

VPH ATTACHMENTS
LTD
OH&S MANUAL

20/05/2024



REVISION AND AMENDMENT REGISTER

DATE	PAGE NUMBER	PROCEDURE NUMBER	REVISION DETAILS	ISSUE NUMBER
20/05/2024			Initial Document	1



INTRODUCTION

This OH&S Management System Manual is the means by which the 'Organisation' satisfies the requirements of the ISO 45001: 2018 standard. The manual follows a process-based approach made up of Core, Support and Management processes to provide the most effective means for implementation of the standard.

Top Management ensure that it's OH&S Policy and procedures are communicated and understood by its staff and interested parties for the scope of its activities.

The OH&S Management System is periodically and systematically reviewed for continual improvement. The OH&S Management System is dependent on a number of key factors which can include:

- a) Top management leadership, commitment, responsibilities and accountability;
- b) Top management developing, leading and promoting a culture in the Organisation that supports the intended outcomes of the OH&S management system;
- c) Communication;
- d) Consultation and participation of workers, and, where they exist, workers' representatives;
- e) Allocation of the necessary resources to maintain it;
- f) OH&S policies, which are compatible with the overall strategic objectives and direction of the Organisation;
- g) Effective processes for identifying hazards, controlling OH&S risks and taking advantage of OH&S opportunities;
- h) Continual performance evaluation and monitoring of the OH&S management system to improve OH&S performance;
- i) Integration of the OH&S management system into the Organisation's business processes;
- j) OH&S objectives that align with the OH&S policies and take into account the Organisation's hazards, OH&S risks and OH&S opportunities; and
- k) Compliance with its legal requirements and other requirements.



OH&S POLICY STATEMENT

The Health & Safety Policy document, including Statement of Intent, Responsibilities and Arrangements will not be included within this Management system. Should it be required to view, the Organisation will make it available to interested parties. The OH&S Policy is held on (define hard copy or electronic) and is maintained by VPH Attachments Ltd.

The OH&S Policy is made available to all relevant interested parties including members of the general public.

The OH&S Policy is subject to regular Management Review in order to ensure that it remains relevant and appropriate to the Organisation's activities.



SCOPE

Scope Statement

VPH Attachments Ltd has determined the scope of the management system and this is recorded on the ISO 45001:2018 Certificate as follows:

THE PROVISION OF PLANT AND PLANT ATTACHMENT HIRE ALONG WITH PLANT DRIVER HIRE

Location(s)

The scope of the management system applies to the following geographical locations:

Unit 1
Rosse Close,
Washington,
Tyne and Wear,
England,
NE37 1ET

Permissible Exclusions

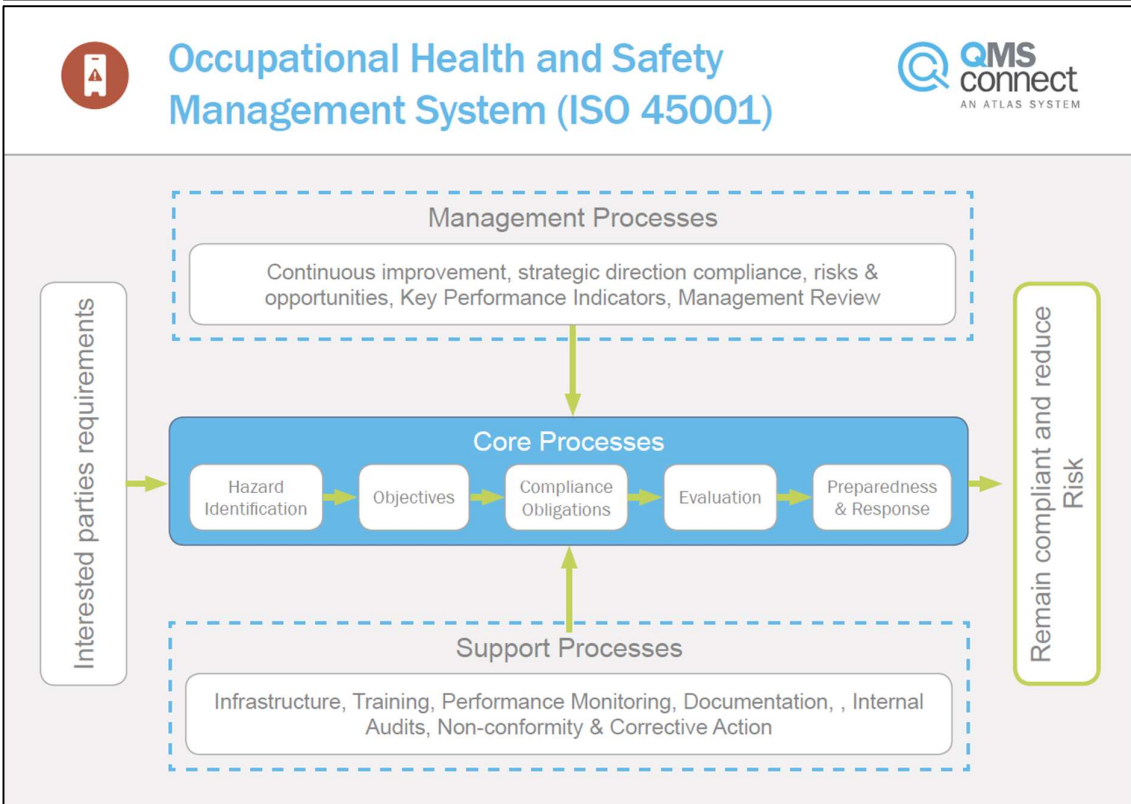
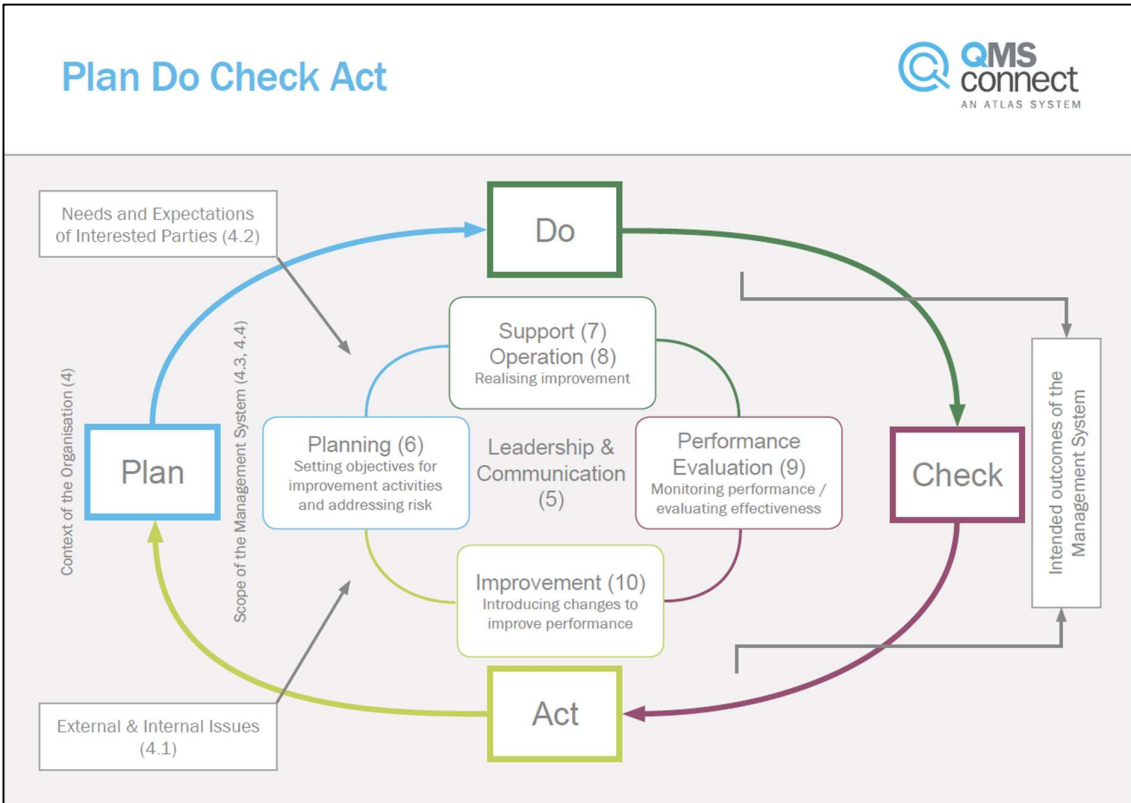
VPH Attachments Ltd claims no exclusions from the ISO 45001:2018 Standard.

Scope of the Management System

The Management System helps the Organisation to achieve the intended outcomes of its OH&S Management System, which provide value for health & safety requirements, the Organisation itself and interested parties. Consistent with the Organisation's OH&S Policy, the intended outcomes of the OH&S Management System include:

1. Enhancement and continual improvement of OH&S performance;
2. Fulfilment of legal and other compliance obligations; and
3. Achievement of OH&S Objectives.

It is applicable to the OH&S risks under the Organisation's control, taking into account factors such as the context in which the Organisation operates and the needs and expectations of its workers and other interested parties.





OH&S MANAGEMENT SYSTEM

Clause 4.4

MANAGEMENT SYSTEM AND ITS PROCESSES

The Organisation has established and operates a Management System in accordance with the requirements of the International Standard through the defined processes and documented information that can be found in:

- This QMS Management System; and
- The Organisation's Policies, Processes and Procedures.

The Organisation maintains and retains documented information where required by the International Standard.

The Management System is based on the Plan-Do-Check-Act cycle as follows:

Plan: Establish objectives, processes and resources to deliver results and to address risk and opportunity.

Do: Implement the plan; operate and support the process to realise the product and service.

Check: Monitor, study, chart and evaluate the performance and outcomes against the targeted objectives.

Act: Analyse to determine causes of deficiencies. Take actions to improve performance.



PLANNING & RISK MANAGEMENT

Clause 4.1, 4.2, 4.3, 6.1, 6.1.2, 6.1.4, 6.2

CONTEXT OF THE ORGANISATION

The Organisation's external and internal context is determined, identified, evaluated and reviewed through processes such as:

- Informal Discussion;
- Weekly Operational, Financial and Commercial Reviews;
- Monthly Board Meetings;
- The Business Plan;
- Project Reviews both internal and with Customers; and
- Pre-Commencement Meetings.

Where required the Organisation may request or retain the services of external consultants with the appropriate competence with regard to the external or internal context.

UNDERSTANDING THE NEEDS AND EXPECTATIONS OF WORKERS AND OTHER INTERESTED PARTIES

The Organisation has determined its relevant interested parties, along with their requirements with regard to the Management System.

The interested parties that are relevant to the Management System are defined as:

- Customers;
- Employees;
- Providers;
- Management Shareholders;
- Statutory and Regulatory bodies;
- Industry bodies;
- External Audit parties; and
- Neighbouring businesses.

The significant requirements of these interested parties include:

- The consistent provision of products and services which meet customer requirements;
- The continual enhancement of customer satisfaction;
- A safe and pleasant working environment; and
- Adherence to legal and regulatory requirements.

SCOPE OF THE MANAGEMENT SYSTEM

The Scope of the Organisation's Management System has been defined and documented and is subject to periodic review to ensure its continuing relevance.

Any non-applicability or exclusions are specified within the Scope.



ACTIONS TO ADDRESS RISKS & OPPORTUNITIES

OH&S Management System planning forms part of the Management Review process.

The Organisation holds regular management and operational review meetings to set and monitor the OH&S related Objectives, ensuring that risks and opportunities are included as part of this process to the extent considered necessary.

Wherever risks and opportunities are identified and where considered appropriate by management, suitable treatment is documented and implemented.

The Organisation's OH&S hazards relating to its activities have been identified. Detailed Risk Assessments are in place for all identified hazards and recorded in the form of Risk Assessments.

In identifying hazards, account is taken of:

- Physical processes, i.e. working at height;
- Chemical and/or biological, i.e. Wile's Disease;
- Psychosocial activities, i.e. stress, bullying, harassment;
- Physiological, i.e. extreme temperatures;
- Mechanical and/or electrical;
- All personnel including sub-contractors, visitors and other interested parties; and
- All facilities including those provided by others.

Risk Assessments can be defined as follows:

- Generic Risk Assessments;
- Site Risk Assessment;
- Operational Risk Assessments; and
- Dynamic Risk Assessment – to identify change to a Risk Assessment during works.

Applicable legislation and regulations are identified and maintained as part of day-to-day management activities and more formally during Management Reviews and are documented within the Compliance Register.

The Organisation regularly reviews relevant OH&S regulations, as listed at <http://www.hse.gov.uk/legislation/> and as applicable to:

- Activities;
- Processes including plant and equipment;
- Materials;
- Workers; and
- Location including any special facilities needed.

The H&S Policy, Compliance Register and any associated information are updated accordingly to reflect the amendments. Changes are identified through reference to <http://www.hse.gov.uk/legislation/statinstruments.htm>



Arrangements are evaluated against the Health & Safety guidelines as set out within <http://www.hse.gov.uk/pubns/books/index-hsg-ref.htm>.

Management is responsible for ensuring that the Organisation takes appropriate actions to address its:

- Significant OH&S Hazards and Risks;
- Compliance obligations;
- Risks and opportunities; and
- Objectives and Targets.

OH&S OBJECTIVES

The Organisation's Objectives and Targets can take into account:

- The Organisation's compliance obligations;
- The Organisation's significant OH&S Hazards;
- The Organisation's technological options;
- The Organisation's financial options;
- The Organisation's operational options;
- The Organisation's business requirements;
- The views of external interested parties; and
- Internal feedback.

As part of Management Review, the Organisation's OH&S Hazards are reviewed in order to ensure that the information is kept up to date.



DOCUMENT MANAGEMENT

Clause 7.5

DOCUMENTED INFORMATION

GENERAL

The following items are particularly significant in contributing to the Management System(s) and ensuring the effective operation and control of its procedures:

- The Organisation's Health and Safety Policy;
- Risk Assessments;
- Method Statements;
- COSHH sheets;
- Annual Health & Safety Audit Reports;
- Certificates of Thorough Examination; and
- Monthly Inspection Plant Sheets.

CREATING AND UPDATING

When updating or creating documented information, the Organisation ensures that it is:

- Suitably identified and described;
- In a suitable format; and
- Approved and reviewed for ongoing suitability and adequacy.

New document templates are approved and controlled.

When creating documented information, consideration is given to such matters as:

- Translation into other languages;
- Software version control;
- Compatibility with technology, i.e. Tablet, Smartphone; and
- Accessibility for those with special needs, i.e. audio version.

CONTROL OF DOCUMENTED INFORMATION

Documents of external origin, determined by the Organisation to be necessary for the planning and operation of the Management System are appropriately controlled.

Templates are periodically reviewed for style and technical content prior to their issue and overall as part of the Management Review process for their continued suitability.

The Organisation may receive drawings, documents and/or data at the start of a job. Information provided by customers is verified by the application of the relevant procedures relating to production and service provision.

Electronic documented information is maintained and adequately protected to ensure resilience.

Records and similar documents are retained as required by legal, regulatory and/or contractual requirements. Documents and records are reviewed and updated as required. Superseded documents are clearly identified as such if they are required for future reference, or they are withdrawn and disposed of in order to prevent the unintended use of obsolete information.



LEADERSHIP, TRAINING, COMPETENCE & COMMUNICATION

Clause 5.1, 5.3, 5.4, 7.1, 7.2, 7.3, 7.4

LEADERSHIP AND COMMITMENT

Top management demonstrates its leadership and commitment to the Management System by:

- Defining Management System related responsibilities;
- Ensuring the implementation of the Management System and its integration into the Organisation's business processes;
- Promoting the process approach and risk-based thinking;
- Ensuring that all required resources are available;
- Understanding and meeting its customer and compliance requirements; and
- Focusing on continual improvement.

Please see reference material that includes but is not limited to: Objectives

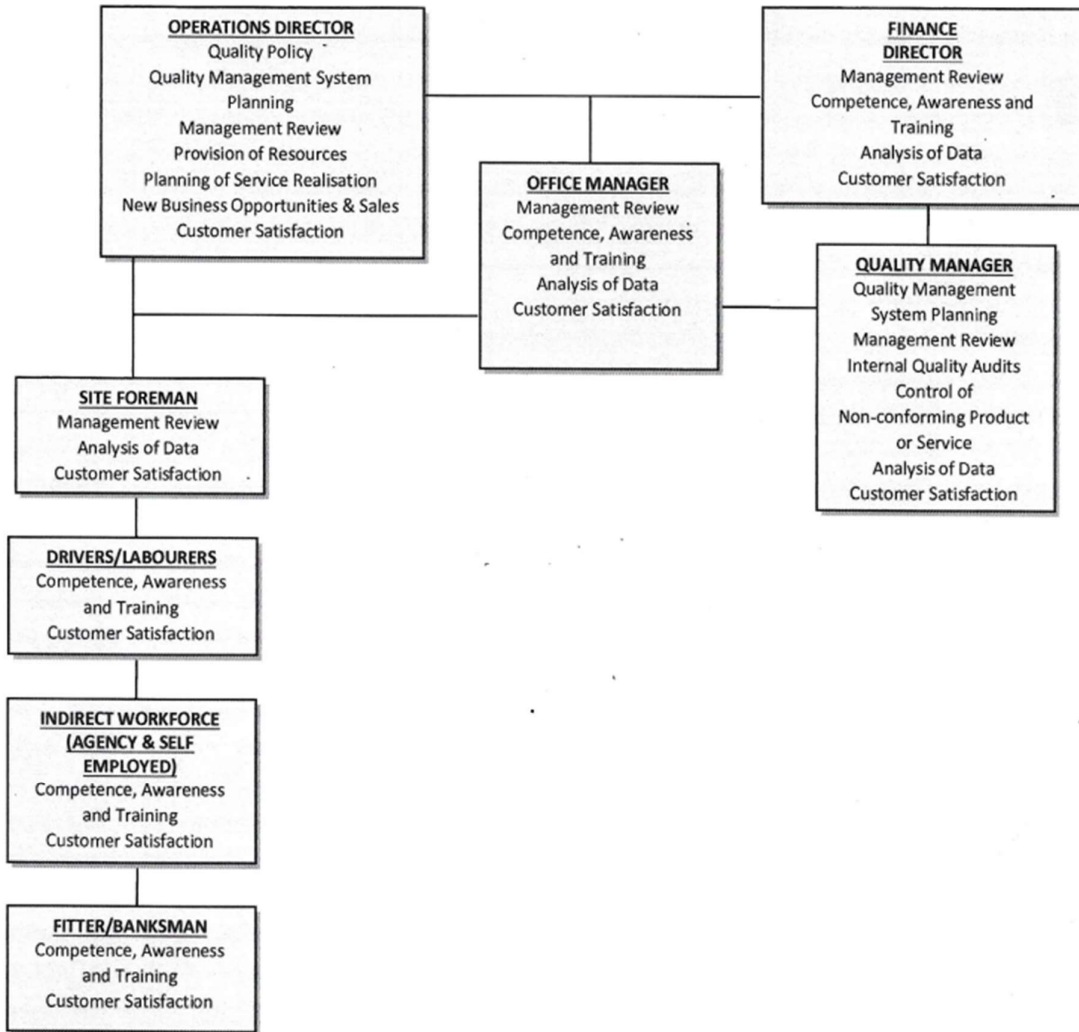
- Processes, Policies and Procedures;
- Risk Register;
- Internal Audits; and
- Management Reviews.

ROLES, RESPONSIBILITIES AND AUTHORITIES

The Managing Director ensures that responsibilities and authorities for roles within the Management System are defined and understood throughout the Organisation.



Management Responsibilities Chart





PARTICIPATION AND CONSULTATION

CONSULTATION

Appropriate methods of communicating OH&S information and instruction are used including:

- Circulation of written Health & Safety Risk Assessments;
- E-mail;
- Memoranda;
- Letters;
- Individual conversations;
- Staff meetings;
- Notice boards;
- Posters; and
- Internal publications.

PARTICIPATION

Matters addressed at the Health & Safety Meeting include:

- New legislation and regulations;
- Environmental health; and
- Staff training.

Employees and sub-contractors have open access to the competent person for the Organisation on a confidential basis to discuss specific or general Health & Safety matters.

RESOURCES

The Organisation ensures sufficient internal and external resources including competent people and other resources to respond to customer demands within a timescale that would be reasonably expected by the customer and the needs of the business. Any issues with adherence to deadlines are communicated to relevant parties and alternative arrangements agreed.

The Organisation considers:

- The level of existing internal resources in terms of their capabilities and constraints; and
- Resources which need to be obtained from external providers.

The identification of revised or additional resources required to implement and improve the processes of the Management System takes place as part of day-to-day management as well as part of the Management Review.

COMPETENCE AND AWARENESS

Members of staff and other interested parties receive appropriate training during their employment for or on behalf of the Organisation. This includes the Management System(s) Policy and individual roles and responsibilities within the operation of the Management System(s) and the achievement of relevant Objectives.



Appropriate training methods and aides are used that may include:

- Induction training; and
- Internal training by more experienced staff.

Evidence of qualifications, training certificates, licences, skills and competencies of prospective employees where specialist skills are required is obtained and recent previous employment references are requested.

Training and competency requirements may be identified as a result of:

- Performance reviews;
- New personnel;
- New equipment and/or technology;
- Revised legal and/or regulatory requirements (e.g. Health & Safety);
- Revised industry standards;
- Management Reviews; and
- Employee request.

Records of staff training and competence are retained and are periodically reviewed.

OH&S training records include such details as:

- Trainee's name;
- Trainee's job title;
- Course title/content;
- Date; and
- Expiry.

The effectiveness of training carried out is recorded and evaluated through the competence that has been achieved. Control of the training process is in accordance with role responsibilities and job descriptions.

COMMUNICATION

The Organisation has identified internal and external communications relating to the Management System including:

- What the Organisation communicates;
- When the Organisation communicates;
- Who the Organisation communicates with;
- How the Organisation communicates; and
- Who takes part in communications

Information is communicated in accordance with the needs and expectations of all internal and external interested parties and when deemed necessary a record of communication is kept.



PURCHASING

Clause 8.1.4

PROCUREMENT

Contractors are assessed on their H&S criteria and their ability to provide the type, specification of product, service and quality.

Contractors are monitored and reviewed on a regular basis.

On allocation of a service provider to a project, they may receive a copy of the following documents:

- Risk Assessments;
- Method Statement;
- Toolbox Talks;
- Site Sign In;
- Induction information;
- Site Rules;
- Accident and Incident reporting protocol; and
- Additional information as applicable to the project.

The operatives carry out their work in accordance to the Job Instructions, Job Specification and any

OUTSOURCING

The Organisation ensures that OH&S requirements and appropriate controls are in place for outsourced processes that are within the Organisation's functioning and its scope of the OH&S Management System.



OPERATIONS PROCESS

Clause 6.1.3, 8.1.2 & 8.1.3, 8.2, 9.1.2

Operational control is documented and maintained by the use of procedures set out in:

- This OH&S Management System Manual;
- Risk Assessments;
- Method Statements;
- COSHH sheets;
- Annual Health & Safety Audit Reports;
- Certificates of Thorough Examination; and
- Monthly Inspection Plant Sheets.

The Organisation ensures that OH&S MS requirements including changes that might have an adverse impact are considered for all related organisational processes, including those specifically related to its products or services, considering each stage of its manufacture and installation, as applicable.

ELIMINATING HAZARDS AND REDUCING OH&SRISKS

The Organisation has implemented and documented a process to eliminate hazards and reduce OH&S risks, using the following:

- Risk Assessments / Method Statements;
- Accidents/Incidents and Near Miss data;
- Safe working practices;
- Work instructions;
- Safe systems of work;
- Monitoring of H&S Performance; and
- Workplace inspections.

The process follows the Health & Safety hierarchy of controls relating to elimination of hazards and reduction of OH&S Risks.

MANAGEMENT OF CHANGE

The Organisation is responsible for assessing all proposed changes that impact the OH&S Performance and or risk including the following:

- New products, services and processes;
- Changes to existing products, services and processes;
- Workplace locations and surroundings;
- Work organisation;
- Working conditions;
- Equipment;
- Work force;
- Changes to legal requirements and other requirements;
- Changes in knowledge or information about hazards and OH&S risks; and
- Developments in knowledge and technology.



When made, all changes are reflected in the OH&S Management System or H&S document, as appropriate, and communicated to relevant interested parties.

The Organisation monitors the impact of any change and proposes further change in the event of adverse consequences.

EMERGENCY PREPAREDNESS AND RESPONSE

The potential for and response to accidents and emergency situations across all processes are identified and documented as part of the planned response included on Risk Assessments and Method Statements or other document including an Emergency Response Plan and related communication.

EVALUATION OF COMPLIANCE

The Organisation ensures that a review of its obligations is carried out and appropriate records are maintained.

Management Review activities include a review of all significant findings identified during such compliance reviews and determination of any appropriate actions which need to be taken.



MONITORING, MEASUREMENT, ANALYSIS & EVALUATION

Clause 9.1

GENERAL

The Organisation monitors, measures, analyses and improves its processes in order to:

- Demonstrate conformity of its activities;
- Ensure conformity to the OHS Management System; and
- Continually improve the effectiveness of the OHS Management System.

Information obtained by analysis may relate to:

- Trends;
- Accidents / Incidents / Near Misses
- Operational performance; and
- Overall effectiveness and efficiency.

Monitoring and measurement of processes are achieved by the implementation of Internal Audit and Management Review procedures.

Documents used to facilitate the monitoring and measurement of processes includes but is not limited to:

- OHS Audit Records;
- Accident Records;
- Near miss reports;
- Customer Feedback Records;
- Non-conformance Records; and
- Key Performance Indicators.

Whenever significant deficiencies are identified, appropriate action is agreed, implemented and recorded in accordance with the relevant Non-conformity and corrective action procedures set out in this Management System.

ANALYSIS AND EVALUATION

The following is analysed in order to identify risks, trends and opportunities for corrective and/or improvement actions:

- Customer Satisfaction Monitoring Records;
- Accidents / Incidents / Near Miss Records;
- Results of internal Audits as a measurement of the effectiveness of the Management System; and
- Non-conformance Records.

The analysed information is presented as critical input into the Management Review process.



CALIBRATION

Whenever equipment is used for monitoring and measuring of the OH&S system, the Organisation will ensure it is calibrated and traceable to National Standards or verified as applicable. The methods of calibration are defined.

A Calibration Register is maintained listing all calibrated instruments and recording their calibration status including such details as:

- Description of equipment;
- Serial number;
- Date calibrated;
- Calibration certificate number;
- Date for re-calibration; and
- Calibrated by.

Copies of all Calibration Certificates are maintained on file.

When a test instrument is identified as faulty, the fault is rectified or the instrument withdrawn from use. Consideration is given to the validity of all previous checks made with the test equipment since its last successful calibration and appropriate corrective action taken. All such instances are recorded and dealt with in accordance with the Corrective Actions and Improvement Process in the Management System.

EVALUATION OF COMPLIANCE

The Organisation ensures that a review of its obligations is carried out and appropriate records are maintained.

Management Review activities include a review of all significant findings identified during such compliance reviews and determination of any appropriate actions which need to be taken.



CORRECTIVE ACTION & IMPROVEMENT

Clause 10

NON-CONFORMITY, INCIDENT AND CORRECTIVE ACTION

Any activities not meeting the requirements of the Management System are recorded on the Management Information Report, along with any corrective actions.

An investigation is undertaken to determine the cause of each incident or non-conformance.

The corrective actions taken to prevent recurrence of non-conformances, and those records and reports generated, are regularly reviewed at Management Reviews in order to identify any trends and to determine the effectiveness of preventive measures taken.

Revised procedures are developed and implemented as considered appropriate and are reviewed accordingly. New significant risks or opportunities may be identified as a result of the Non-conformance process.

CONTINUAL IMPROVEMENT

The effectiveness of the Management System is continually reviewed and improved through the Management Review process and the associated Management Review Agenda.



INTERNAL AUDITS

Clause 9.2

INTERNAL AUDIT PROGRAMME

- An Audit Programme is maintained ensuring that the Management System(s) is verified in accordance to the defined Audit Programme. The Audit Programme takes into consideration the importance of the process, with those areas considered critical being audited more frequently.
- Additional Audits may be conducted outside the planned intervals depending on the following:
 - Results of previous Audits
 - Organisational changes.

INTERNAL AUDIT PROCESS

Internal Audits are carried out according to the following procedures:

- Internal Audits are scheduled and undertaken at planned intervals as per the Audit Programme which determines which parts of the Management System(s) are to be audited;
- A member of staff, independent of the activity to be audited wherever possible, is appointed to conduct the Audit;
- The Auditor refers to the Processes documented in the Management System to determine the activities to be audited;
- The Auditor advises any personnel concerned that an Internal Audit is to be undertaken and answers any questions they may have regarding the Audit;
- The Auditor audits the process, which may include all or some of the following methods:
 - Interviewing members of staff
 - Observing the process being carried out
 - Reviewing any records/documents.
- The Auditor maintains a record of the process audited, the evidence viewed and the findings of the Audit;
- Any non-conformities that are raised and agreed during the Audit should follow the Organisation's Non-conformance Process;
- The results of the Internal Audits are reported to relevant Management and also discussed during the next Management Review; and
- All documentation relating to Internal Audits is retained for inspection by QMS International at the annual Surveillance Audit.



MANAGEMENT REVIEW

Clause 9.3

MANAGEMENT REVIEW

The Organisation holds Management Reviews at defined intervals of not greater than twelve months in accordance with the Management Review Agenda.

The findings of Management Reviews are documented and retained and distributed in accordance with the Organisation's document control and communication procedures set out in this Management System.

Management Review is identified as a critical component to ensure the continual improvement of the Management System. The purpose of the reviews is to undertake an evaluation of performance to ensure that the Management System continues to be:

- **Suitable** – Does it still fit the Organisation, its operations and culture?
- **Adequate** – Is it still appropriate and sufficient?
- **Effective** – Does it still achieve the intended outcomes?

Signed

Gary Lawless

Director

Date: 20th May 2024