

Guidance on meeting expectations of
EI *Process safety management framework*

Element 3: Employee selection, placement
and competency, and health assurance

GUIDANCE ON MEETING EXPECTATIONS OF
EI PROCESS SAFETY MANAGEMENT FRAMEWORK ELEMENT 3:
EMPLOYEE SELECTION, PLACEMENT AND COMPETENCY, AND HEALTH ASSURANCE

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FOREWORD

Process safety management (PSM) is vital to ensuring safe and continued operations in major accident hazard (MAH) organisations. However, PSM is a multifaceted process, and a number of high profile incidents since 2005 have suggested that without a holistic understanding of the various factors required for effective PSM it can be difficult and inefficient to ensure, and measure, performance.

In 2010 the Energy Institute (EI) published *High level framework for process safety management (PSM framework)*, which aimed to define what PSM should involve. Divided into four focus areas (process safety leadership, risk identification and assessment, risk management, and review and improvement) and sub-divided into 20 'elements', it sets out a framework of activities MAH organisations should undertake to ensure PSM. Each element lists a number of high level activities organisations should meet (expectations).

EI Guidance on meeting expectations of EI Process safety management framework is a series of 20 publications (guidelines) that build on the *PSM framework*. Commissioned by the EI Process Safety Committee (PSC) each guideline captures and presents current industry good practices and guidance on how organisations can meet the expectations set out in each element of the *PSM framework*. Each guideline includes:

- a logical flow diagram of activities (steps) the organisation should undertake to manage that element;
- descriptions of those steps;
- example performance measures (PMs) to measure the extent to which key steps have been undertaken;
- a list of further resources to help undertake key steps;
- a table mapping the steps against the expectations in the *PSM framework*, and
- annexes of useful information.

Readers implementing the guidance in this publication should be aware of the *PSM framework* and the other publications in this series, particularly if they are a manager with oversight of the wider implementation of PSM.

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INTRODUCTION

1.1 EMPLOYEE SELECTION, PLACEMENT AND COMPETENCY, AND HEALTH ASSURANCE

This guideline sets out good practices for employee selection, placement, competency and health assurance for health, safety and environment (HS&E) and process safety. Control of operations and the avoidance of HS&E and process safety incidents depend upon having competent people in position. Management should ensure that existing and new personnel have the required competencies and are fit for work.

This guideline addresses four key topics:

- employee selection and placement;
- fitness for work (FFW) assessment and occupational health (OH) surveillance;
- competency assessment and personnel development and training, and
- succession planning.

1.2 EXPECTATIONS FOR ELEMENT 3: EMPLOYEE SELECTION, PLACEMENT AND COMPETENCY, AND HEALTH ASSURANCE

EI *High level framework for process safety management (PSM framework)* describes 14 expectations – arrangements and processes that organisations should (to an appropriate degree) have in place in order to ensure they are managing this aspect of PSM appropriately:

'Overview: Control of operations depends upon having competent people in position. Management must ensure that existing and new personnel have the required competencies and are fit for work.

- 3.1** The required HS&E and process safety competencies and FFW and health monitoring requirements are defined for all roles in the organisation. These competencies address EI *PSM framework* expectations.
- 3.2** A process is in place for screening, selection and placement of employees which confirms their compliance with the specified requirements for the role.
- 3.3** Individual and collective experience and knowledge are maintained and are carefully considered when personnel changes are made.
- 3.4** Roles and responsibilities are realistically designed to take account of human capabilities and limitations and other key human and organisational factors.
- 3.5** Appropriate induction is carried out for personnel taking up a new or revised position.
- 3.6** A staffing development and succession plan is in place for all positions with PSM responsibility.
- 3.7** The organisational structure, and continuity of PSM critical positions, are reviewed annually to ensure that they are adequate to meet the EI *PSM framework* expectations.

- 3.8** Employee competency and FFW are regularly assessed against requirements of their assigned role and responsibilities.
- 3.9** Employee training and development needs are identified through a systematic process.
- 3.10** Systematic and effective training and development programmes ensure that each person is competent to understand and accept and deliver against the defined HS&E and process safety responsibilities for their role.
- 3.11** Training and development programmes are a combination of formal courses, coaching and practical work.
- 3.12** Training and development programmes are formally reviewed to assess their effectiveness and identify issues which need to be addressed and improvement opportunities.
- 3.13** Arrangements for employee selection, placement and competency, and health assurance are understood and followed; understanding of arrangements and compliance with them are regularly tested.
- 3.14** Compliance and performance trends are reviewed by specified levels of management.'

This guideline provides a process, along with guidance, to help organisations meet these expectations. It also suggests a number of compliance checks and performance measures (PMs) to measure the extent to which key activities involved in meeting these expectations have been or are being undertaken.

2 ARRANGEMENTS FOR MEETING EXPECTATIONS

Figures 1 to 4 provide logical flow diagrams for putting in place arrangements to effectively meet the expectations in element 3, to manage employee selection, placement and competency, and health assurance.

Figure 1 covers activities (steps) which should be undertaken by the organisation, across three phases: set-up (preparations to manage the element); operate (management of the element); and monitor, review and intervene (monitoring and reviewing the management of the element, and making appropriate interventions if the element is not being managed effectively).

Figures 2, 3 and 4 provide separate operational processes respectively for: FFW and health assurance; employee selection and placement; and competence assessment and training and development.

The flow diagrams provide an example of the logical arrangement of necessary activities. The reader should take cues from the arrangement and relationships between steps when determining the appropriate flow design for their own organisation. The flow diagram also shows interfaces with other elements, where element 3 may be dependent upon activities that are addressed by other elements.

At specific points in the flow diagram process, PMs are suggested. These PMs are predominantly leading indicators designed to enable the measurement of the outputs from the element and the level of operational compliance with the expectations. Suggested PMs are described further in Section 3.

2.1 provides guidance on the actions involved for each step, the deliverables that should result from those actions, and the frequency at which the step should be undertaken. It also provides more detailed guidance notes.

These steps have been mapped against element 3 expectations in Annex C. Note that some expectations are fulfilled through several steps, and some steps help fulfil several expectations, however all steps should be undertaken. As such, Annex C is for reference purposes only, to demonstrate that the arrangements outlined in this guideline enable the organisation to work towards fulfilling the requirements set out in element 3 of the *PSM framework*.

Figure 1: Logical flow diagram – overview

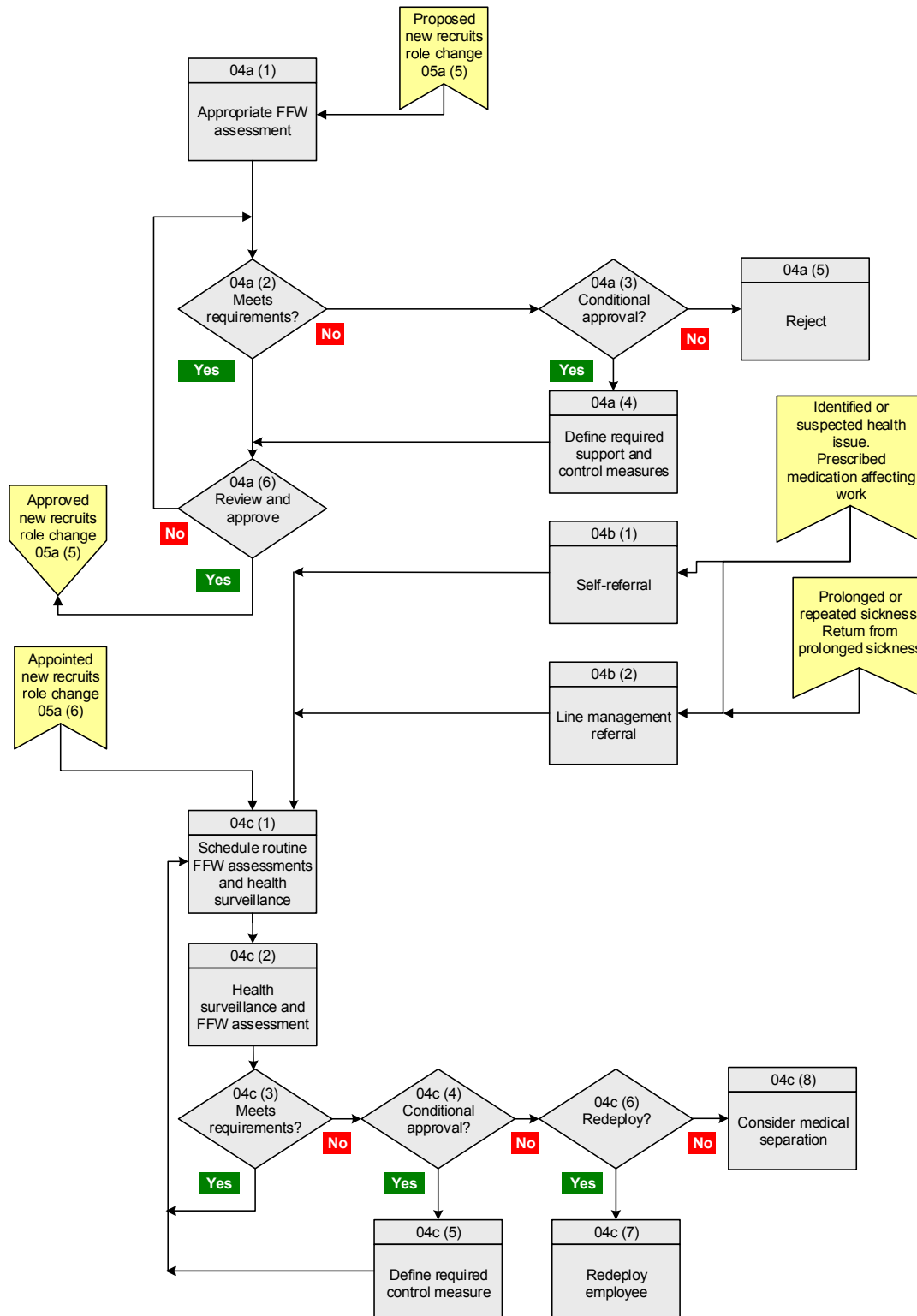


Figure 2: FFW assessment and OH assurance

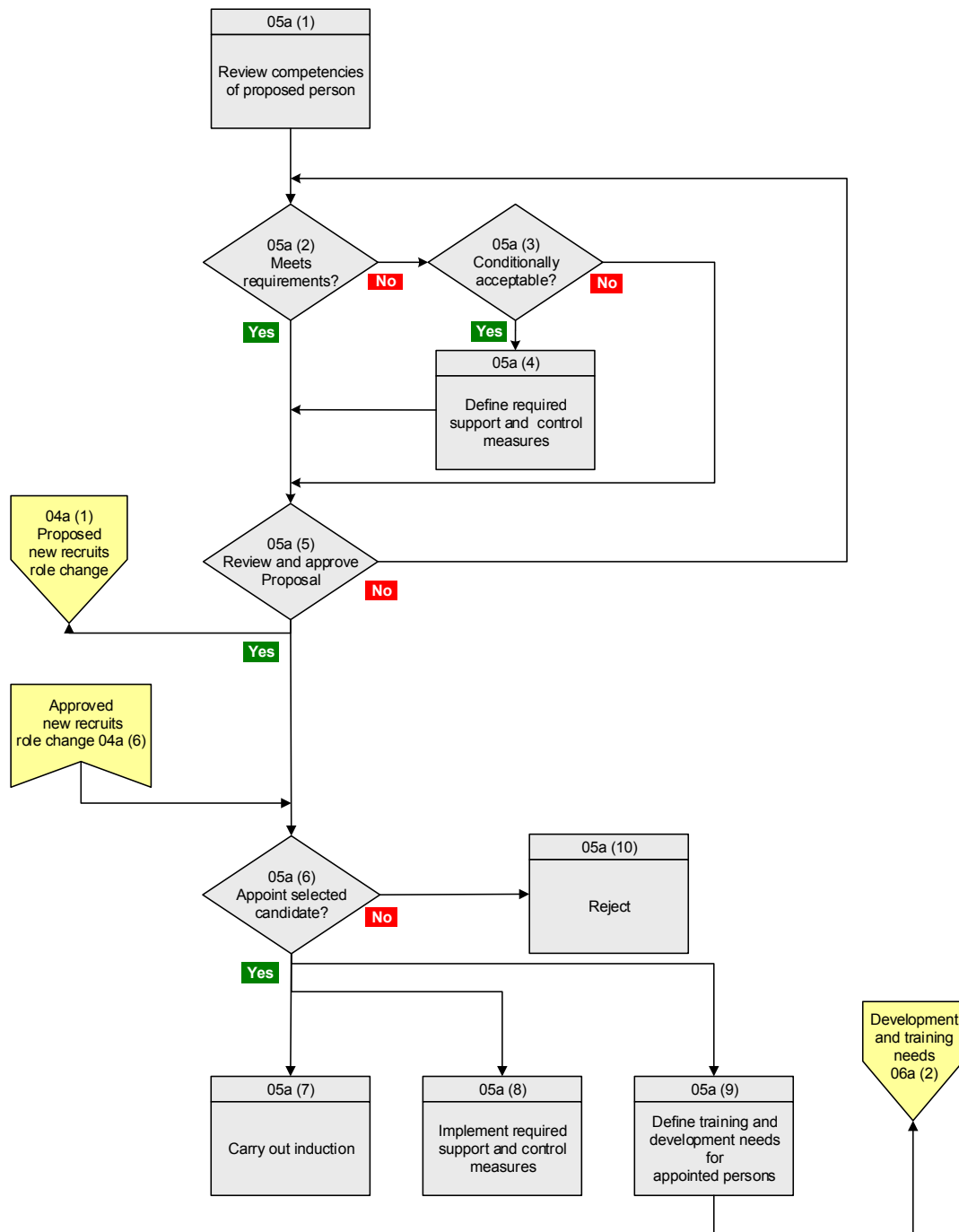


Figure 3: Employee selection and placement

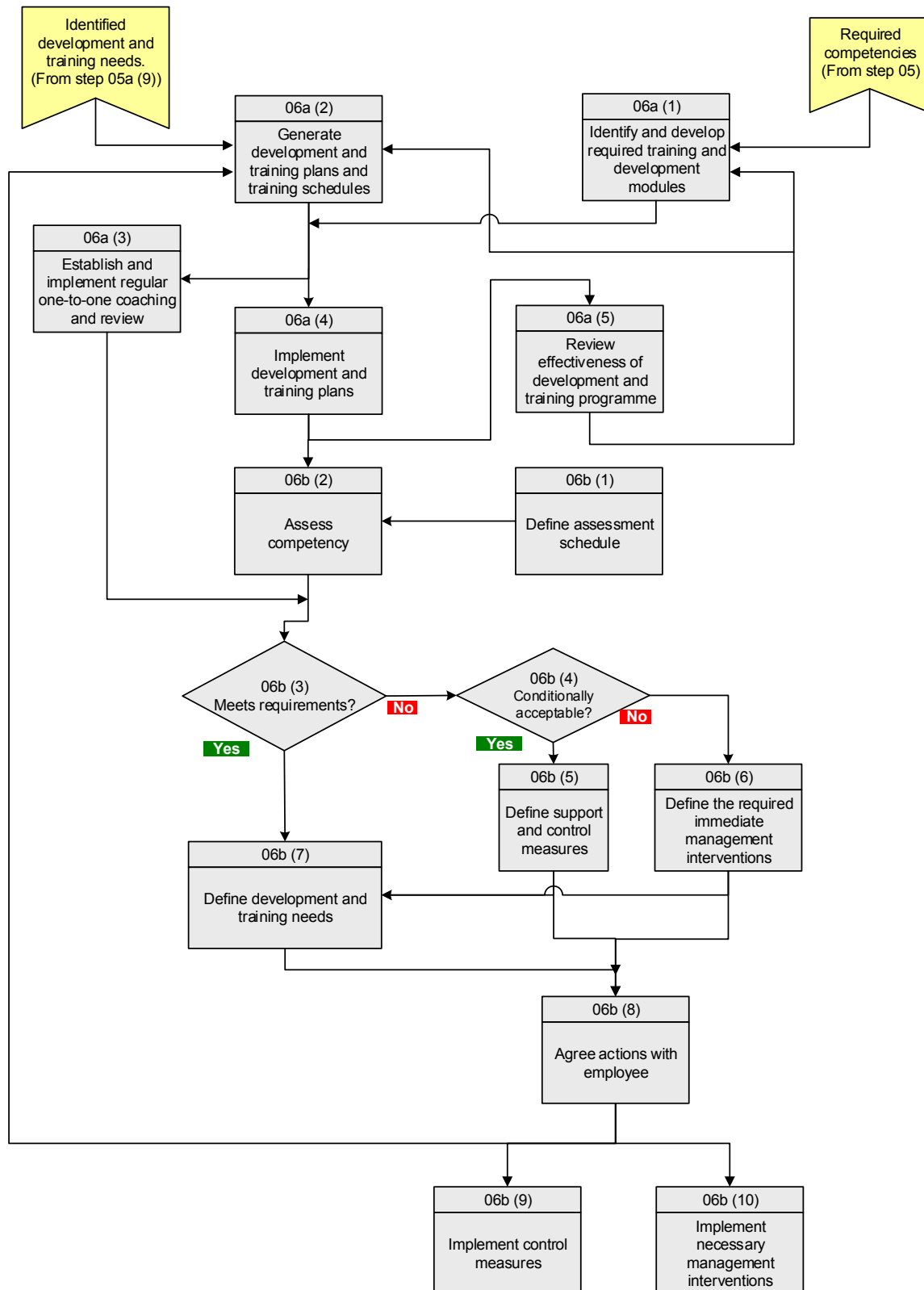


Figure 4: Competency assessment and personnel development and training

2.1 DESCRIPTIONS OF ACTIONS FOR EACH STEP IN THE LOGICAL FLOW DIAGRAM

Step	Actions	Deliverables	Frequency
01	Identify and appoint responsible persons; define delegated authorities for decision making Identify and appoint persons who will have defined roles and responsibilities for each aspect of the arrangements for employee selection, placement and competency, and health assurance.	Defined roles and responsibilities. Agreed list of responsible persons who will: – act as element owner, and – carry out each aspect of the arrangements for the element. Defined delegated authorities for decision making. Agreed list of delegated authorities for each identified responsible person/position.	During implementation; then as required.
Guidance notes: The senior accountable person, typically a director, business unit (BU) leader or site manager, should ensure that accountabilities and responsibilities are assigned for each step in the process. Typically this can be achieved by appointing an element owner who will work with line managers to agree and assign these accountabilities and responsibilities. Typically, the element owner should be a senior line manager. During the implementation phase the element owner will be required to coordinate the implementation of the element across the organisation, BU or site on behalf of the senior accountable person, working with other senior line managers to ensure that the implementation is appropriately planned and resourced and that any issues are resolved. The element owner should also ensure that delegated authorities for decision making within the element are defined and approved. Following implementation, during the operational phase the element owner should work with the other senior line managers to ensure that the element continues to operate as intended. In effect the element owner should act as a coach to the management team, building their understanding and confidence in the use of the element.			
02	Ensure competence of appointed responsible persons	Training material. Competency assessment. Training schedule. Competent persons.	During implementation; then as required.

Step	Actions	Deliverables	Frequency
Guidance notes: The element owner should ensure that the required competencies are defined and agreed for all persons with assigned roles and responsibilities within the element and that each of these people is trained and coached appropriately to develop these required competencies. They should also ensure that training and development programmes and routine personnel performance appraisals take into account these required competencies. This should be accomplished by means of the relevant sections of this element.			
03	Develop list of HS&E and process safety critical roles Roles with defined HS&E and process safety responsibilities.	List of all roles with defined HS&E and process safety responsibilities for each area of operation.	During implementation; then as required (review annually).
Guidance notes: The element owner should ensure that a list of all job positions and roles within each part of the organisation with defined HS&E and process safety responsibilities (HS&E and process safety critical roles) is developed. This should include any role which has responsibility for carrying out a safety critical task. This should include positions filled by the organisation's own employees and positions filled by persons supplied by third party contractors or employment agencies. Typically HS&E and process safety critical roles are positions and roles which, if not filled, could have significant impact upon the integrity of the HS&E and process safety management of the operation. It should be ensured that safety critical tasks are identified and assigned to identified positions or roles. It should also be ensured that roles which are independent of position, for example fire warden, first aider or member of an emergency response team, are identified. Additionally it is important to identify those positions and roles that are considered to be 'high HS&E risk'. Each BU should define criteria for deciding which roles will be considered to be high HS&E risk. It should be ensured that roles and responsibilities are realistically designed to take account of human capabilities so that there is sufficient resource to carry out the required activities. This should also consider the way the resource is organised, to ensure that there are no adverse organisational factors which could make it difficult for personnel to carry out their assigned roles and responsibilities.			
04	Define FFW assessment and OH surveillance criteria requirements for each role	For each job role: – list of OH surveillance requirements, and – list of FFW assessment criteria.	During implementation; then as required (review annually).

Step	Actions	Deliverables	Frequency
Guidance notes: FFW assessment and OH surveillance criteria are determined on the basis of the activities/tasks that a person carries out. Different job roles will be made up of a number of activities/tasks. During the set-up phase, the element owner should ensure that a list of typical activities/tasks carried out in the organisation is developed. This should take into account any generic task risk assessments (GTRAs) which have been developed for typical work activities. Each of these activities/tasks should be reviewed with the assigned occupational health advisor to identify appropriate FFW assessment and OH surveillance criteria. It should be ensured that FFW assessment and OH surveillance criteria are consistently applied across the organisation. The assigned OH advisor should ensure that common organisation-wide activities/tasks are identified and that FFW assessment and OH surveillance criteria are aligned. The OH advisor should highlight any OH surveillance criteria which are required to comply with legislation. The element owner should ensure that a list of job roles is developed for the organisation and that the list of activities/tasks carried out by each of these job roles is defined. Using this information the FFW assessment and OH surveillance criteria for each role can be defined. Situations where an individual employee or a small group of employees may carry out a specialist activity/task should be identified, and it should be ensured that their FFW assessment and OH surveillance criteria accurately reflect the requirements of their specific role. Contract owners should ensure that contractor companies define FFW assessment and OH surveillance criteria for employees who carry out work on behalf of the organisation. <i>Guidance on meeting expectations of EI Process safety management framework Element 18: Contractor and supplier, selection and management</i> sets out how contractor companies should be assessed in order to ensure that they meet the organisation's requirements in this area.			
04a (1)	Appropriate FFW assessment of: – proposed new employees, and – existing employees who are proposed appointees to a change of job role.	Completed FFW assessment in line with the defined criteria. Health declaration form/completed FFW questionnaire. Completed assessment by OH advisor. Opinion from OH advisor: – fit for work; – conditionally fit for work, or – not fit for work.	As required.

Step	Actions	Deliverables	Frequency
Guidance notes: Line managers intending to appoint a new employee or appoint an existing employee into a changed role should work with their assigned human resources (HR) and OH advisors to ensure that the employee is appropriately assessed to check whether they satisfy the FFW criteria for their proposed new role, before they are appointed. In some role changes, where all the FFW criteria for the proposed new role are covered by the FFW criteria of the previous role, it may not be necessary to carry out any further assessment; however, this decision should be agreed with the OH advisor and documented. In cases where an assessment is required it should be carried out by a competent OH advisor. The initial stage of a FFW assessment would typically involve a health declaration form/ FFW questionnaire and in some circumstances may involve a consultation with an OH advisor or physician. Only the selected candidate should be required to undergo a FFW assessment. Following the completion of the FFW assessment, the OH advisor should provide an opinion to the appointing line manager as to whether the candidate meets the FFW criteria for the proposed role. The opinion should be in one of three categories: – Fit for work – candidate meets the FFW criteria. – Conditionally fit for work – candidate may be acceptable if adjustments can be made to the role or additional support or control measures can be applied. – Not fit for work – identified issues which would preclude the candidate from taking up the role.			
04a (2 and 3)	Review by OH advisor Review by OH advisor and liaise with HR advisor to verify decisions resulting in conditionally fit for work and not fit for work outcomes.	Decision to: – Appoint if selected candidate is fit for work. – Consider conditional approval if selected candidate is suitable for the job role and if appropriate additional support and control measures or reasonable adjustments can be applied. – Reject candidates if reasonable adjustments and/ or restrictions to the role cannot be made.	As required.

Step	Actions	Deliverables	Frequency
04a (4)	Define required support and control measures Define and implement required support and control measures or reasonable adjustments for persons who are agreed as conditionally fit for work.	Defined and agreed reasonable adjustments and/or any necessary restrictions to the role, implemented in full. Revisions to the employee's FFW assessment criteria and OH surveillance requirements, implemented in full.	As required.
04a (5)	Reject Reject candidates who fail to meet the FFW criteria. Liaise with HR advisor to provide appropriate communication and feedback.	Advise rejected candidates and provide appropriate feedback.	As required.
04a (6)	Review and approve Review and approval outcome of FFW assessment by person with delegated authority to do so.	Either: – approved decision: – fit for work; – conditionally fit for work (with additional control or support measures), or – not fit for work. – rejected decision with requirement to rework identified concerns or issues.	As required.
Guidance notes: In cases where the opinion is 'not fit for work' the appointing line manager should work with their assigned HR and OH advisors to ensure that they are in agreement. In this circumstance the candidate will be rejected. In cases where the opinion is 'conditionally fit for work', the appointing line manager should work with their assigned HR and OH advisors to review the opinion and consider whether additional support and control measures or reasonable adjustments to the role or facilities/work equipment can be utilised to accommodate the selected candidate. If a 'conditionally fit for work' candidate can be accommodated, the appointing line manager should ensure that the identified additional control measures, or adjustments to the role or facilities/work equipment, are fully implemented in time for the candidate to take up their new role.			

Step	Actions	Deliverables	Frequency
Guidance notes continued... Under certain circumstances it may be appropriate to consider the external advice and support which are available from charitable organisations to facilitate the inclusion of disabled persons in the workplace. The appointing line manager should continue to monitor and review the compliance with, and effectiveness of, any required support or control measures and adjustments.			
04b (1)	Self-referral Self-refer to OH in case of identified or suspected health issue.	Self-referral to OH advisor.	As required.
Guidance notes: Employees should self-refer to their doctor or the organisation's local OH advisor if they have any identified or suspected health issues, which either impact their work or may have been caused by their work. Line managers should ensure that their employees are aware of the organisation's arrangements for provision of OH support. Employees should advise their line manager and their local OH advisor if they are taking any prescribed medication which may affect their work. If in doubt as to whether prescribed medication will impact their work, employees should err on the side of caution and advise their line manager and seek advice from either their doctor or their local OH advisor. Line managers should advise employees of the organisation's requirements to advise the organisation when they are taking a prescribed medication which may impair their performance.			
04b (2)	Line management referral Line management to refer to OH advisors any employees: – with a record of prolonged or repeated sickness absence; – returning to work after prolonged sickness absence or significant illness; – with identified or suspected OH issues that impact work, and – on prescribed medication affecting workplace performance.	Management review of sickness absence: – regular case reviews for employees on long term sickness. Line management referral to OH advisor of employees: – with a record of prolonged or repeated sickness absence; – returning to work after prolonged sickness absence or significant illness; – with identified or suspected OH issues that impact work, and – on prescribed medication affecting workplace performance.	As required.

Step	Actions	Deliverables	Frequency
Guidance notes: Line managers should refer to OH advisors any employee with identified or suspected health issues which are impacting upon their work. Examples of this may be: – employees with prolonged or repeated sickness; – employees taking prescribed medication which may impair their work performance, and – employees returning from prolonged sickness. In order to satisfy this requirement, line managers should ensure that they know their team members well enough to be able to identify any signs of impaired capacity which might have an adverse impact on performance. Line managers should work with their assigned HR and OH advisors to maintain an appropriate regular contact with employees on long term sickness in order to support their timely rehabilitation into work.			
04c (1)	Schedule routine FFW assessments and OH surveillance	Agreed schedule for FFW assessments and OH surveillance. Invitation to attend FFW assessments and OH surveillance. Appointment for FFW assessments and OH surveillance.	As required by the schedule.
Guidance notes: The OH team should work with line managers to schedule routine FFW assessments and OH surveillance in line with the identified FFW assessment and OH surveillance criteria.			
04c (2)	OH surveillance and FFW assessments Assess FFW and carry out OH surveillance on: – existing employees in line with schedule, and – existing employees referred for FFW assessment.	Completed FFW assessment in line with the defined criteria. Completed assessment by OH advisor. Opinion from OH advisor: – fit for work; – conditionally fit for work, or – not fit for work.	As required by the schedule.
Guidance notes: Line managers should work with their assigned OH advisors to ensure that employees attend scheduled FFW assessments and OH surveillance so that there are no employees working with overdue FFW assessments and OH surveillance. If an employee's assessment is overdue, the implication is that the employee's FFW is not assured; the organisation may have employees in the workplace who are not fit for work, and consequently may be allowing them to cause intolerable damage to their health.			

Step	Actions	Deliverables	Frequency
Guidance notes continued... Following the completion of the FFW assessment and OH surveillance, the OH advisor should provide an opinion to the line manager on the outcome of the assessment. As with the pre-appointment assessment, the opinion should be in one of three categories: – fit for work; – conditionally fit for work, or – not fit for work.			
04c (3 and 4)	Meets requirements? Conditional approval? Review opinion from OH advisor and liaise with HR advisor to verify decisions resulting in conditionally fit for work and not fit for work outcomes.	No intervention if opinion is OK to continue in current role. Decision to consider conditional approval if employee is suitable to continue in the current role with additional support or control measures applied. Decision to consider redeployment if reasonable adjustments and/or restrictions to the role cannot be made.	As required.
04c (5)	Define required control measure Define and implement required support and control measures or reasonable adjustments for persons who are agreed as conditionally fit for work.	Defined and agreed support and control measures or reasonable adjustments or necessary restrictions to the role, implemented in full. Revisions to this employee's FFW assessment and OH surveillance schedule, implemented in full.	As required.
Guidance notes: In cases where the opinion is 'conditionally fit for work', the line manager should work with their assigned HR and OH advisors to review the opinion and consider whether additional support and control measures or reasonable adjustments to the role or facilities/work equipment can be utilised to maintain or rehabilitate the employee in their current role. If a conditionally fit for work employee can be accommodated, the line manager should ensure that the identified additional support and control measures or adjustments to the role or facilities/work equipment are fully implemented in time for the employee to return to their role.			

Step	Actions	Deliverables	Frequency
Guidance notes continued... The line manager should continue to monitor and review the compliance with, and effectiveness of, any required support or control measures and adjustments.			
04c (6)	Redeploy? Consider redeployment for persons for whom reasonable adjustments and/or necessary restrictions cannot be accommodated.	Recommendation for redeployment to a suitable alternative role.	As required.
04c (7)	Redeploy employee Implement redeployment of employee.	Agreed succession plan for existing role. Agreement with receiving manager: – agreed schedule for redeployment; – agreed job description; – agreed terms and conditions, and – agreed handover and induction plan.	As required.
Guidance notes: If an employee cannot be accommodated or rehabilitated into their existing role, the line manager should first consider the suitability of the employee for redeployment to another role. The line manager should work with their assigned HR and OH advisors to identify a suitable alternative role for the employee. It is preferable for the employee to be included in any discussion to agree the course of action to be taken. If redeployment is agreed as the proposed course of action, the line manager should work with their assigned HR advisor and the receiving line manager to ensure that the redeployment is properly managed, with such things as an agreed job description and an agreed handover and mobilisation plan.			
04c (8)	Consider medical separation Consider medical separation for employees who are unsuitable for either conditional approval or redeployment.	Proposal to proceed with medical separation.	As required.

Step	Actions	Deliverables	Frequency
Guidance notes: If no other suitable rehabilitation or redeployment opportunities can be found for the employee, the line manager should work with their assigned HR and OH advisors to consider, and where appropriate, progress a medical separation from the company. In the case of a proposed medical separation it should be ensured that the employee has been involved in the decision making.			
05	Define required competencies for each role Define the competencies required to carry out all HS&E and process safety critical roles.	For each identified HS&E and process safety critical role, a list of the required competencies to carry out role in accordance with their defined HS&E and process safety responsibilities. Competency lapse and refresher criteria.	During implementation; then as required (review annually).
Guidance notes: The element owner should ensure that the required competencies and leadership attributes are defined for each identified position and role within the organisation. These competencies would typically comprise: – specific task and operational knowledge and skills; – craft qualifications; – academic qualifications; – defined work experience, and – 'soft skills' (non-technical skills) or leadership behaviours. Specific task and operational knowledge and skills should cover normal operation, non-routine operations and abnormal and emergency situations. The required competencies should be reviewed and approved by personnel with the delegated authority to do so. When defining the required competencies it is important to recognise that, if not exercised, competencies will lapse. Criteria for maintaining competencies should be defined.			
05a (1, 2 and 3)	Review competencies of proposed person Assess competencies of proposed position or role holder against the defined requirement.	Completed review with a proposal: – meets the competencies required; – conditionally acceptable, able to meet required competencies if additional control measures are applied, or	As required.

Step	Actions	Deliverables	Frequency
		– unacceptable, does not meet required competencies.	
Guidance notes: Selection and placement for positions and roles should be in line with the organisation's selection process. This guideline provides guidance on how the review of a candidate's competencies against the required HS&E and process safety competencies for the position or role should be incorporated into the organisation's existing selection process. It should be ensured that this review of HS&E and process safety competencies is applied to both permanent appointments and to agency staff covering an identified position or role within the organisation. The competencies of a proposed position or role holder should be reviewed against the required HS&E and process safety competencies for the specific position or role defined in Step 05. The outcome of this review should feed back into the selection process to identify proposed candidates as either: – acceptable; – conditionally acceptable, with specific identified control or support measures, or – unacceptable.			
05a (4)	Define required support and control measures	Proposed support and control measures to mitigate risk arising from identified gaps in competencies.	As required.
Guidance notes: If the candidate currently does not have the required competencies then it may be necessary to consider whether the candidate could be conditionally acceptable to take up the role if additional support or control measures are put in place. Typically this would be only for a limited period of time and in cases where there are only minor gaps against the required competencies. In this case the support or control measures would be applied whilst the candidate/appointee develops the required competencies to close the identified gaps. Support or control measures may include a temporary reduction in the scope or authority of the role, mentor or review arrangements, and training and developmental experiences.			
05a (5)	Review and approve proposal Review and approval of the proposed approach by person with delegated authority to do so.	Approved proposal: candidate is identified as acceptable or unacceptable. Rejected proposal: review candidate competencies again, taking into account comments from review authority.	As required.

Step	Actions	Deliverables	Frequency
05a (6,7,8 and 9)	In case of decisions to appoint: – carry out induction; – implement required support and control measures, and – define development and training needs for new appointees and planned successors.	Completed induction in full and on schedule. Control measures implemented in full and on schedule. Development and training needs for new appointees and planned successors as identified in the succession plans: – required training courses, and – required developmental experience (roles and activities).	As required.
Guidance notes: The outcome of the review of the candidate's competencies should be evaluated and approved by a line manager with the appropriate delegated authority to do so. Selected candidates should be reviewed against FFW criteria for the proposed position before they are appointed. It should be ensured that appropriate induction arrangements are in place and carried out for all appointees to a new or revised position. The induction should cover: – organisation wide issues; – local specific issues, and – position or role-specific issues. If a conditionally approved employee can be accommodated, the line manager should ensure that the identified additional support and control measures or adjustments to the role are fully implemented before the appointee takes up their new role. The line manager should continue to monitor and review the compliance with, and effectiveness of, any required support or control measures and adjustments. Development and training needs should be identified for new appointees. These should identify both traditional training and developmental experience to be gained by undertaking specific work assignments. This will provide a feed to the development of training and development plans in Step 6a (2).			
05a (10)	Reject Reject candidates who fail to meet the required competencies. Liaise with HR advisor to provide appropriate communication and feedback to candidate.	Advise rejected candidates and provide appropriate feedback.	As required.

Step	Actions	Deliverables	Frequency
Guidance notes: In cases where it has been decided the candidate is unacceptable for the role or position, the appointing line manager should work with their assigned HR advisors to ensure that they are in agreement. In this circumstance the candidate will be rejected. Rejected candidates should be advised and provided with appropriate feedback.			
06	Define competency assessment criteria	Agreed competency assessment criteria for all competencies and roles.	During implementation; then as required (review annually).
Guidance notes: The competencies required to carry out each role safely and in accordance with their assigned HS&E responsibilities are defined in Step 05. How these required competencies will be assessed should be defined. The competency assessment criteria should cover both the checking of understanding and the application of the competency. These competency assessment criteria may include: – practical or craft tests; – examination; – review of work performance, and – feedback from customers or colleagues. It is likely that the definition of the competency assessment criteria will need to be carried out by experienced persons from the organisation with specific knowledge of their own operation/organisation, with support from HR professionals.			
06a (1)	Identify and develop required development and training modules	List of required development and training modules. Comprehensive development and training packages to meet identified requirements.	During implementation; then as required (review annually).
Guidance notes: Standard training and development modules should be developed to deliver the required competencies. These are then available to ensure that there is a consistent approach to the delivery of required training and development. A list of available training and approved training providers should be established. Training providers may be internal or external. The base requirement for training and development modules can be developed based upon the required competencies for each position or role as identified in Step 06. For specific craft groups, training committees may be set up to define the appropriate training approach to develop the required competencies. Additional requirements may be identified during the assessment for new training and development needs.			

Step	Actions	Deliverables	Frequency
06a (2)	Generate development and training plans and training schedules	Development and training and plans for each person. Overall training schedule.	During implementation; then as required (review annually).
Guidance notes: Training and development needs should be incorporated into an overall plan and schedule. This should provide an overall optimised programme for the delivery of the identified training and development needs. This should also provide specific training plans and schedules for each person. This plan and schedule should identify: – what training and development will be done; – who will deliver it; – who participates in the training and development, and – when it will be done. The training and development plans should pull together the input from training and development needs identified for or from: – new appointees; – succession plans; – competency assessments, and – one-to-one coaching sessions.			
06a (3)	Establish and implement regular one-to-one coaching and review	Record of one-to-one coaching and review meetings. Coaching interventions. Performance review and feedback. Identified performance improvement needs and development opportunities. Identified training requirements. Agreed follow-up actions.	As required by the schedule.
Guidance notes: Line managers should set up and carry out regular one-to-one sessions with the people who report to them. These sessions should review the work plans of the person and the work carried out. The sessions should provide a coaching opportunity, considering task (what has been achieved) and process (how it was achieved), and in each case what has gone well and what needs to be improved.			

Step	Actions	Deliverables	Frequency
06a (4)	Implement development and training plans	Development and training delivered in full and on schedule.	As required by the schedule.
Guidance notes: Line managers and HR professionals should work together to ensure that training and development is set up and provided in accordance with the agreed schedules. Line managers should ensure that their employees are appropriately released and attend their scheduled training.			
06a (5)	Review effectiveness of training and development programme	Identified issues which need to be addressed. Identified opportunities to improve the training programme.	As required by the schedule.
Guidance notes: The element owner should ensure that the effectiveness of the overall training and development programme is periodically reviewed to identify any issues which need to be addressed and any opportunities to improve.			
06b (1)	Define assessment schedule	Schedule setting out required dates for: – formal performance assessments, and – one-to-one coaching sessions.	During implementation; then as required (review annually).
Guidance notes: An individual person may have a number of separate competency assessments, forming part of their refresher training; these may expire or become due on different dates or frequencies. The element owner should ensure that a schedule is developed for routine competency assessments. This should incorporate routine annual appraisals, performance management interviews and regular one-to-ones with their line manager. Where possible these should be pulled together to provide an integrated assessment schedule for each person.			
06b (2,3 and 4)	Assess competency Assess competencies of role holder.	Completed review of competencies with opinion: – acceptable – meets the competencies required; – conditionally acceptable – able to meet required competencies with additional support or control measures, or	As required by the schedule.

Step	Actions	Deliverables	Frequency
		– unacceptable – does not meet required competencies.	
06b (5)	Define support and control measures Define the required support and control measures for conditionally acceptable outcomes.	Support and control measures to mitigate risk arising from identified gaps in competencies.	As required by the schedule.
06b (6)	Define the required immediate management interventions	Immediate management interventions, for example: – proposed immediate actions e.g. training/support; – control of duties, and – enhanced supervision.	As required by the schedule.
Guidance notes: The line manager should ensure that the person being assessed has sufficient advance notice to allow them to prepare for the assessment, and is aware of and fully understands the assessment process and the assessment criteria. The person carrying out the assessment should make sure that they are aware of and understand the competencies that the person to be assessed is required to have, and the defined assessment criteria for each competency that is being assessed. Before an assessment the person carrying out the assessment should ensure that they have assembled the appropriate input. This may include: – input from the person being assessed; – feedback from appropriate customers or colleagues; – records from one-to-one discussion, and – records of current performance. The person carrying out the assessment should assess each of the required HS&E and process safety competencies using the defined assessment criteria. In addition to checking understanding, the assessment should also check the application of the competency. Regular one-to-one coaching and review sessions together with feedback from customers or colleagues may provide a significant input to the assessment of how the competencies are applied. The outcome of this review should identify the person's competency level as either: – acceptable; – conditionally acceptable, with specific identified control or support measures, or – unacceptable.			

Step	Actions	Deliverables	Frequency
Guidance notes continued... If the person is assessed as not having some of the required competencies, then it may be necessary to consider whether additional support or control measures need to be put in place in order to allow them to continue in that position or role. Typically this would only be for a limited period of time and in cases where there are only minor gaps against the required competencies. In this case the support or control measures would be applied whilst the person develops the required competencies to close the identified gaps. Support or control measures may include a temporary reduction in the scope or authority of the role, mentor or review arrangements, and training and developmental experiences. When considering a conditional approval, collective experience of the work group should be taken into account. In cases where there is a major deficiency identified in competency which can't be addressed by temporary support or control measures, it will be necessary to decide on an appropriate course of action to ensure that this competency deficiency does not put the safety and integrity of the operation at risk. It is likely that this will require a management intervention.			
06b (7)	Define development and training needs The line manager should review and agree proposed actions with person being assessed.	Required development. Required training.	As required by the schedule.
Guidance notes: The line manager should ensure that any development and training needs are identified during the assessment process. These should identify both traditional training and developmental experience to be gained by undertaking specific assignments, positions or roles.			
06b (8)	Agree actions with employee The line manager should review and agree proposed actions with person being assessed.	Record of meeting to agree actions. Agreed actions: – development and training needs; – management interventions, and – support and control measures.	As required by the schedule.
Guidance notes: The line manager should ensure that the person being assessed is taken through and agrees with the record of the outcome of the assessment and the proposed follow-up actions.			
06b (9)	Implement control measures Implement defined support and control measures.	Support and control measures implemented in full and on schedule.	As required by the schedule.

Step	Actions	Deliverables	Frequency
06b (10)	Implement necessary management interventions Implement defined required immediate management interventions.	Management interventions implemented in full and on schedule.	As required by the schedule.
Guidance notes: Identified necessary management interventions and support or control measures should be implemented and verified to ensure that competency lapse does not put HS&E and process safety at risk.			
07	Identify roles requiring defined succession plans	List of roles requiring defined succession plans.	During implementation; then as required.
Guidance notes: The element owner should ensure that a list of roles requiring defined succession plans is developed. Typically they should be for positions and roles which if not filled could have significant adverse impact upon HS&E and process safety risk. When developing the list, consider groups of positions such as specific craft groups or process operators; many of these may have long lead times to develop the required competencies.			
07a	Develop and routinely update succession plans	Up-to-date succession plans for all roles requiring defined succession plans.	During implementation; then as required by the schedule.
07b	Identify training and development needs for planned successors	Up-to-date training and development plans for planned successors.	As required by the schedule.
07c	Review and approve Review and approve succession plans and training and development plans for planned successors. Review and approval by person with delegated authority to do so.	Approved: – succession plans, and – training and development plans for successors. Rejected: – succession plans requiring rework, and – training and development plans requiring rework.	As required by the schedule.

Step	Actions	Deliverables	Frequency
Guidance notes: Succession plans should be developed for the identified positions, roles and work groups. These should identify at least two potential backfills for each of the identified positions or roles. It is likely that parts of the organisation will already have a succession planning process in place for other 'business critical' positions or roles. The planning for HS&E and process safety critical positions or roles should be brought into this process. The succession plans for groups of positions should take into account the workgroup age profiles, retirement age, attrition rates and industry competitive demand, together with geographical location and mobility. Succession plans should be regularly updated. Good practice is to do this at least twice per year. Succession plans should be reviewed and approved by a senior line manager with the delegated authority to do so. The succession planning process should periodically (annually) review the organisational structure, and continuity of PSM critical positions to ensure that it is adequate to meet the EI <i>PSM framework</i> expectations.			
08	Update records Define and agree what records are required, and where and how they will be held and version controlled. Ensure required records are readily available to those who need to use them.	Defined and agreed approach to where and how records will be held. Defined and agreed approach to ensure that records are readily available to those who need to use them. Defined accountability and responsibilities for maintaining records. Defined and agreed approach to where and how records will be held, for: – Required competencies for each position, role and person. – FFW and health monitoring requirements for each position, role and person. – Training and development for each person.	As required by the schedule.

Step	Actions	Deliverables	Frequency
		- Competency assessments for each person. - FFW assessments and OH monitoring for each person.	
Guidance notes: The organisation should define the required documentation and records to support this element. They should define what is required, how and where it will be held, the retention policy, how it will be made available to those who need to use it and who will be responsible for maintaining these documents and records. The security of confidential records should be considered to ensure that they cannot be accessed by unauthorised persons.			
09	Performance measurement and compliance checking Establish and implement PMs. Establish regular management and supervisory compliance checks.	Defined PMs. PMs generated in line with the schedule. Compliance checking programme. Completed compliance checks. Identified necessary interventions.	As required by the schedule.
Guidance notes: A systematic set of PMs should be defined in order to enable each BU or site to monitor and confirm compliance with the element and to draw attention to any areas of non-compliance. In order to maintain effective control, the element owner should ensure that accountability for performance against each PM is clearly identified and that the accountable person understands the interventions that need to be made to correct deviations in performance against the PM. The element owner should ensure that PMs are reviewed by an appropriate level of management on a routine scheduled basis. The suggested PMs are defined in Section 3.			
10	Performance and compliance trend analysis PMs and findings from compliance checks are analysed to identify any emerging underlying trends.	A report on trends identified, for review: - at appropriate management meetings; - by BU executive, and - by company executive.	Monthly.

Step	Actions	Deliverables	Frequency
Guidance notes: Section 3 defines suggested PMs which will allow the BU or site to monitor compliance with the element. This is an important aspect of management control but it does not provide the whole picture. Findings from compliance checking and performance monitoring should be reviewed and analysed in order to identify any underlying trends. The monitored and analysed trends should be adapted according to performance and the issues being managed during any particular time period. However, the key is to ensure that resource is assigned to carry out this monitoring and analysis and that this trend analysis is carried out on a routine basis and presented for review at appropriate management meetings.			
11	Annual review of effectiveness and suitability of element arrangements Review of the arrangements to check that they are functioning as intended and are still fit for purpose.	A report identifying: – issues requiring resolution, and – opportunities to enhance the arrangements.	Annually.
Guidance notes: The element owner should initiate an annual review of the element in order to check that it is still functioning as intended and that it is still fit for purpose, identifying any issues requiring resolution or any opportunities to enhance the implementation of the element. The element owner should ensure that appropriate employees and employees' representatives are involved in developing input to this review.			
12	Management review and control meetings Review meetings with the appropriate levels of management. Systematic review of defined PM sets. Review emerging issues identified by the analysis of trends. Manage issues and opportunities identified by annual review of the process. Identify appropriate interventions.	PMs and trend analysis reviewed: – at appropriate management meetings; – by local line management; – by BU executive, and – by company executive. Appropriate interventions to correct deviations from required performance. Initiation of appropriate actions to address findings from the annual review.	Monthly.

Step	Actions	Deliverables	Frequency
Guidance notes: The element owner should ensure that the review of the PMs is incorporated into appropriate management control meetings. It is likely that it will be necessary to incorporate the PMs into meetings at a number of different levels. For example, they may need to be incorporated into executive and senior management team meetings. The scope of the PMs discussed should be matched to the area of the business which is being reviewed at each meeting. The management control meetings should focus on deviations from the required performance, identifying necessary interventions to correct performance. The PMs and the output from these management control meetings may provide input to appropriate health and safety committees.			

3 SUGGESTED COMPLIANCE CHECKS AND PERFORMANCE MEASURES

This guideline provides a set of suggested implementation and operational PMs.

The suggested implementation PMs can be used during the implementation phase to measure and monitor progress with the implementation of the arrangements for leadership, commitment and responsibility.

The suggested operational PMs can be used to measure compliance with the element as part of normal operation. The reader should refer to Figure 1 to indicate which PMs are relevant to which steps.

The suggested measures identify aspects of performance that should be controlled in order to assure the integrity of the operation. In order to be controlled they should be measured by someone in the organisation – if they aren't measured they are unlikely to be controlled.

The level of measurement should be appropriate for the business, taking into account the risk to the business associated with each parameter being out of control. The required frequency of measurement and checking may vary according to the level of demonstrated performance: if the performance of a parameter is demonstrated to be under control then the measurement and checking interval may be extended. However, if the performance of the parameter is shown to be unacceptable, the interval should be reduced. It should be ensured that there is a frequency of measurement and checking which assures an appropriate level of control.

Table 1: Performance measures for element 3

No.	Type	Performance measure
1	Compliance and implementation	Element compliance and implementation status (EIPSS rating)
2	Implementation	Definition of required competencies – progress against schedule
3	Implementation	Definition of FFW assessments and OH surveillance criteria – progress against schedule
4	Implementation and operational	Development of required succession plans – progress against schedule
5	Operational	Competency assessments overdue
6	Operational	Competency assessment outcomes
7	Operational	Position and role holders requiring additional support and control measures
8	Operational	Pre-appointment FFW assessments overdue
9	Operational	Routine FFW assessments and OH surveillance overdue
10	Operational	Observed non-compliances with support and control measures
11	Operational	Overdue field observations
12	Operational	Sickness absence
13	Outcome	Incident root causes which are failures of element 3

3.1 PERFORMANCE MEASURE 1: ELEMENT COMPLIANCE AND IMPLEMENTATION STATUS (EIPSS RATING)

This PM enables management to monitor the implementation and compliance of the element of the EI *PSM framework*. It makes use of the EI *Process Safety Survey* (EIPSS) to enable the business to carry out a systematic self-assessment of their compliance with the expectations of element 3.

The EIPSS can be used for a baseline assessment of compliance, which can then be updated as those responsible close each of the individual identified gaps. In this way it provides management with an easily developed continuously updated assessment of implementation and compliance.

The line manager accountable for implementation should make a corrective intervention if the actual progress falls below plan. It is likely the required interventions would be either to adjust priorities to create space to allow this work to be done, to make additional resource available or to reset the schedule to reflect what can be achieved realistically with the assigned resource.

Table 2: Element compliance and implementation status (EIPSS rating) – PM overview

Type	Required data	Representation
Compliance and implementation	By month: – current element 3, target EIPSS overall rating; – current element 3, actual EIPSS overall rating; – current element 3, EIPSS documented arrangements rating, and – current element 3, EIPSS implementation rating.	Line and bar graph: – target overall element rating (line); – overall element rating (bar); – documented arrangements rating (line); – implementation rating (line).

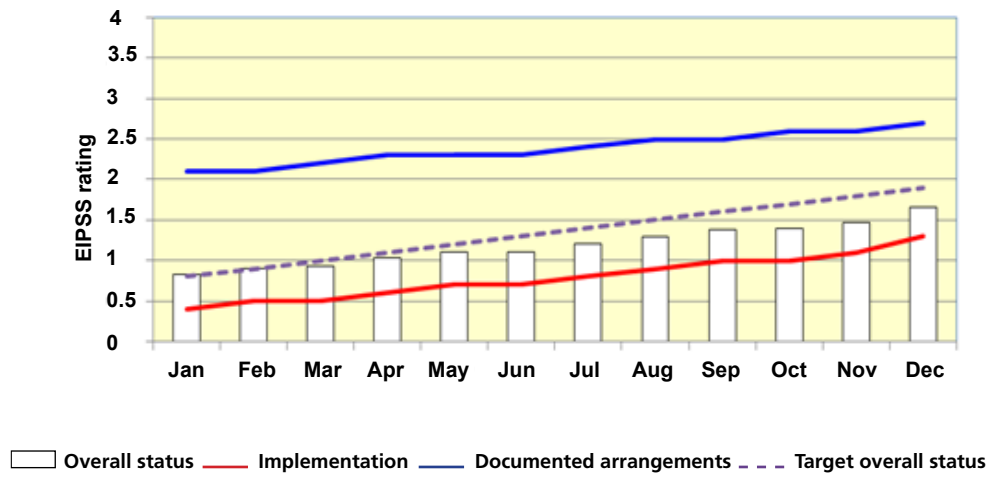


Figure 5: Suggested presentation of PM 1: Element 3 compliance and implementation status (EIPSS rating)

3.2 PERFORMANCE MEASURE 2: DEFINITION OF REQUIRED COMPETENCIES – PROGRESS AGAINST SCHEDULE

This PM enables management to monitor implementation progress, tracking the number of identified roles which should have required competencies defined, the schedule for completion of the definition of the required competencies and progress against the schedule.

The line manager accountable for implementation should make a corrective intervention if the actual progress falls below plan. It is likely the required interventions would be either to adjust priorities to create space to allow this work to be done, to make additional resource available or to reset the schedule to reflect what can be achieved realistically with the assigned resource.

Table 3: Definition of required competencies – progress against schedule – PM overview

Type	Required data	Representation
Implementation	By month, actual against planned: – identified number of personnel; – scheduled number of personnel with required competencies defined, and – actual number of personnel with required competencies defined.	Line/stacked bar: – identified number of personnel (bar); – number scheduled (line), and – number completed (bar).

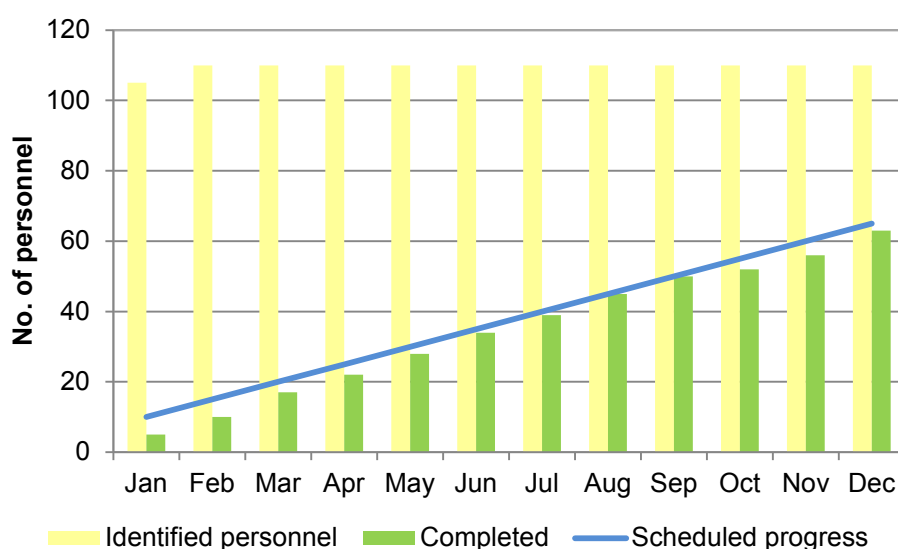


Figure 6: Suggested presentation of PM 2: Definition of competencies – progress against schedule

3.3 PERFORMANCE MEASURE 3: DEFINITION OF FFW ASSESSMENT AND OH SURVEILLANCE CRITERIA – PROGRESS AGAINST SCHEDULE

This PM enables management to monitor implementation progress, tracking the number of identified roles which require defined FFW assessment and OH surveillance criteria, the schedule for completion of the definition of the criteria and progress against the schedule.

The line manager accountable for implementation should make a corrective intervention if the actual progress falls below plan. It is likely the required interventions would either be to adjust priorities to create space to allow this work to be done, to make additional resource available or to reset the schedule to reflect what can be achieved realistically with the assigned resource.

Table 4: Definition of FFW assessment and OH surveillance criteria – progress against schedule – PM overview

Type	Required data	Representation
Implementation	Actual against planned: – identified number of personnel; – scheduled number of personnel with FFW assessment and OH surveillance criteria defined, and – actual number of personnel with FFW assessment and OH surveillance criteria defined.	Line/stacked bar: – identified number of personnel (bar); – number scheduled (line), and – number completed (bar).

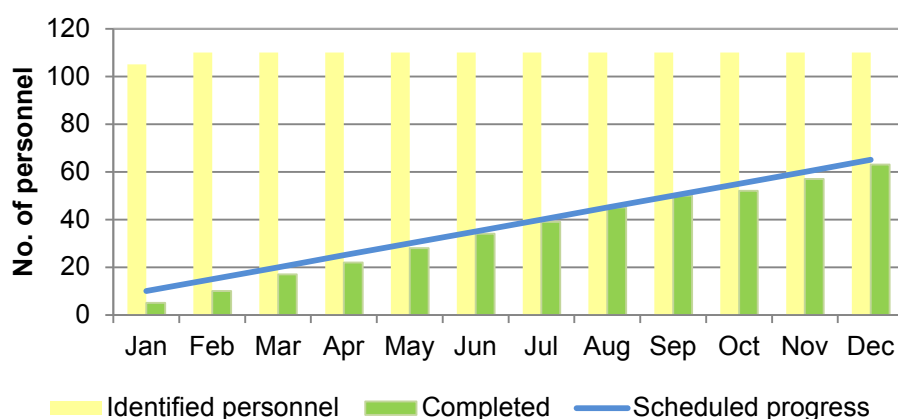


Figure 7: Suggested presentation of PM 3: Definition of FFW assessment and OH surveillance criteria

3.4 PERFORMANCE MEASURE 4: DEVELOPMENT OF REQUIRED SUCCESSION PLANS – PROGRESS AGAINST SCHEDULE

This PM enables management to monitor implementation progress, tracking the number of positions which require succession plans, the schedule for development of the required succession plans and progress against the schedule.

The line manager accountable for implementation may need to make a corrective intervention if the actual progress falls below plan. It is likely the required interventions would be either to adjust priorities to create space to allow this work to be done, to make additional resource available or to reset the schedule to reflect what can be achieved realistically with the assigned resource.

Table 5: Development of required succession plans – progress against schedule – PM overview

Type	Required data	Representation
Implementation	By month, actual against planned: – identified number of positions requiring succession plans; – scheduled number of positions with succession plans developed, and – actual number of positions with succession plans developed.	Line/stacked bar: – identified number of positions (bar); – number scheduled (line), and – number completed (bar).

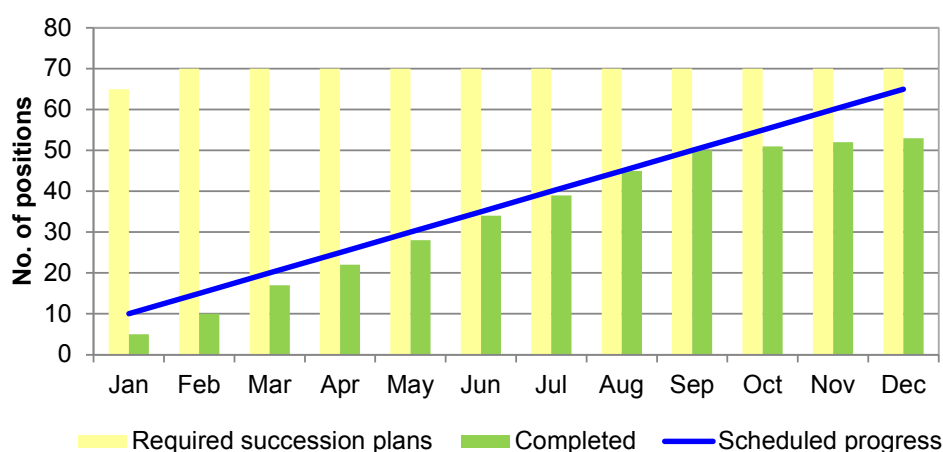


Figure 8: Suggested presentation of PM 4: Development of required succession plans – progress against schedule

3.5 PERFORMANCE MEASURE 5: COMPETENCY ASSESSMENTS OVERDUE

This PM enables management to monitor the number of overdue competency assessments, tracking the number that are overdue for less than one month and the number that are overdue by more than one month.

The graphical representation of this PM is likely to be supplemented by a listing of the outstanding assessments, together with the responsible line manager in each case.

The accountable line manager may need to make an intervention if there are any employees with overdue competency assessments. It is likely that the required intervention would be to directly request the employee's line manager to ensure that the outstanding assessments are completed before the next management control meeting and investigate why the assessments were not done and what needs to be done to ensure that they are done in future.

Table 6: Competency assessments overdue – PM overview

Type	Required data	Representation
Operational	By month: – number of employees with competency assessments overdue by > 1 month, and – number of employees with competency assessments overdue by < 1 month.	Stacked bar: – number of employees with competency assessments overdue by > 1 month, and – number of employees with competency assessments overdue by < 1 month.

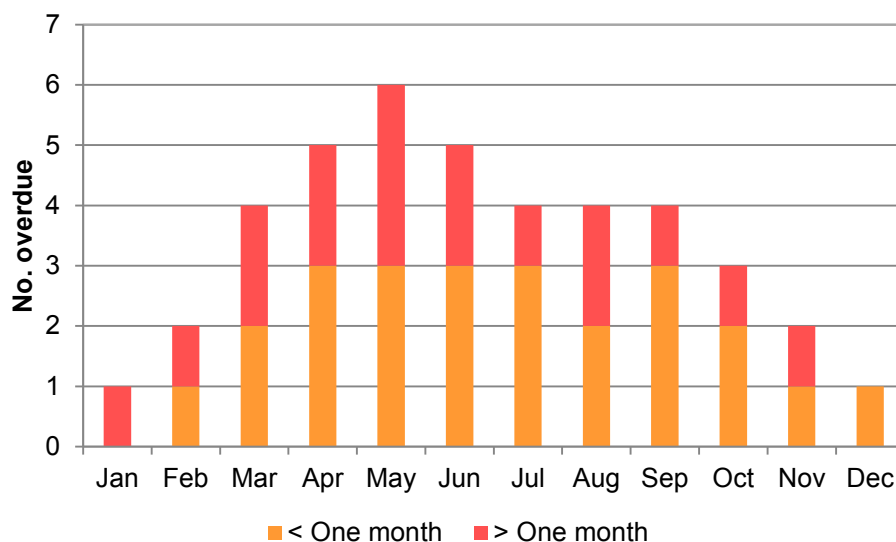


Figure 9: Suggested presentation of PM 5: Competency assessments overdue

3.6 PERFORMANCE MEASURE 6: COMPETENCY ASSESSMENT OUTCOMES

This PM enables management to monitor the outcome of the completed competency assessments; tracking the number of personnel assessed as unacceptable and the number assessed as conditionally acceptable, requiring additional support or control measures.

The graphical representation of this PM is likely to be supplemented by a listing of the personnel who have failed assessments and their line manager.

The accountable line manager may need to make an intervention if there is an adverse trend in the number of failures. It is likely that the intervention would be to question what is the root cause of these failures and what needs to be done to correct the trend.

Table 7: Competency assessment outcomes – PM overview

Type	Required data	Representation
Operational	By month: – number of personnel assessed to be conditionally acceptable with additional support or control measures, and – number of personnel assessed to be unacceptable.	Stacked bar graph: – number conditionally acceptable – number unacceptable

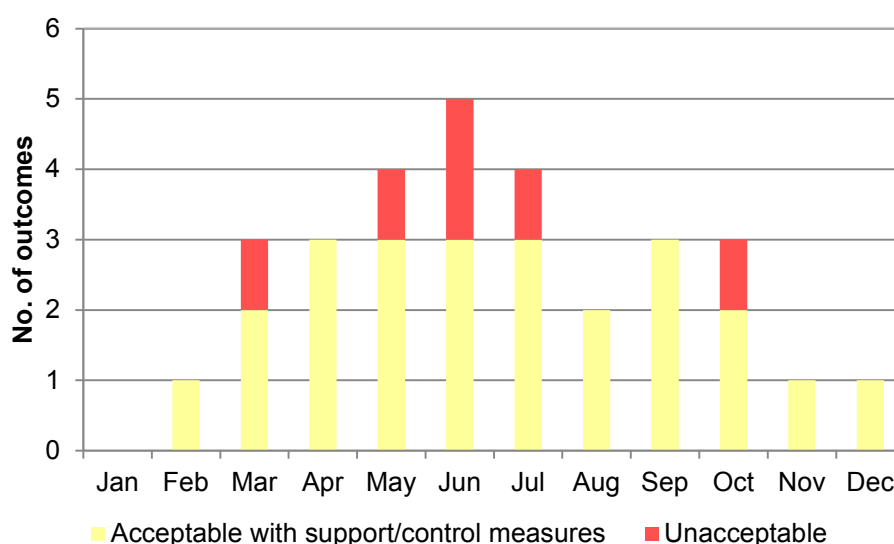


Figure 10: Suggested presentation of PM 6: Competency assessment outcomes

3.7 PERFORMANCE MEASURE 7: POSITION AND ROLE HOLDERS REQUIRING ADDITIONAL SUPPORT AND CONTROL MEASURES

This PM enables management to monitor the number of position and role holders still requiring additional control measures to satisfy the competency requirements to carry out their position or role, by tracking the number of personnel who still require additional support and control measures.

The graphical representation of this PM is likely to be supplemented by a listing of the personnel requiring additional support and control measures, together with their responsible line manager and the target schedule for removal of the additional support and control measures.

The accountable line manager may need to make an intervention if there is a prolonged increasing trend in the number of personnel requiring additional support and control measures. It is likely that the intervention would be to question what additional support or resources would be required to correct the trend.

Table 8: Position and role holders requiring additional support and control measures – PM overview

Type	Required data	Representation
Operational	By month: – number of position and role holders requiring additional support and control measures.	Bar graph: – position and role holders requiring additional support and control measures (bar).

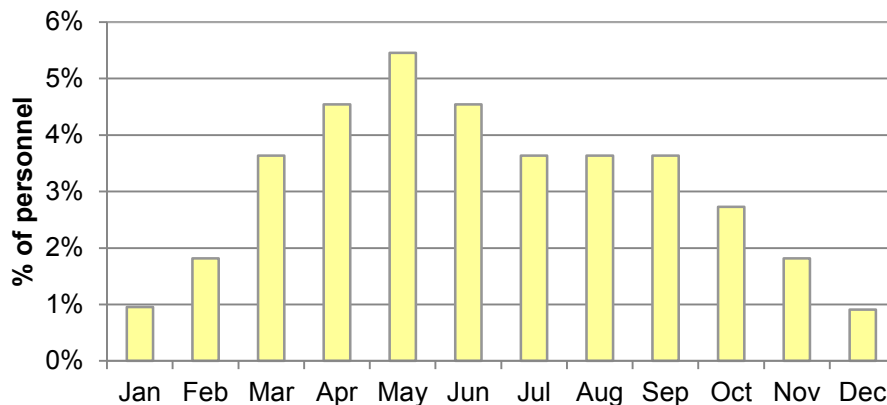


Figure 11: Suggested presentation of PM 7: Position and role holders requiring additional support and control measures

3.8 PERFORMANCE MEASURE 8: PRE-APPOINTMENT FFW ASSESSMENTS OVERDUE

This PM enables management to monitor compliance with the requirement to carry out a FFW assessment before a new recruit is hired or an existing employee moves to a changed job role, tracking the number of new recruits and the number of role changers who have not had an appropriate FFW assessment.

It is likely that the graphical representation of this PM would be supported by a list showing the names of personnel without appropriate FFW assessment and the appointing line managers in each case.

The accountable line manager should make an intervention if there are any new recruits or role changes without FFW assessments. It is likely that the required intervention would be to directly request the appointing line manager to ensure that the outstanding assessments are completed before the next management control meeting and to investigate why the assessments were not done and what needs to be done to ensure that they are completed in future.

Table 9: Pre-appointment FFW assessments overdue – PM overview

Type	Required data	Representation
Operational	By month: – number of FFW assessments overdue for new recruits, and – number of FFW assessments overdue for role changes.	Stacked bar: – number of FFW assessments overdue for new recruits, and – number of FFW assessments overdue for role changes.

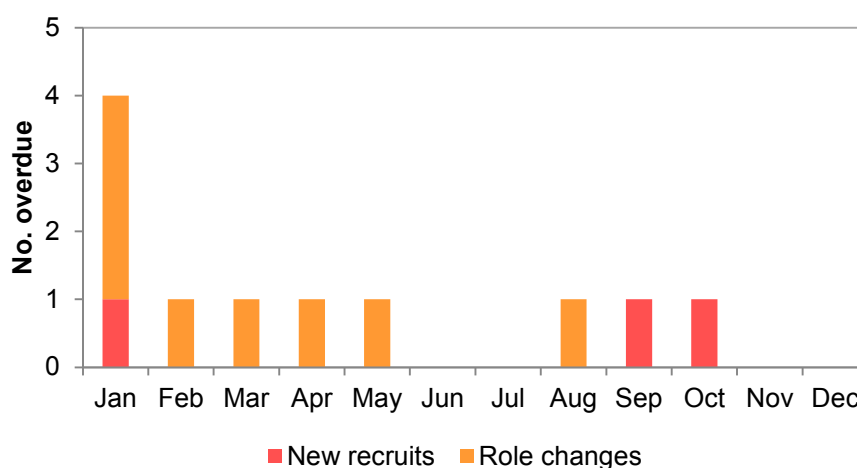


Figure 12: Suggested presentation of PM 8: Pre-appointment FFW assessments overdue

3.9 PERFORMANCE MEASURE 9: ROUTINE FFW ASSESSMENTS AND OH SURVEILLANCE OVERDUE

This PM enables management to monitor the number of overdue FFW assessments and OH surveillance, tracking the number that are overdue for less than one month and the number that are overdue by more than one month.

The graphical representation of this PM is likely to be supplemented by a listing of the outstanding assessments, together with the responsible line manager in each case.

The accountable line manager should make an intervention if there are any employees with overdue FFW assessments and/or OH surveillance. It is likely that the required intervention would be to directly request the employee's line manager to ensure that the outstanding assessments are completed before the next management control meeting and to investigate why the assessments were not done and what needs to be done to ensure that they are done in future.

Table 10: Routine FFW assessments and OH surveillance overdue – PM overview

Type	Required data	Representation
Operational	By month: – number of employees with FFW assessments and OH surveillance overdue by > 1 month, and – number of employees with FFW assessments and OH surveillance overdue by < 1 month.	Stacked bar: – number of employees with FFW assessments and OH surveillance overdue by > 1 month, and – number of employees with FFW assessments and OH surveillance overdue by < 1 month.

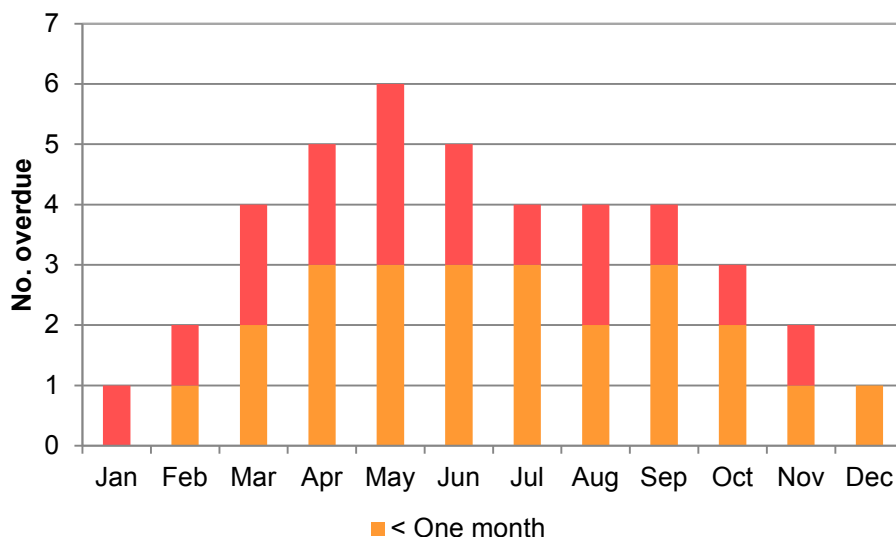


Figure 13: Suggested presentation of PM 9: Routine FFW assessments and OH surveillance overdue

3.10 PERFORMANCE MEASURE 10: OBSERVED NON-COMPLIANCES WITH SUPPORT AND CONTROL MEASURES

This PM enables management to monitor whether the required support and control measures are being implemented satisfactorily, tracking the number of major and minor non-compliances with the identified required additional support and control measures for new appointees to a position.

The graphical representation of this PM is likely to be supplemented by analysis of the root causes of the non-compliances and proposed corrective actions.

The accountable line manager may need to make an intervention if there is a prolonged increasing trend in the number of non-compliances. It is likely that the intervention would be to question what additional support or resources would be required to correct the trend.

Table 11: Observed non-compliances with support and control measures – PM overview

Type	Required data	Representation
Operational	By month: – number of major non-compliances with required support and control measures, and – number of minor non-compliances with required support and control measures.	Stacked bar graph: – major non-compliances, and – minor non-compliances.

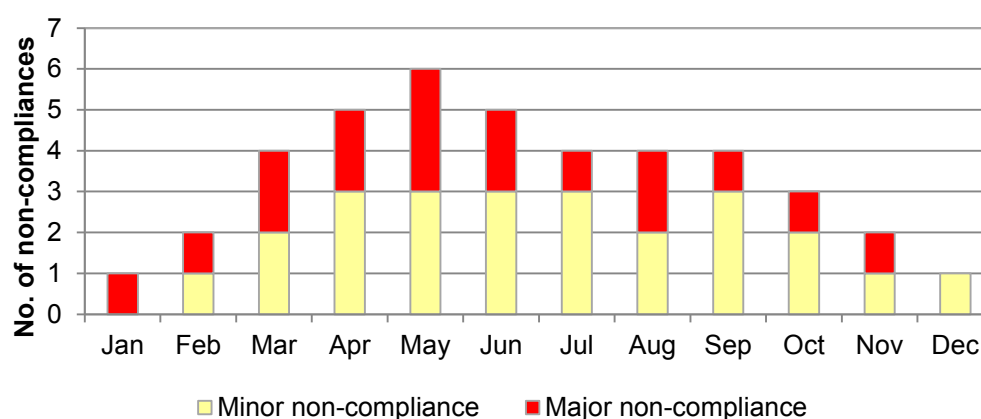


Figure 14: Suggested presentation of PM 10: Observed non-compliances with support and control measures

3.11 PERFORMANCE MEASURE 11: OVERDUE FIELD OBSERVATIONS

This PM enables management to monitor whether the scheduled management and supervisory field observations have been carried out, tracking the number overdue.

The graphical representation of this PM is likely to be supplemented by a listing of the managers and supervisors with field observations overdue, and their line manager.

The accountable line manager may need to make an intervention if there are any field observations overdue. It is likely that the intervention would be to question what has prevented the field observations from being done and possibly to adjust priorities in order to make time or to provide additional resource to enable the required field observations to be completed.

Table 12: Overdue field observations – PM overview

Type	Required data	Representation
Operational	By month: – number of field observations overdue.	Bar graph: – field observations overdue (bar).

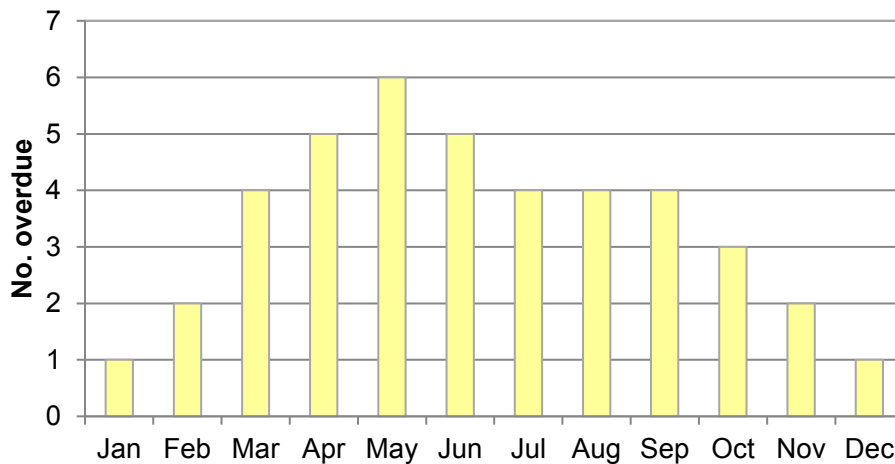


Figure 15: Suggested presentation of PM 11: Overdue field observations

3.12 PERFORMANCE MEASURE 12: SICKNESS ABSENCE

This PM enables management to monitor the overall sickness trends, tracking the total amount, the amount that is long term, the amount that is short term and the amount of sickness that is work causal.

Table 13: Sickness absence – PM overview

Type	Required data	Representation
Operational (lagging indicator)	By month: – total days lost due to sickness; – days lost due to long term sickness; – days lost due to short term sickness, and – days lost due to work causal sickness.	Stacked bar/line: – long term sickness days (bar); – short term sickness days (bar), and – work causal sickness days (line).

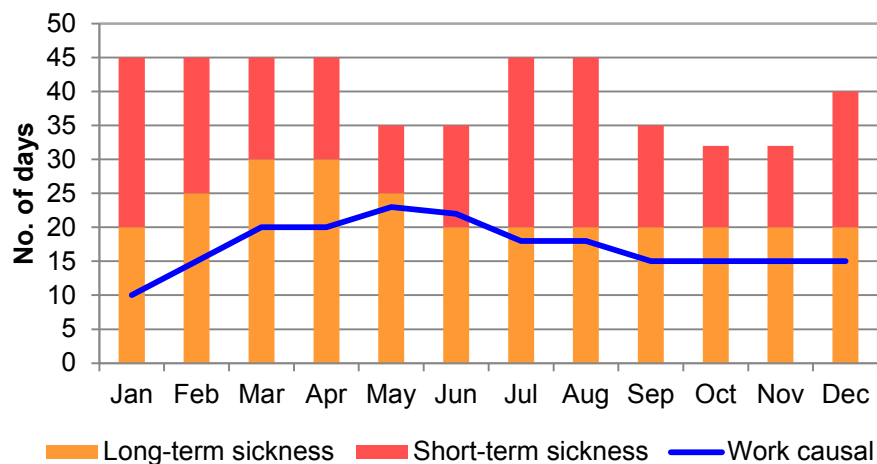


Figure 16: Suggested presentation of PM 12: Sickness absence

3.13 PERFORMANCE MEASURE 13: INCIDENT ROOT CAUSES WHICH ARE FAILURES OF ELEMENT 3

This PM enables management to monitor the trend of the number of times a failure of some aspect of element 3 is identified as a root cause of an incident. (*Guidance on meeting expectations of EI process safety management framework Element 19: Incident reporting and investigation* provides guidance on how root causes should be aligned to failures of EI PSM framework elements). This information should assist line managers to understand whether their arrangements for meeting the expectations of element 3 are achieving the required outcome.

A constant or increasing number of root causes associated with a failure of this element would indicate that the effectiveness of the arrangements and their implementation should be reviewed.

Table 14: Incident root causes which are failures of element 3 – PM overview

Type	Performance measure	Comments
Outcome	By month: – number of incident root causes which are failures of element 3, categorised as root causes of: – very serious incidents; – serious incidents, and – incidents.	Stacked bar: – very serious incidents; – serious incidents, and – incidents.

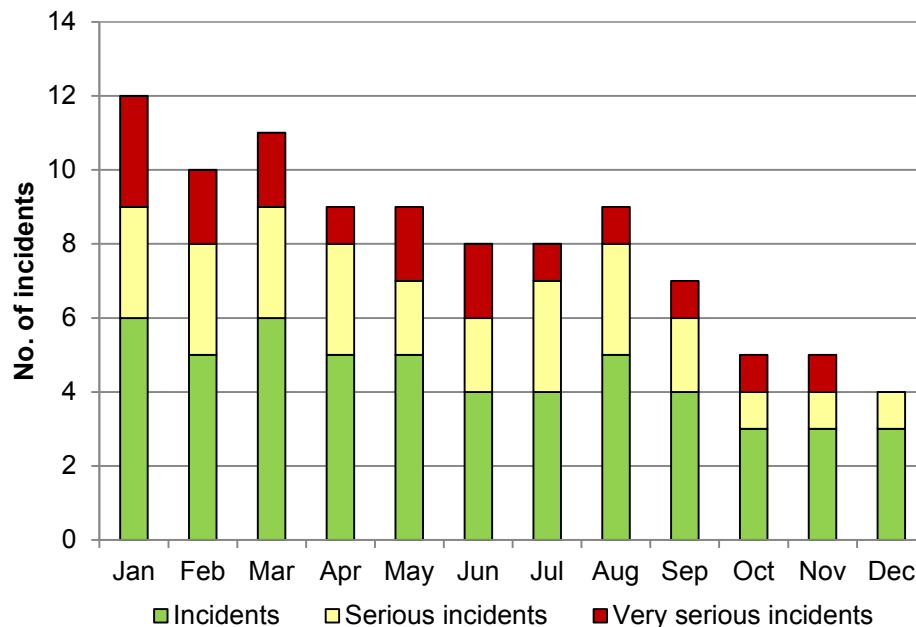


Figure 17: Suggested presentation of PM 13: Incident root causes which are failures of element 3

ANNEX A

REFERENCES AND BIBLIOGRAPHY

A.1 REFERENCES

EI, *High level framework for process safety management*,
<http://www.energyinst.org/psm-framework>

A.2 FURTHER RESOURCES

This section contains a non-exhaustive list of further resources to help organisations implement element 3. Resources include pertinent guidance publications, codes of practice, standards, and practical tools.

	Description	Step
EI	<i>Human factors briefing note no. 7: Training and competence</i> , http://www.energypublishing.org/publication/ei-technical-publications/process-safety/human-factors-briefing-note-no.-7-training-and-competence	06, 06a, 06b
EI	<i>Fitness assessment instruction manual</i>	04a, 04c
EI	<i>A recommended fitness standard for the oil and gas industry</i>	04
EI	<i>Guidance on health surveillance</i>	04c
EI	<i>Guidelines for physical capability and functionality capacity requirements for emergency response team members</i>	04
EI	Research report: Human factors performance indicators for the energy and related process industries http://www.energyinst.org/HOFPI	09, 10
HSE	<i>Managing competence for safety-related systems</i> , http://www.hse.gov.uk/humanfactors/topics/mancomppt1.pdf	06, 06a, 06b
HSE	<i>HSE human factors briefing note no. 2: Competence</i> , http://www.hse.gov.uk/humanfactors/topics/02competency.pdf	06, 06a, 06b
HSE	<i>Developing and maintaining staff competence</i> , second edition, http://www.rail-reg.gov.uk/upload/pdf/sf-dev-staff.pdf	06, 06a, 06b
HSE	HSG254, <i>Developing process safety indicators: A step-by-step guide for the chemical and major hazard industries</i> , http://books.hse.gov.uk/hse/public/saleproduct.jsf?catalogueCode=9780717661800	09, 10
UKPIA/ COGENT	<i>Guidelines for competency management systems for downstream and petroleum sites</i> , http://www.cogent-ssc.com/Publications/CMS_Web_Version.pdf	01 – 12

ANNEX B

GLOSSARY OF ACRONYMS AND ABBREVIATIONS

BU	business unit
FFW	fitness for work
GTRA	generic task risk assessment
HR	human resources
HS&E	health, safety and environment
MAH	major accident hazard
MS	management system
OH	occupational health
PM	performance measure
PSC	Process Safety Committee

ANNEX C

MAPPING OF PROCESS STEPS TO EI *PSM FRAMEWORK* EXPECTATIONS

Table C1: Mapping of process steps 01 to 05a(6) to EI *PSM framework* expectations for element 3

	Expectation	Step number																														
		01	02	03	04	04a	04a (1)	04a (2)	04a (3)	04a (4)	04a (5)	04a (6)	04b	04b (1)	04b (2)	04c	04c (1)	04c (2)	04c (3)	04c (4)	04c (5)	04c (6)	04c (7)	04c (8)	05	05a	5a (1)	5a (2)	5a (3)	5a (4)	5a (5)	5a (6)
3.1	The required HSE&E and process safety competencies and FFW and health monitoring requirements are defined for all roles in the organisation. These competencies address EI <i>PSM framework</i> expectations.																															
3.2	A process is in place for screening, selection and placement of employees which confirms their compliance with the specified requirements for the role.																															
3.3	Individual and collective experience and knowledge are maintained and are carefully considered when personnel changes are made.																															

	Expectation	Step number																														
		01	02	03	04	04a	04a (1)	04a (2)	04a (3)	04a (4)	04a (5)	04a (6)	04b	04b (1)	04b (2)	04c	04c (1)	04c (2)	04c (3)	04c (4)	04c (5)	04c (6)	04c (7)	04c (8)	05	05a	5a (1)	5a (2)	5a (3)	5a (4)	5a (5)	5a (6)
3.4	Roles and responsibilities are realistically designed to take account of human capabilities and limitations and other key human and organisational factors.																															
3.5	Appropriate induction is carried out for personnel taking up a new or revised position.																															
3.6	A staffing development and succession plan is in place for all positions with PSM responsibility.																															
3.7	The organisational structure, and continuity of PSM critical positions, are reviewed annually to ensure that they are adequate to meet the EI <i>PSM framework</i> expectations.																															
3.8	Employee competency and FFW is regularly assessed against requirements of their assigned role and responsibilities.																															

	Expectation	Step number																													
		01	02	03	04	04a	04a (1)	04a (2)	04a (3)	04a (4)	04a (5)	04a (6)	04b (1)	04b (2)	04c	04c (1)	04c (2)	04c (3)	04c (4)	04c (5)	04c (6)	04c (7)	04c (8)	05	05a	5a (1)	5a (2)	5a (3)	5a (4)	5a (5)	5a (6)
3.9	Employee training and development needs are identified through a systemic process.																														
3.10	Systemic and effective training and development programmes ensure that each person is competent to understand and accept and deliver against the defined HS&E and process safety responsibilities for their role.																														
3.11	Training and development programmes are a combination of formal courses, coaching and practical work.																														
3.12	Training and development programmes are formally reviewed, to assess their effectiveness and identify issues which need to be addressed and improvement opportunities.																														

	Expectation	Step number																													
		01	02	03	04	04a	04a (1)	04a (2)	04a (3)	04a (4)	04a (5)	04a (6)	04b (1)	04b (2)	04c	04c (1)	04c (2)	04c (3)	04c (4)	04c (5)	04c (6)	04c (7)	04c (8)	05	05a	5a (1)	5a (2)	5a (3)	5a (4)	5a (5)	5a (6)
3.13	Arrangements for employee selection, placement and competency and health assurance are understood and followed, understanding of procedures and compliance with them are regularly tested.																														
3.14	Compliance and performance trends are reviewed by specified levels of managment.																														

Table C2: Mapping of process steps 05a(7) to 12 to EI *PSM framework* expectations for element 3

	Expectation	Step number																														
		05a (7)	05a (8)	05a (9)	05a (10)	06	06a	06a (1)	06a (2)	06a (3)	06a (4)	06a (5)	06b	06b (1)	06b (2)	06b (3)	06b (4)	06b (5)	06b (6)	06b (7)	06b (8)	06b (9)	06b (10)	07	07a	07b	07c	8	9	10	11	12
3.1	The required HSE&E and process safety competencies and FFW and health monitoring requirements are defined for all roles in the organisation. These competencies address EI <i>PSM framework</i> expectations.																															
3.2	A process is in place for screening, selection and placement of employees which confirms their compliance with the specified requirements for the role.																															
3.3	Individual and collective experience and knowledge are maintained and are carefully considered when personnel changes are made.																															

GUIDANCE ON MEETING EXPECTATIONS OF EI PROCESS SAFETY MANAGEMENT FRAMEWORK
ELEMENT 3: EMPLOYEE SELECTION, PLACEMENT AND COMPETENCY, AND HEALTH ASSURANCE

	Expectation	Step number																													
		05a (7)	05a (8)	05a (9)	05a (10)	06	06a	06a (1)	06a (2)	06a (3)	06a (4)	06a (5)	06b (1)	06b (2)	06b (3)	06b (4)	06b (5)	06b (6)	06b (7)	06b (8)	06b (9)	06b (10)	07	07a	07b	07c	8	9	10	11	12
3.4	Roles and responsibilities are realistically designed to take account of human capabilities and limitations and other key human and organisational factors.																														
3.5	Appropriate induction is carried out for personnel taking up a new or revised position.																														
3.6	A staffing development and succession plan is in place for all positions with PSM responsibility.																														
3.7	The organisational structure, and continuity of PSM critical positions, are reviewed annually to ensure that they are adequate to meet the EI PSM framework expectations.																														

	Expectation	Step number																														
		05a (7)	05a (8)	05a (9)	05a (10)	06	06a	06a (1)	06a (2)	06a (3)	06a (4)	06a (5)	06b	06b (1)	06b (2)	06b (3)	06b (4)	06b (5)	06b (6)	06b (7)	06b (8)	06b (9)	06b (10)	07	07a	07b	07c	8	9	10	11	12
3.8	Employee competency and FFW are regularly assessed against requirements of their assigned role and responsibilities.																															
3.9	Employee training and development needs are identified through a systemic process.																															
3.10	Systemic and effective training and development programmes ensure that each person is competent to understand and accept and deliver against the defined HS&E and process safety responsibilities for their role.																															
3.11	Training and development programmes are a combination of formal courses, coaching and practical work.																															

	Expectation	Step number																														
		05a (7)	05a (8)	05a (9)	05a (10)	06	06a	06a (1)	06a (2)	06a (3)	06a (4)	06a (5)	06b	06b (1)	06b (2)	06b (3)	06b (4)	06b (5)	06b (6)	06b (7)	06b (8)	06b (9)	06b (10)	07	07a	07b	07c	8	9	10	11	12
3.12	Training and development programmes are formally reviewed, to assess their effectiveness and identify issues which need to be addressed and improvement opportunities.																															
3.13	Arrangements for employee selection, placement and competency and health assurance are understood and followed, understanding of procedures and compliance with them are regularly tested.																															
3.14	Compliance and performance trends are reviewed by specified levels of managment.																															

ANNEX D

EXAMPLE REPORT TEMPLATE: MANAGEMENT AND SUPERVISORY FIELD OBSERVATION

Management and supervisory field observation report						
Location:					Date:	
Work group leader:					Observer:	
	Rating					Comments
	1	2	3	4	n/a	
Are the FFW and OH criteria suitable, sufficient and being kept up-to-date?						
Are personnel aware of FFW and OH criteria and monitoring arrangements?						
Have the pre-appointment FFW assessments been carried out?						
Are the identified required support and control measures being implemented?						
Have routine FFW assessments and OH surveillance been carried out?						
Are required competencies suitable, sufficient and being kept up-to-date?						
Are personnel aware of the required competencies for their roles?						
Is there evidence that training and development plans are being developed and implemented?						
Are the routine competency assessments suitable, sufficient and being carried out?						
Are the succession plans suitable, sufficient and being kept up-to-date?						
1 = Major deficiency identified 3 = Meets expectations				2 = Minor deficiency identified 4 = Exceeds expectations		

Note: Organisations should define what will be considered as major and minor deficiencies; the use of a risk matrix may assist with this.



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