating Procedures System (SOPS)		Sufficient documentary evidence is available and provided to demonstrate:		
	1	Approved SOPS systems in place company wide	SOPS in place for specific projects	Little or no evidence of SOPS in place company wide or for specific projects
	2	SOPS processes communicated company wide	SOPS is communicated to specific project field personnel	Little or no evidence of SOPS communicated company wide or for specific projects in past 12 months
	3	Management, supervisors and HSE Reps actively involved in SOPS implementation and processes	Management, supervisors and HSE Reps involved in ongoing implementation of SOPS	Little or no evidence of management, supervisors or HSE Reps involvement in management of SOPS over past 12 months
	4	Deficiencies in the SOPS are continually assessed, tracked and actioned	Deficiencies in SOPS are generally documented and acted upon for specific projects	Little or no evidence of identification or tracking of SOPS deficiencies or close out actions over past 12 months
	5	SOPS are achieving discernible improvements	Implementation of SOPS is achieving continuous improvements for specific projects	Little or no evidence of improvement with SOPS over past 12 months
Emergency Management System (EMS)		Sufficient documentary evidence is available and provided to demonstrate:		
	1	Approved EMS systems in place company wide	EMS in place for specific projects	Little or no evidence of EMS implementation in place company wide or for specific projects
	2	EMS processes communicated company wide	EMS is communicated to specific project field personnel	Little or no evidence of EMS communicated company wide or for specific projects in past 12 months
	3	Management, supervisors and HSE Reps actively involved in EMS implementation and processes	Management, supervisors and HSE Reps involved in ongoing implementation of EMS	Little or no evidence of management, supervisors or HSE Reps involvement in management of EMS over past 12 months
	4	Deficiencies in the EMS are continually assessed, tracked and actioned	Deficiencies in EMS are generally documented and acted upon for specific projects	Little or no evidence of identification or tracking of EMS deficiencies or acted upon over past 12 months
	5	EMS is achieving discernible improvements	Implementation of EMS is achieving continuous improvements for specific projects	Little or no evidence of improvement with EMS activities over past 12 months

Critical HSE MS Element		Above Industry Acceptable Practice	Industry Acceptable Practice	Opportunities for Improvement
Performance Management Assessment System (PMAS)		Sufficient documentary evidence is available and provided to demonstrate:		
	1	Approved annual PMAS process in place company wide	Annual PMAS processes defined for specific projects	Little or no evidence of PMAS processes in place company wide or project specific
	2	Annual PMAS processes communicated to all company personnel	PMAS process communicated to specific project field personnel	Little or no evidence of PMAS processes communicated to company personnel
	3	Management, supervisors and HSE Reps actively involved in PMAS implementation and processes	Management, supervisors and HSE Reps involved in PMAS auditing at project specific levels	Little or no evidence of management, supervisors or HSE Reps involvement in organized PMAS program over previous 12 months
	4	Deficiencies in the PMAS are continually assessed, tracked and actioned	Deficiencies in PMAS are generally documented and acted upon for specific projects	Little or no evidence of identification or tracking of PMAS deficiencies documented or acted upon over past 12 months
	5	PMAS processes are achieving visible improvement	Implementation of PMAS is achieving continuous improvements for specific projects	Little or no evidence of any visible PMAS improvement over previous 12 months
Incident Reporting and Investigation System (IRIS)		Sufficient documentary evidence is available and provided to demonstrate:		
	1	Approved IRIS is in place company wide	IRIS defined and in place for specific projects	Little or no evidence of IRIS processes in place company wide or project specific
	2	IRIS processes communicated company wide	IRIS is communicated to specific project field personnel	Little or no evidence of IRIS communicated to company personnel
	3	Management, supervisors and HSE Reps actively involved in IRIS implementation and processes	Management, supervisors and HSE Reps involved in IRIS implementation project specific levels	Little or no evidence of management, supervisors or HSE Reps involved in IRIS processes over past 12 months
	4	Deficiencies in IRIS are continually assessed, tracked and actioned	Deficiencies in IRIS are generally documented and acted upon for specific projects	Little or no evidence of identification or tracking of IRIS deficiencies documented or acted upon over past 12 months
	5	IRIS processes are achieving visible improvement	Implementation of IRIS is achieving continuous improvements for specific projects	Little or no evidence of improvement with IRIS activities over past 12 months

Table 2 Proposed Criteria for Assessing Attributes of Understanding and Behaviour

Element: Incident Management (Reporting and Response)

	Attributes of Understanding and Behaviour	Above Industry Acceptable Practices – Level 1	Industry Acceptable Practices – Level 2	Opportunities for Improvement – Level 3
1	Ensure the understanding of the intent and objectives of the element	We have a clear and articulated plan to reduce incident levels in our organisation and are confident our people understand this plan	We have a plan for the reduction of incident levels in the future and strive to achieve this	We don't want incidents but don't have a vision for what that looks like and have not communicated this to our people
		We have strategies and policies in place that indicate how to manage incidents and have made sure all our employees understand them	We have strategies and policies in place for IM and supervisors and leaders know how to apply them	We don't have specific policies or strategies in place for how to achieve lower levels of incidents
		We have specific periodic objectives for the reduction of all incidents and have communicated this to all our people	We have set objectives for incident levels	We have not set specific objectives for incident levels
		We make sure that everyone understands how important the reduction incidents is for our organisation and take every opportunity to express this	We have explained to our people that it is important to reduce incidents	We assume that people understand how important it is to reduce incidents
2	Management intent and commitment to implement the element	We have clear accountabilities with regards to the reporting of all categories of incidents	Most supervisors stimulate people to report all incidents	Incident reporting levels depend on whether people want to fill out the reports or not
		We have clear accountabilities with regards to investigating all incidents	Most incidents will be investigated. Who is involved will be determined case by case	Some incidents will be investigated depending on the circumstances
		We have clear accountabilities with regards to following up actions resulting from incident investigations	We produce follow-up actions as a result from incident investigations	We don't systematically follow up actions from incident investigations
		We make time and provide resources and have a nominated budget to investigate all incidents	We make time and provide resources and have a nominated budget to investigate most incidents	We have no specific budget for incident investigation and don't always have time or resources for incident investigations
		We systematically communicate the results of all incident investigations and associated follow-up actions to all employees	We communicate some of the results of incident investigations and follow-up actions to all employees	We don't communicate the results of incident investigations and follow-up actions to all employees

		Above Industry Acceptable Practices – Level 1	Industry Acceptable Practices- Level 2	Opportunities for Improvement – Level 3
3	Understanding and use of procedures and work instructions for implementing the element	We have an IM system in place that is understood and practical and is communicated to all employees	We have an IM system in place that is communicated to all employees	We have an IM system in place and we assume supervision communicate that and employees use it
		Our incident reporting system is very easy to use doesn't require much time and people have no issue using it	We have an incident reporting system in place and people know how to use it	We have no clear incident reporting system in place
		Our people on all levels in the organisation willingly use the procedures and tools in handling incidents	We have clear procedures in place on how to handle incidents and most people use it because they have to	We have some procedures in place on how to handle incidents but are not sure if people do and want to use it
		We control systematically all incidents and incident related documents	We document all incidents	We don't have a consistent document control system in place that handles incident related documents
4	Workforce skill and capability for implementing the element	All our people are aware of our IM system and understand their responsibility towards IM	Most People are aware of our IM system and can use it, sometimes with help of their supervisor	The capability of people to use the IM system depends on their supervisor
		We have trained all personnel in reporting incidents	We have trained some people in reporting incidents	We have not specifically trained people in reporting incidents
		We have put significant effort in getting people to understand why we need to report incidents	We have let people know that it is important to report incidents	We assume people understand why they need to report incidents
		We consistently stimulate people to pro-actively think and act to avoid incidents rather than to re-actively respond to incidents and learn from them	We have taken some initiatives to make people think and act pro-actively	Our approach is predominantly re-active
		We make sure that people have no fear of reporting incidents	People should have no fear of reporting incidents	We don't know if people have issues with reporting incidents

		Above Industry Acceptable Practices – Level 1	Industry Acceptable Practices – Level 2	Opportunities for Improvement – Level 3
5	Monitoring and evaluating the implementation of the element	We regularly check whether people are able to report incidents	Most people have had training in reporting incidents so we assume they can do it	We assume all incidents are being reported
		We regularly check whether people feel comfortable with reporting incidents	We have the impression that most people are willing to report incidents	We don't check weather people are willing to report incidents
		If we find out that people do not feel comfortable with reporting incidents we take action	We stimulate supervision to monitor incident reporting and communicate the importance of it	Supervision should monitor people to make sure they report incidents
6	Systematic improvement and follow-up in element implementation	We analyse systematically the root and other causes of incidents	We analyse root and other causes only for certain incidents	We have no policy in place for which incidents to investigate and which not
		We systematically implement actions that follow incident investigations	We follow up actions for incidents occasionally	We have no mechanism in place to follow up actions following incident investigations or root cause analysis
		We communicate root causes of all incidents to all employees to make sure our organisation learns from what happened	We communicate incidents to all employees	People will find out about incidents through talking with their supervisors and peers
		We train people systematically on subjects related to common causes for incidents	We occasionally train people on subjects related to common causes for incidents	There is no training following identification of common causes for incidents
		We have a substantial budget for improvement programs to eliminate causes of incidents	We have some budget for improvement programs	Getting money for improvement programs is always very difficult

		Above Industry Acceptable Practices – Level 1	Industry Acceptable Practices – Level 2	Opportunities for Improvement – Level 3
7	Performance review and accountability of personnel with respect to implementation of element	We periodically have a performance review with all employees in the organisation	Performance reviews are only held with some employees or are held irregularly	We hardly do any performance reviews or very irregularly
		We discuss the capability and willingness of employees to report incidents during performance reviews	We have an idea of who can/will and cannot/will not report incidents but do not discuss this with employees	We are not sure what the capability and willingness is of employees to report incidents
		We formally reward people that systematically comply with our IM System	The reward for good behaviour around IM depends strongly on the quality of the supervisor/manager	We don't reward or compliment employees who systematically report incidents or unsafe behaviour
		We hold people accountable that do not comply with our IM System	Holding employees accountable for not complying with IM practices depends on the quality of the supervisor/manager	We are not very good in holding people accountable for not complying with IM-practices
		We have a support/development system in place to improve employees performance on IM	We sometimes follow up employees that do not demonstrate the right behaviours with respect to Incident Management	We don't follow up employees that do not demonstrate the right behaviours with respect to Incident Management

Figure 1: Spider Web Diagram Demonstration of Capacity to Comply

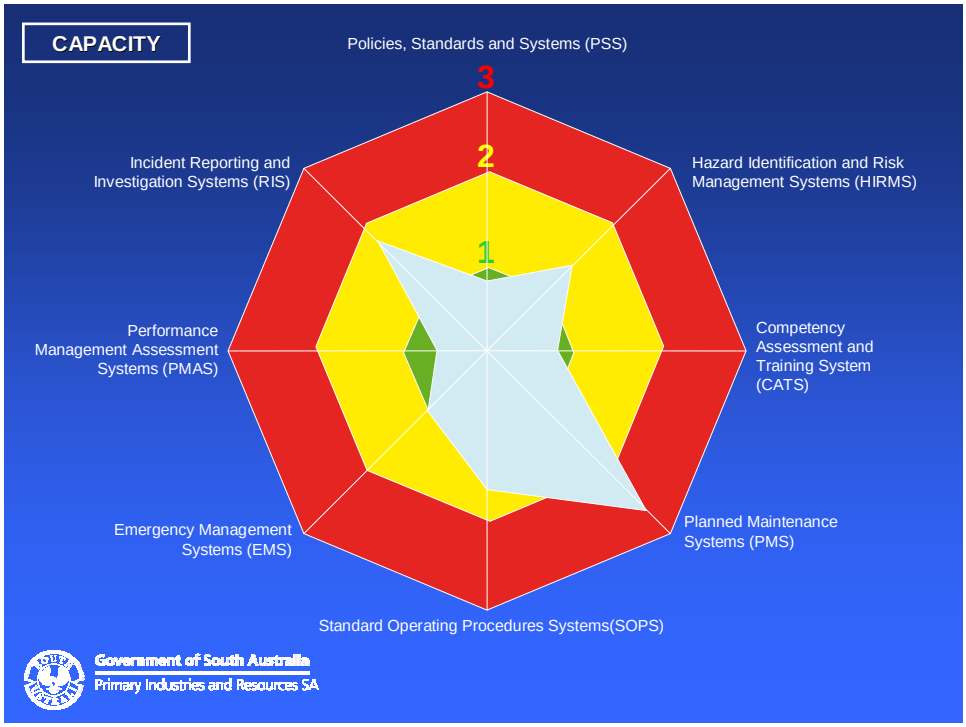
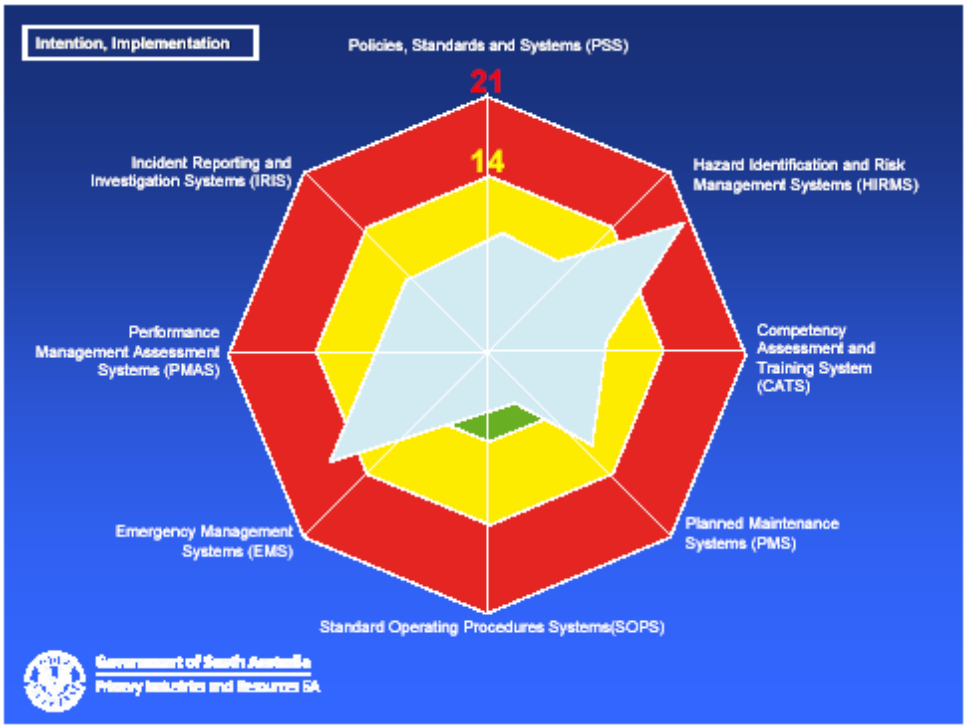


Figure 2: Spider Web Diagram Demonstration of Motivation/Willingness to Comply



Note: The capacity 'spider web' diagram would consist of a score of 1 at the inner green area boundary, a score of 2 at the yellow or middle area boundary and a score of 3 on the outer red boundary. In the case of the motivation/willingness, the outer green boundary will consist of a score of 7, the outer yellow boundary a score of 14 and the outer red boundary a score of 21.