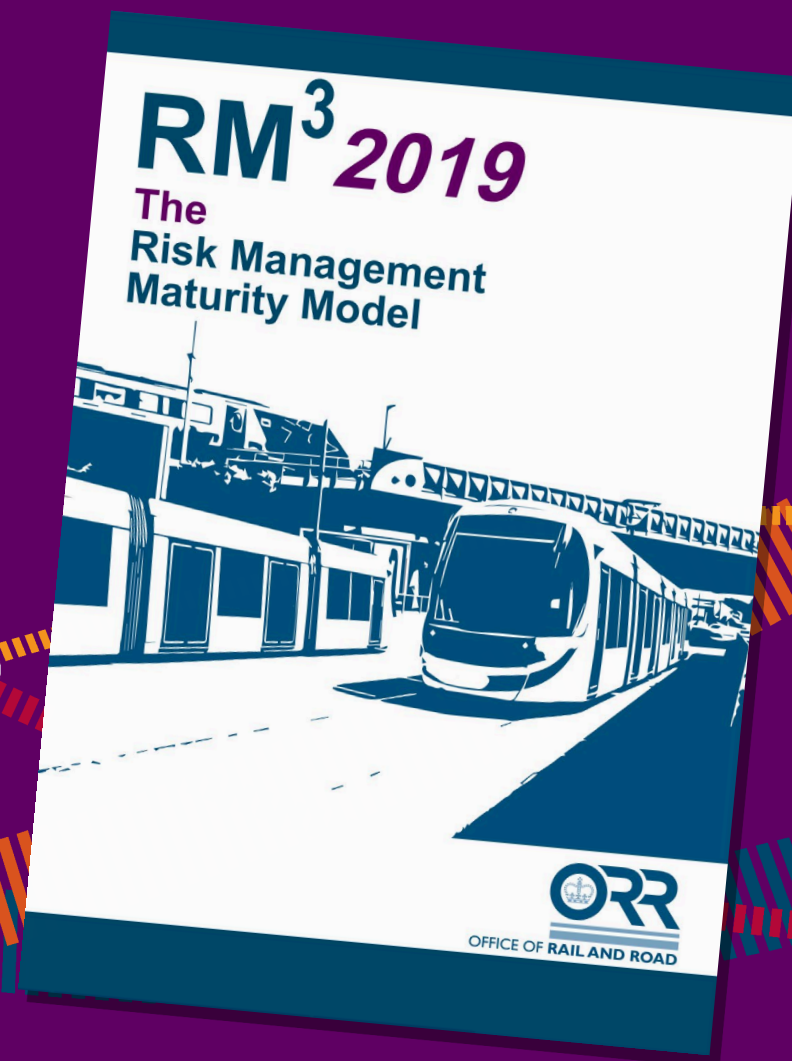


RM3 2019

Errol Galloway
Head of Capability and RM3
Office of Rail and Road



Where are we going?

Risk Management Maturity Model 2019

Scope of today's session:

- Why RM3 helpful and what it helps achieve
- RM3 2019 Changes
 - What & Why
- Illustrate its use
- Exercise
- Q&A



risik
RM3 Management
maturity
model



Why does risk control need to get better?

...because essentially it is people that control risks day in, day out and human performance varies.

If they are already high performing (“**excellent**”), then greater likelihood that any dips in performance will still be above the legal minimum and risks will be adequately controlled...

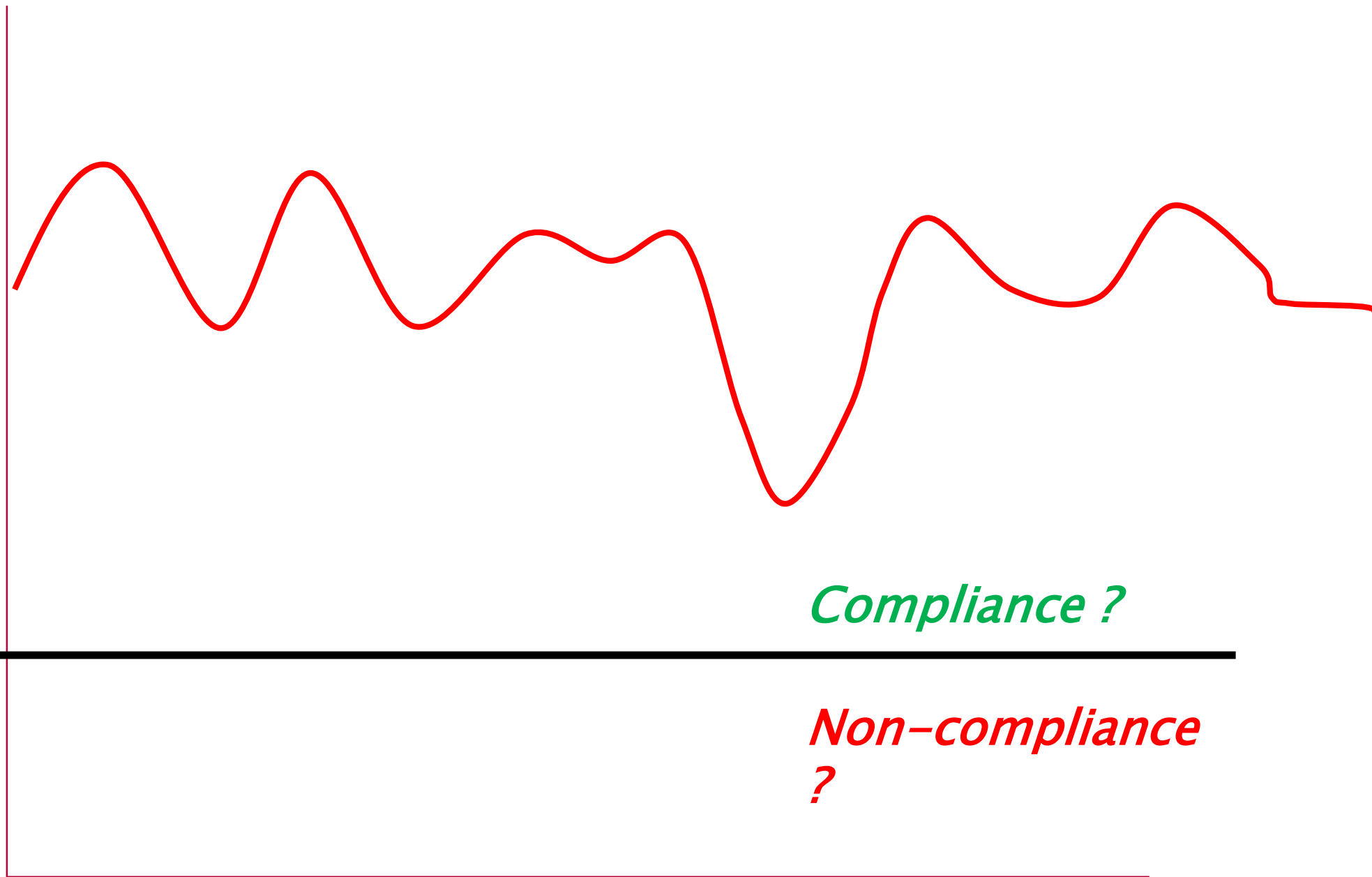
...If they are only poorly performing (“**ad hoc**”), then greater likelihood that their normal performance (and any dips) are below the legal minimum and risks are uncontrolled.



Excellent



Ad hoc



Compliance ?

Non-compliance ?



Time

Our vision for RM³ is:

That the Risk Management Maturity Model is the capability model used by all UK rail companies to:

- internally, and with their ORR inspectors, discuss the evidence found through assessment work; to
- determine maturity of their safety management systems; and
- identify what they need to do to ‘continuously improve’ and strive for excellence in risk control;

and that this new edition of RM3 is more readily accessible to those just starting out with RM3

.... as well as pushing the boundaries of excellence for experienced users.



Why RM3?.....

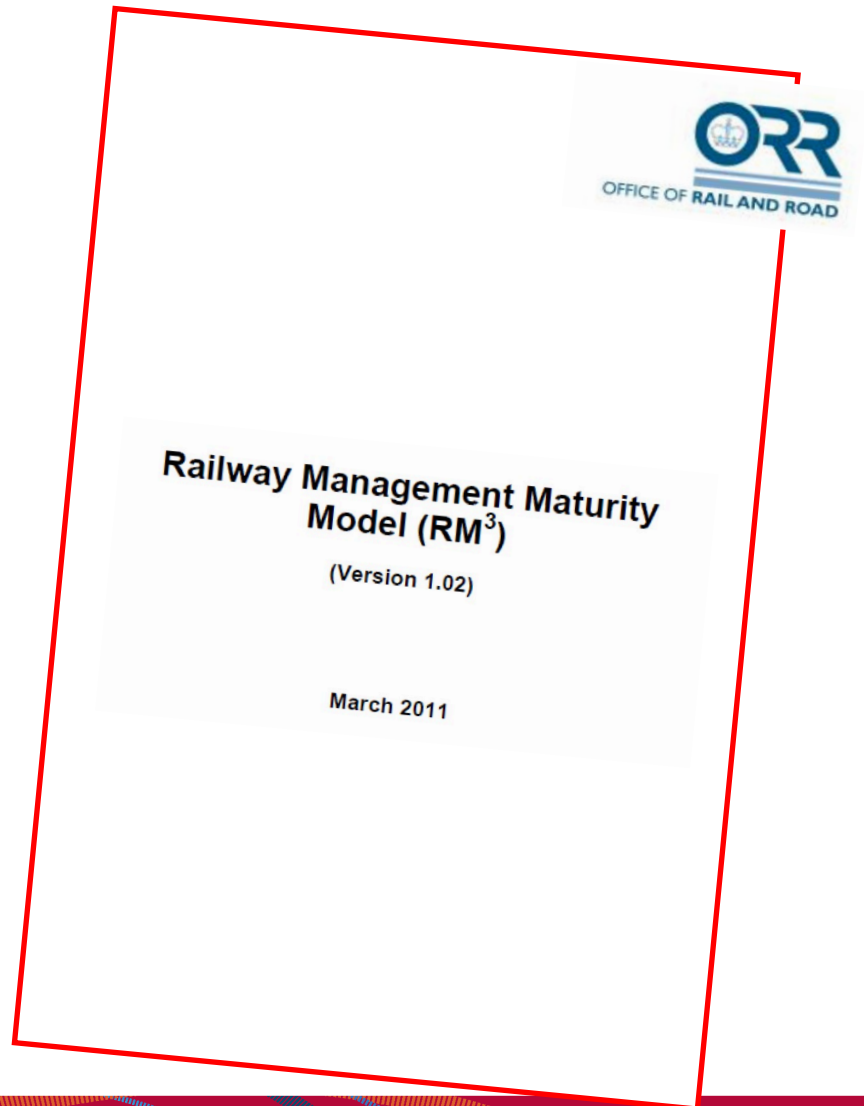
ORR view?

- RM3 as a tool for assessing an organisation's ability to successfully manage health and safety risks, but we also use it to
- determine if the organisation's health and safety management system is continuously improving.
- Where an organisation has adopted RM3, it demonstrates to us the commitment to continuously improve its risk control
- It is not mandatory but.....

It is becoming the preferred model across the industry



The RM³ journey

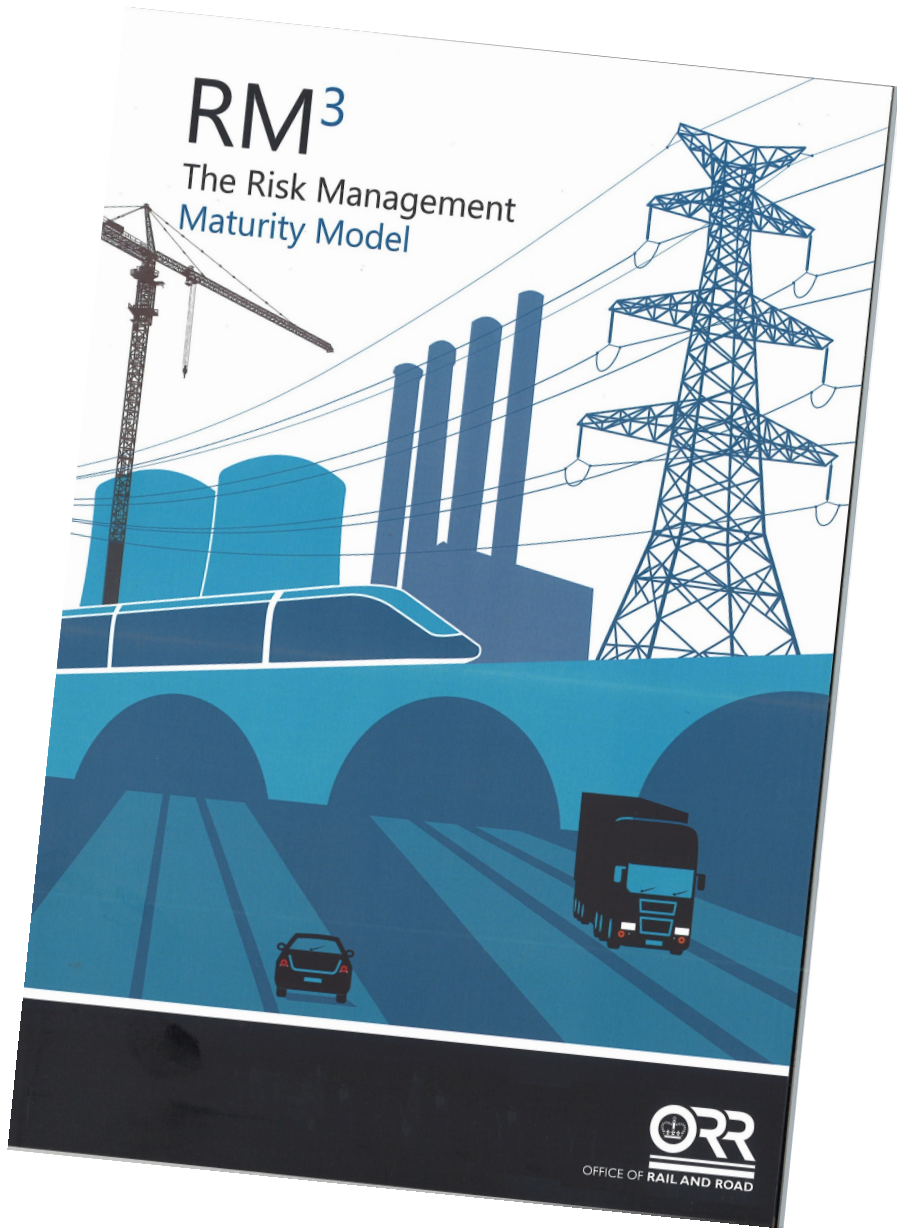


2011

- *The Railway Management Maturity Model was published as tool for regulators*

2015

- *Changes to the governance of the model*
- *Formation of the RM³ Governance Board of industry representatives*



2016

- *Model extended to industry as a tool*
- *Governance Board strengthened with industry partners*

2017

- *Version 2 published now as the 'Risk Management Maturity Model'*

2018

- *Full redraft of the model commenced*

2019

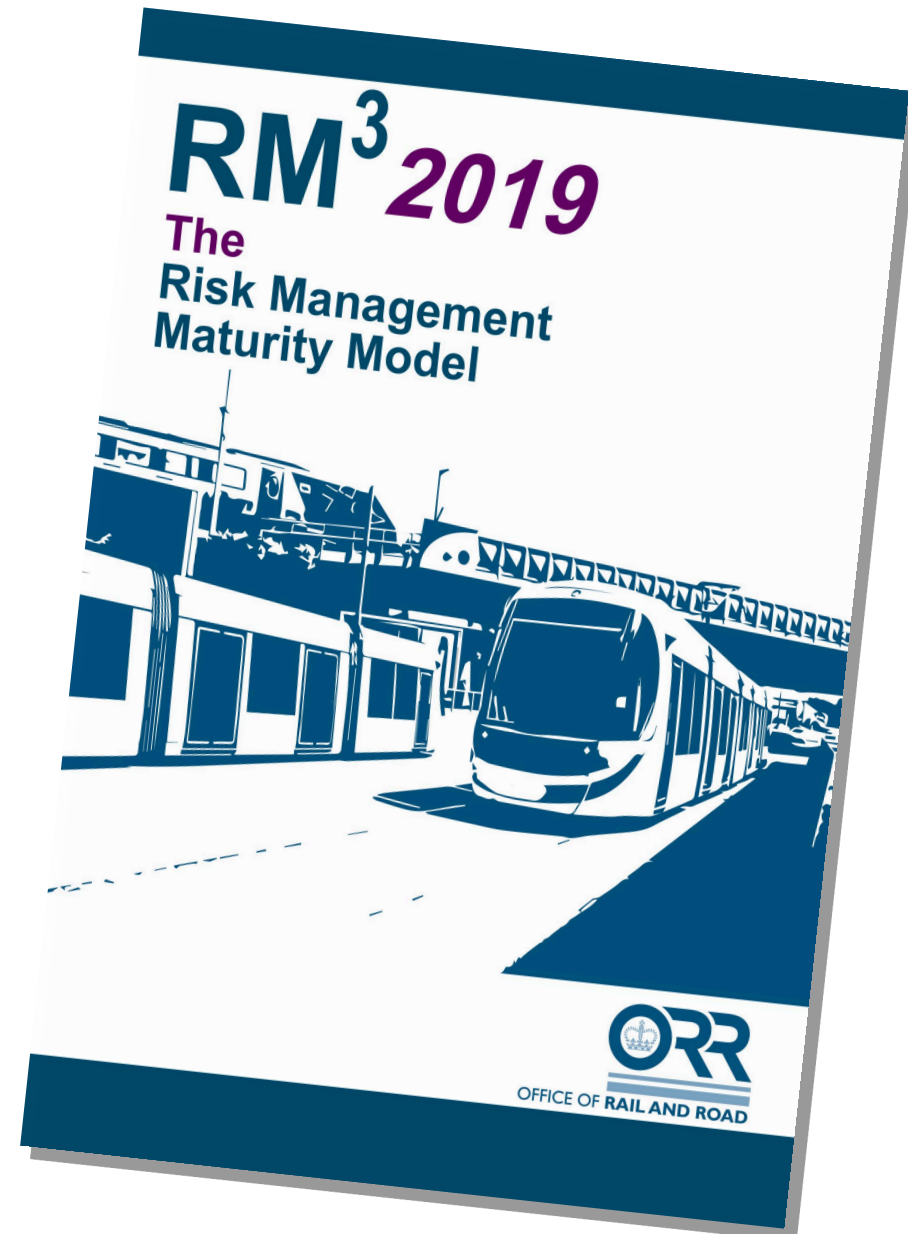
- *Launch of RM3-2019*

2019

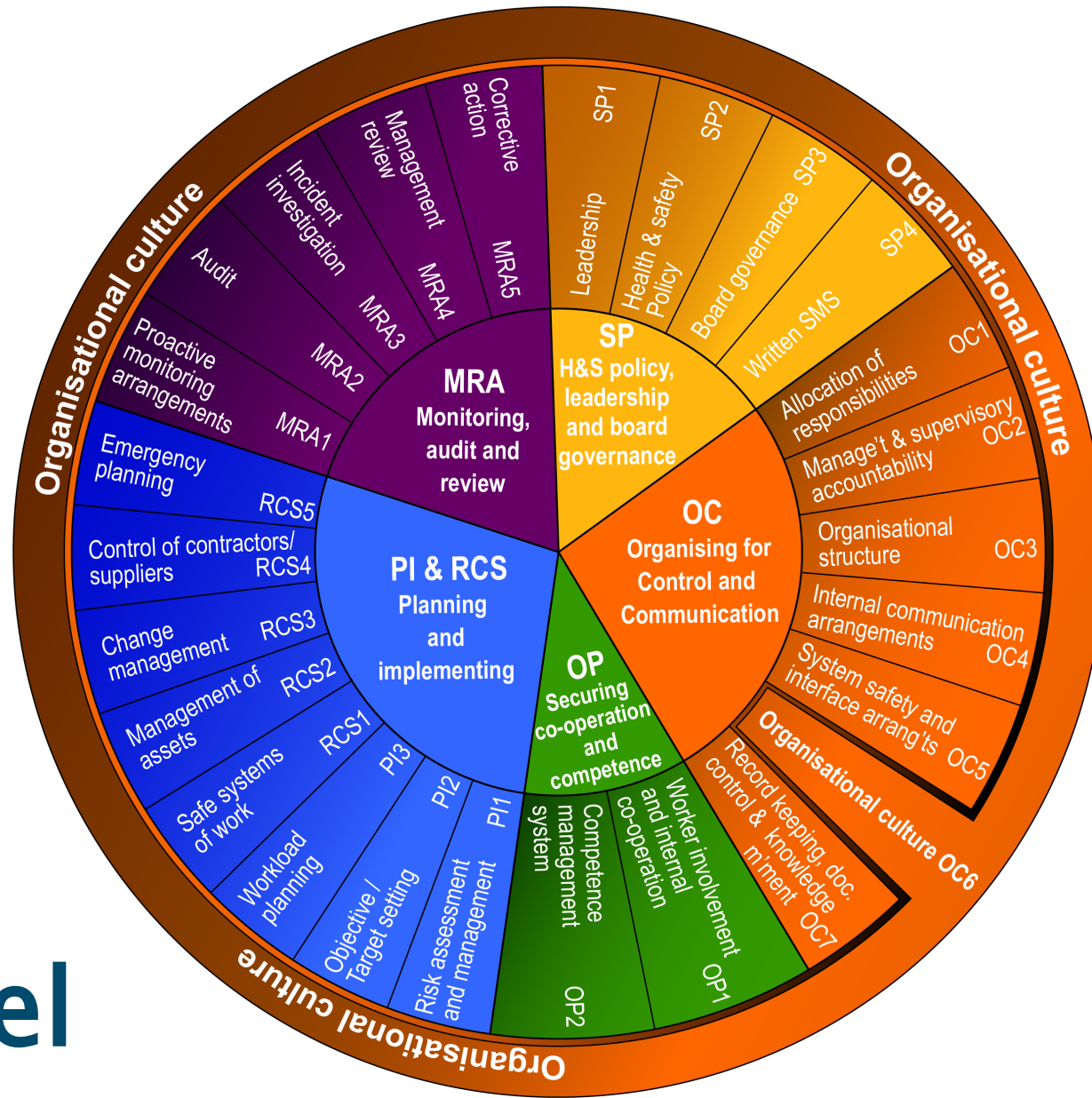
Version 3 published on 1st April 2019

Builds on earlier versions

- *Relevant & meaningful criteria*
- *Strengthened descriptors*
- *Logical progression*
- *Greater clarity on next steps*



The RM³ model





Local groups are organised to ensure repeatable performance BUT each work group performs similar tasks differently

Ad hoc and uncoordinated

Proactive/continual improvement

Delivery can be predicted by the management system
Variation and change is controlled

Good practice synthesised into standard processes

The 5 maturity levels

SP 1 Leadership

SP 1

Leadership from the top provides a consistent example and inspiration for leaders at all levels of the organisation. Good leadership in health and safety (H&S) management involves:

- The attitudes and decisions of senior managers aligning with the H&S policy and culture;
- Identifying and promoting the styles of leadership and management practices at all levels, which best support a positive health and safety culture;
- Promoting effective collaboration and engagement of all workers and business partners to achieve continuous improvement on health and safety;
- Aligning the leaders in operational management, organisational functions and operational and support units in pursuit of the common health and safety purpose, strategies and goals;
- Assessing health and safety leadership and management behaviour to motivate and reward success, in improving the control of risk; and
- Adjusting the performance-management and reward systems so they help the organisation achieve its goals and strategies for improving health, safety and performance.

Excellence

- Leaders at all levels of the organisation demonstrate shared values which strive towards continuous improvement.
- Leaders search within and outside the organisation for opportunities to improve risk control in their area of the organisation to ensure it is as effective and efficient as possible.
- Leaders always consider how they influence others, recognising that good leadership is compelling not coercive.
- They pro-actively promote a positive culture and encourage safety improvements in all areas of the business.
- Health and safety leaders demonstrate that better results are achieved by exercising power through influence over, staff.

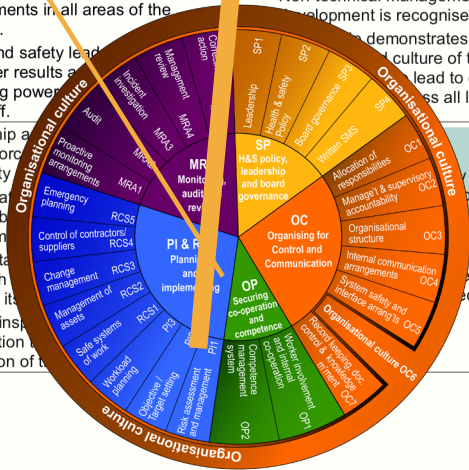
Predictable

- Leadership and safety arrangements are reinforced and safety performance is improved.
- Leaders are credible and are able to improve the health and safety performance of the organisation.
- Leaders inspire the organisation to achieve its H&S vision of...

Culture
Leaders recognise they have an obligation to foster the kind of organisational climate where people find it easy to speak up and share when they have made mistakes rather than covering up errors.

- Leaders encourage people and enable them to join forces and to participate as responsible individuals in a collaborative institutional enterprise.

- Non-technical management skills and development is recognised as world class. Demonstrates and reinforces the culture of the organisation. This leads to engagement across all layers.



Standardised

- The organisation is built around a command and control structure with some feedback.
- There is a rule book-based approach to health and safety management, this can result in unwavering adherence to standards with little innovation or flexibility.
- Collaboration occurs as specified in 'the rules'.

Culture
Leadership is still largely viewed as a senior management role.

- Non-technical skills are specified and staff receive appropriate training.

Managed

- There may be managers with health and safety leadership skills, but these are not proactively developed by the organisation.
- Managers demonstrate leadership skills but these are not recognised by everyone or used consistently within the organisation.
- The organisation's goals and priorities are not understood by all leaders in the organisation.
- Some collaboration occurs but often by chance rather than planned and depends on the individuals involved rather than being systematic.

Culture
Leadership is viewed solely as a senior management role.

- There is no consistency over how non-technical management skills are developed within the organisation.

- There is no evidence of positive health and safety leadership at any level in the organisation.
- Health and safety leadership is not considered to be important in staff development.

Culture
Staff consider there is little effective leadership in health and safety at any level of the organisation.

- Health and safety leadership skills and other non-technical management skills are not recognised or developed within the organisation.

Culture 'call-outs'

Guidance and further reading:

- INDG 277 'Leadership in the Major Hazard Industries': Health and Safety Executive (HSE)
- INDG 417 'Leading Health and Safety at Work': HSE

SP 1

OC 6 Organisational culture

The significant ways of thinking and doing, which underpin a positive H&S culture suited to the organisation, are identified and applied.

Culture is a lever which can assist the board and senior managers to improve company and safety performance. Setting out a culture strategy for H&S as part of a SMS is a necessity for excellence.

Culture consists of the shared ways of thinking and doing in respect of the most significant risks of the organisation, which underpin the approach to devising and implementing the SMS.

Current thinking suggests there are 'seven attributes of an integrated health and safety culture', these are shown opposite.

Different positive cultural characteristics may be more relevant to some parts of the business. For example, a just and fair reporting culture, may be more pertinent to enhance learning in front-line work, whereas a process safety culture of doubt, and a challenge culture of questioning, may be more relevant to those in engineering functions concerned with the high hazard systemic risks of the infrastructure.

Testing organisational culture and RM³

There are different ways of finding out about an organisation's H&S culture:

1. By routinely gathering informal information about the H&S culture during monitoring, inspections, investigations and other dealings with employees, interfacing organisations and the supply chain. For instance, workers on site during a routine preventive inspection may comment that performance pressures sometimes take priority over risk controls. In this case, as well as investigating the allegation, the background should be recorded to build up a picture of the organisation's H&S culture.
2. Organisations can conduct H&S culture or safety climate assessments, using techniques and toolkits, such as the RSSB's Safety Culture toolkit. These assessments can provide useful information on the current safety culture, and provide information and views about leadership, communications, learning culture, employee involvement and attitudes to blame.
3. RM³ is not intended to be a substitute for other safety culture assessment tools, but in this version there are highlighted 'culture call-outs' against every level of maturity in all criteria. Assessors using these 'call-outs' will see elements of the 'seven attributes' throughout the RM³ criteria. The 'call-outs' suggest typical actions, beliefs and behaviours held by staff, at all levels, suggesting the culture of the organisation.

An explanation of how to collate and use the culture indications from the 'call-outs' is provided on pages 40 and 41.



Organisation Name:		Fenrail Limited					
Team/Area/Division assessed:		Whole Organisation					
RM ³ assessment by:		Alison Jones				Date:	23/11/18
		SP	OC	OP	PI & RCS	MRA	Row totals
Excellence	Continually improving						
Predictable	Cooperating	SP1 SP4			PI1 RCS4 RCS5	MRA5	6
Standardised	Involving	SP2 SP3	OC3 OC4	OP2	PI2 RCS1 RCS2	MRA3 MRA4	10
Managed	Managing		OC1 OC2 OC5	OP1	RCS3	MRA1 MRA2	7
Ad-hoc	Emerging				PI3		1
Not assessed			OC7				1
Organisational culture maturity indicated level		Standardised/Involving					

Figure 6 Organisational culture template

The role of RM³ in regulation:

RM³ is not an audit tool, but a *model to structure discussions* about evidence and where to go next
Either internally within organisations or
Between inspectors and organisations
Benchmarking with other organisations

ORR's approach is not to 'do' RM³ inspections, but to:
Systematically collect evidence
Use RM³ to structure our thinking and conclusions
Identify improvement priorities to achieve greater management maturity



The Principles for using the model

The assessment will only be as good as the evidence being assessed.

Evidence sources:

- Large scale projects looking at a specific area of risk management across the organisation
- Local inspections of department specific risk control areas
- Investigations & complaints
- Other sources (e.g. local meetings etc)

Source – extract from ORR inspection report dated 02/12/19– Driver
having reviewed the process/procedure for driver management ORR made
the following observations;

1. The H&S policy for Driver Management (dated May 2014) was clear
a commitment to deliver consistent levels of compliance with the rele
company standards. It also stated that the company aimed to be the
Group. The document had no provision for signature.
2. Discussion with the Driver Standards Manager (DSM) indicated that
been involved in the drafting of the document and that it was a 'histori
that he inherited back in 2004 when he joined the company. He was to
to review it after an internal audit in 2014. He read it and thought it was
updated the date. The policy document was stored in his office although
could access it on request. He wasn't sure how this fitted with the overa
policy (which was in a frame on the reception wall).

The company employ 148 drivers out of 9 depots. There is one DSM and
Driver Training Managers (DTM). They have a reasonably stable workfo
only about 10% turnover per year. The majority of their drivers are direct
employees although at peak times they have a facility with another operat
company to 'buy-in' extra drivers.

route and traction knowledge for their own drivers is delivered through initi
'driver's school' for 6 months, then practical training for 12 months. After thi
inees are tested and either marked competent or required to address
aknesses and continue training. It was unclear whether there were criteri
maximum length of time or number of times a driver could undertake re-
training.

training records of the existing drivers were examined. Most records showed
onal details of each driver including the routes they signed, and when the
'd it. It was more difficult to find consistent evidence of when the route an
ction knowledge was reviewed. There were some records for most driver
ese were not all consistent or easily accessible.

majority of drivers had come from other companies so did not need initial
1. If they arrived having already signed a route (with proof) they were
d as competent for that route.

tem for buying-in drivers was via a written contract describing the
ents of any driver (route / traction knowledge) and the financial

Principles for using the model

Consistent use of RM³ across the organisation

Applying the assessment principles correctly?

CONSISTENCY
QUANTITY
QUALITY
CURRENCY

The challenges to consider

Engaging with others before reporting on assessment levels?

What impact will RM3 *2019* have on how you do things?

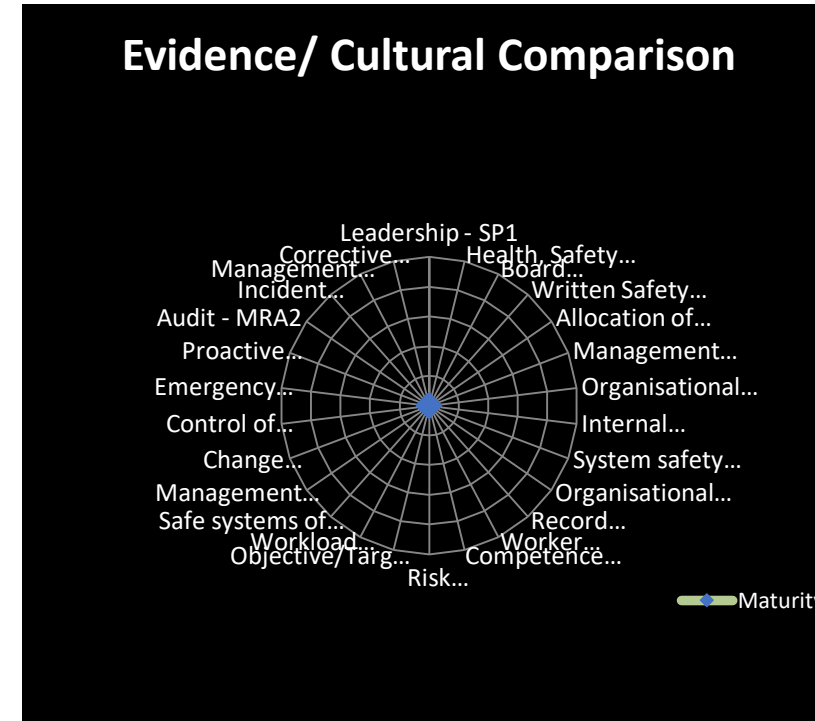
Applying the assessment principles

- Consistency
 - Dealing with outliers: over or under assessment
 - Consistency between years
 - Range of assessment – a proxy measure for degree of confidence?
- Quantity
 - Too much or too little evidence
- Quality
 - Evidence that fails to address the criteria, or does so in vague terms
- Currency
 - Some evidence might be 12 months old. How to include when things have changed

Recording and reporting your findings

- There is a new spreadsheet for RM3–2019
- This automatically creates and populates both the radar graph but also the overall culture assessment
- [RM3–2019 report spreadsheet](#)

Element	Sub-element	Comments to support evidence if applicable	Criteria Level					Maturity Score
			1	2	3	4	5	
Health and Safety policy, leadership and board governance	Leadership - SP1							
	Health, Safety Policy - SP2							
	Board Governance - SP3							
	Written Safety Management Systems - SP4							
Organising for control and communication	Allocation of responsibilities - OC1							
	Management and supervisory accountability - OC2							
	Organisational structure - OC3							
	Internal Communication arrangements - OC4							
	System safety and interface arrangements - OC5							
Organisational Culture - OC6		HOW TO USE CULTURE CALL OUT'S (Using the OC6, separately, linked to the relevant evidence)					#N/A	
Securing cooperation, competence and development of employees at all levels	Record keeping, document control and knowledge management - OC7							
	Worker involvement and internal cooperation - OP1							
	Competence management system - OP2							
Risk assessment and management - P1	Risk assessment and management - P11							
	Objective/Target Setting - P12							
	Workload planning - P13							



Evidence Matrix

AutoSave risk-management-maturity-model-assessment-toolkit-spreadsheet (1) Risk - Excel								
File Home Insert Draw Page Layout Formulas Data Review View Help								
B3 X ✓ f 10/10/2020								
Name		ORR Risk Maturity Management Model (RM3 2019)						
Organisation		Railway Operator						
Date		Oct-20						
Element	Sub-element	Comments to support evidence if applicable	Criteria Level					Maturity Score
			1	2	3	4	5	
Health and Safety policy, leadership and board governance	Leadership - SP1	4 - Some elements of level 5 shown by XXXX and track team community. XXXX sets out clear expectations with regards to what is						4
	Health, Safety Policy - SP2	3 - policy in place, developed with staff; and available to review.						3
	Board Governance - SP3							3
	Written Safety Management Systems - SP4	4 (N) XXXX continue to be stds based organisation with process and standards governing what should be done, with clear 3 (N) principally delivered by XXXX's stds framework and XXXX, which set out in writing responsibilities these are generally accurate						4
Organising for control and communication	Allocation of responsibilities - OC1	3 (N) - At an SMS level management and supervisory accountability are well defined and reasonably well monitored although						3
	Management and supervisory accountability - OC2	Evidence of silo working, with limited sharing between departments.						2
	Organisational structure - OC3	3 (N) In terms of higher-level SMS, the communication arrangements for presenting information to staff are based around standards, procedures, and cascade						3
	Internal Communication arrangements - OC4	Interfaces identified and arrangements for comms						3
	System safety and interface arrangements - OC5							2
	Organisational Culture - OC6	HOW TO USE CULTURE CALL OUT'S (NR Scoring with OCE automatically loaded from Cultural Assessment database)						2
	Record keeping, document control and knowledge management - OC7	2 - Whilst our XXXX and dynamic XXXX measurement inspection findings indicated 'predictable' management of tactical records						2
Securing cooperation, competence and development of employees at all levels	Worker involvement and internal cooperation - OP1	Employees involved through consultation workshops, and contribute to guidance						3
	Competence management system - OP2	2 - XXXX system currently focuses on supervisory and artisan grades through the XXXX and XXXX programmes and is generally 3 - Risk assessments tend to be of good quality, produced by capable people, but are sometimes subjective and based on						2
Risk assessment and management	P11	4 (N) More limited evidence drawn directly from ORR Team work during 2016/17 and disappointing route responses in setting						3
	Objective/Target Setting - P12	3 - generally standardised with elements of managed. A 'planning' system exists for						4
	Workload planning - P13							3

Source – extract from ORR inspection report dated 02/12/19 having reviewed the process/procedure for driver management following observations;

policy for Driver Management (dated May 2014) intended to deliver consistent levels of compliance with standards. It also stated that the company aimed to ensure the document had no provision for signature.

with the Driver Standards Manager (DSM) indicated in the drafting of the document and that it was a direct result of an internal audit in 2004 when he joined the company. He read it and though on request. He wasn't sure how this fitted with the document as in a frame on the reception wall).

employ 148 drivers out of 9 depots. There is one DS Manager (DTM). They have a reasonably stable workforce of 148 drivers per year. The majority of their drivers are on full-time contracts. At peak times they have a facility with another 100 extra drivers.

knowledge for their own drivers is delivered through a combination of either marked training for 12 months. After this, drivers are required to address any gaps in knowledge through ongoing training. It was unclear whether there were any specific time or number of times a driver could undertake

existing drivers were examined. Most records show that a driver including the routes they signed, and when they were reviewed. There were some records for most drivers that were not consistent or easily accessible.

Some routes were signed by drivers from other companies so did not need initial review. Some routes were already signed a route (with proof) they were not reviewed.

Some routes were signed via a written contract describing the route / traction knowledge) and the financial

Cultural Assessment

Element	Sub-element	Description	Score	Comments to support evidence if applicable
5				
Health and Safety policy, leadership and board governance	Leadership - SP1	Leaders recognise they have an obligation to foster the kind of organisational climate where people find it easy to speak up and share when they have made mistakes rather than covering up errors.	3	
	Health, Safety Policy - SP2	The H&S policy as implemented demonstrates that managing health and safety risk is not a separate function but an integral part of a productive, competitive, profitable organisation which strives for continual improvement.	4	
	Board Governance - SP3	The board promotes a culture of continuous improvement, challenging the executive function to improve, supporting that with examples of good practice from outside the organisation that have the capability to be implemented in a way that adds value to the business.	2	
	Written Safety Management Systems - SP4	The SMS demonstrates a commitment to measuring and improving organisational culture.	4	
Organising for control and communication	Allocation of responsibilities - OC1	Staff seek to improve organisational performance by taking on additional tasks and responsibilities especially those relating to H&S.	4	
	Management and supervisory accountability - OC2	The organization understands the wider industry culture and takes active participation to improve H&S risk control.	3	
	Organisational structure - OC3	Individuals believe that the organisational structure is evolving to drive continuous improvement in risk management.	2	
	Internal Communication arrangements - OC4	There is a culture throughout the organization of open communication which is effective and supports continuous improvement.	4	
	System safety and interface arrangements - OC5	There is a culture that people are empowered and encouraged to understand and share information beyond their own organisation to continually improve the control of shared, common and emerging risks.	3	
Organisational Culture - OC6	AUTOMATICALLY SCORED BASED ON AVERAGE OF ALL OTHER SUB-ELEMENTS	2		
Record keeping, document control and knowledge management - OC7	The importance of maintaining and growing corporate knowledge to deliver continuous improvement is embedded in all levels of the organisation's culture.	4		

Standardised

- The organisation is built around a command and control structure with some feedback.
- There is a rule book-based approach to health and safety management, this can result in unwavering adherence to standards with little innovation or flexibility.
- Collaboration occurs as specified in 'the rules'.

Culture
Leadership is still largely viewed as a senior management role.

- Non-technical skills are specified and staff receive appropriate training.

Managed

- There may be managers with health and safety leadership skills, but these are not proactively developed by the organisation.
- Managers demonstrate leadership skills but these are not recognised by everyone or used consistently within the organisation.
- The organisation's goals and priorities are not understood by all leaders in the organisation.
- Some collaboration occurs but often by chance rather than planned, and depends on the individuals involved rather than being systematic.

Culture
Leadership is viewed solely as a senior management role.

- There is no consistency over how non-technical management skills are developed in the organisation.

OC

- There is no evidence of positive health and safety leadership at any level in the organisation.
- Health and safety leadership is not considered to be important in staff development.

Culture
Staff consider there is little effective leadership in health and safety at any level of the organisation.

- Health and safety leadership skills and other non-technical management skills are not recognised or developed within the organisation.

Culture 'call-outs'

- Guidance and further reading:**
- INDG 277 'Leadership in the Major Hazard Industries': Health and Safety Executive (HSE)
 - INDG 417 'Leading Health and Safety at Work': HSE

SP 1

SP 1 Leadership

SP 1

Leadership from the top provides a consistent example and inspiration for leaders at all levels of the organisation. Good leadership in health and safety (H&S) management involves:

- The attitudes and decisions of senior managers aligning with the H&S policy and culture;
- Identifying and promoting the styles of leadership and management practices at all levels, which best support a positive health and safety culture;
- Promoting effective collaboration and engagement of all workers and business partners to achieve continuous improvement on health and safety;
- Aligning the leaders in operational management, organisational functions and operational and support units in pursuit of the common health and safety purpose, strategies and goals;
- Assessing health and safety leadership and management behaviour to motivate and reward success, in improving the control of risk; and
- Adjusting the performance-management and reward systems so they help the organisation achieve its goals and strategies for improving health, safety and performance.

Excellence

- Leaders at all levels of the organisation demonstrate shared values which strive towards continuous improvement.
- Leaders search within and outside the organisation for opportunities to improve risk control in their area of the organisation to ensure it is as effective and efficient as possible.
- Leaders always consider how they influence others, recognising that good leadership is compelling not coercive.
- They pro-actively promote a positive culture and encourage safety improvements in all areas of the business.
- Health and safety leaders recognise that better results are achieved through exercising power with, rather than control over, staff.

Culture

Leaders recognise they have an obligation to foster the kind of organisational climate where people find it easy to speak up and share when they have made mistakes rather than covering up errors.

- Leaders encourage people and enable them to join forces and to participate as responsible individuals in a collaborative institutional enterprise.
- Non-technical management skills development is recognised as world class.
- Leadership demonstrates and reinforces the values and culture of the organisation and ensure these lead to engagement and empowerment across all layers.

Predictable

- Leadership activities are consistent with and reinforce the organisation's health and safety policies.
- Leaders at all levels of the organisation are credible and open to ideas for improvement.
- Leaders take responsibility to ensure that the health and safe management system achieves its intended outcome.
- Leaders inspire others within the organisation to work to deliver against the H&S vision of the organisation.

Culture

Leaders take responsibility for developing, leading and promoting a positive culture in the organisation that supports effective H&S risk management.

- Non-technical management skills are recognised and developed within the organisation.

18



Standardised

- The organisation is built around a command and control structure with some feedback.
- There is a rule book-based approach to health and safety management, this can result in unwavering adherence to standards with little innovation or flexibility.
- Collaboration occurs as specified in 'the rules'.

Culture

Leadership is still largely viewed as a senior management role.

- Non-technical skills are specified and staff receive appropriate training.

Managed

- There may be managers with health and safety leadership skills, but these are not proactively developed by the organisation.
- Managers demonstrate leadership skills but these are not recognised by everyone or used consistently within the organisation.
- The organisation's goals and priorities are not understood by all leaders in the organisation.
- Some collaboration occurs but often by chance rather than planned, and depends on the individuals involved rather than being systematic.

Culture

Leadership is viewed solely as a senior management role.

- There is no consistency over how non-technical management skills are developed in the organisation.

Ad-hoc

- There is no evidence of positive health and safety leadership at any level in the organisation.
- Health and safety leadership is not considered to be important in staff development.
- No effective application of health and safety leadership standards in the organisation.
- Leaders do not collaborate internally or externally.

Culture

Staff consider there is little effective leadership in health and safety at any level of the organisation.

- Health and safety leadership skills and other non-technical management skills are not recognised or developed within the organisation.

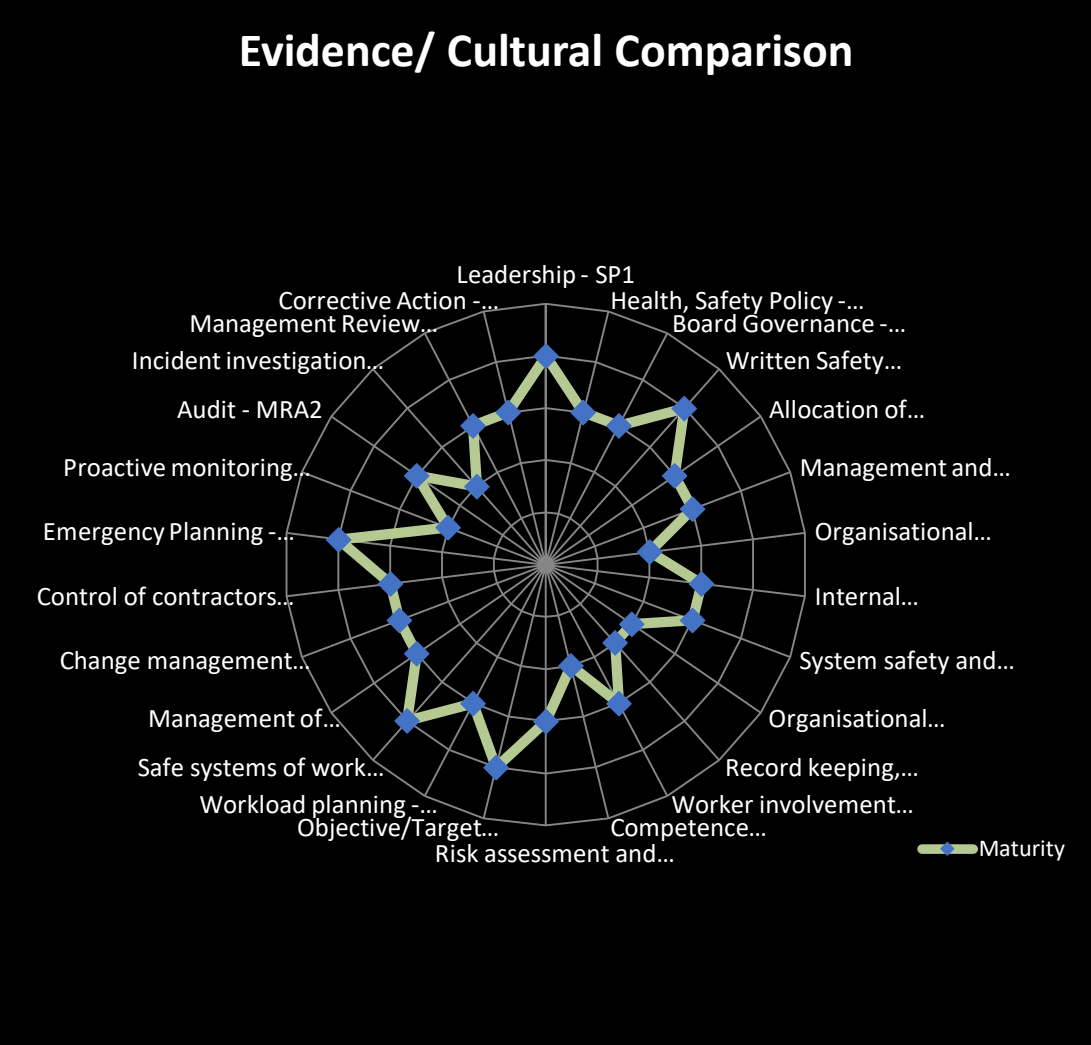
Guidance and further reading:

- INDG 277 'Leadership in the Major Hazard Industries': Health and Safety Executive (HSE)
- INDG 417 'Leading Health and Safety at Work': HSE

SP 1

19

Radar Graph and Bar Graph Outputs

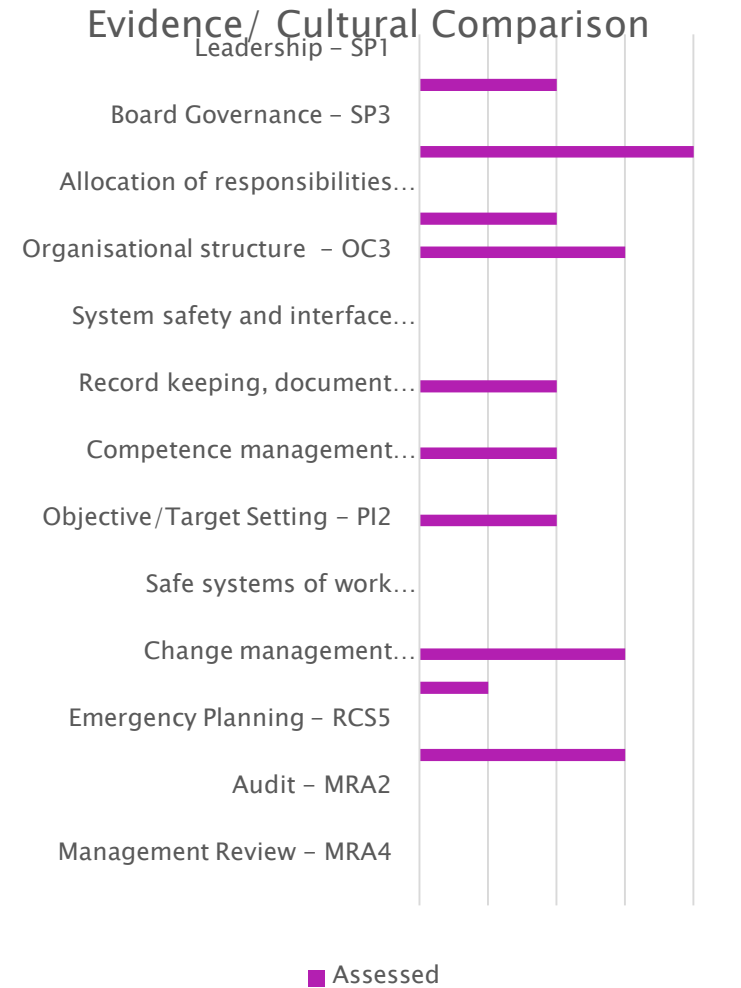
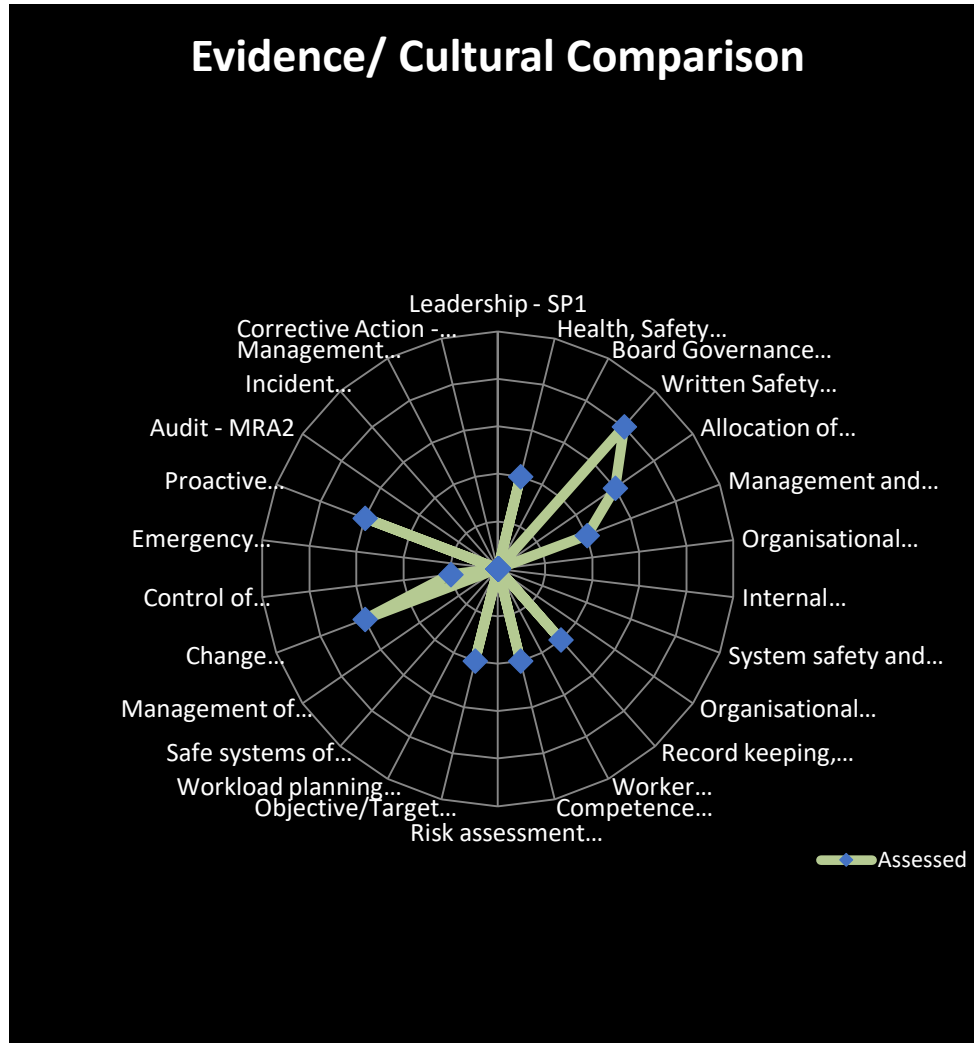


Evidence/ Cultural Comparison



Maturity

Radar Graph and Bar Graph Outputs





What evidence?



Reactive assessment includes:

- Workplace violations and errors
- Incidents
- Failures to deliver performance objectives
- Complaints

Proactive assessment includes:

- Risk control system review
- Safety verification activity
- Safety certification/authorisation assessment

Audit includes:

- Top down SMS reviews
- Corrective action monitoring
- Internal and external audits

Assessment exercise



Scenario

You are to carry out a limited assessment of the Mid-Fens Railway.

You have various pieces of evidence from a number of sources. These have looked at different processes/procedures.

Included in your portfolio of evidence is an ORR inspection report describing a number of observations from reviewing Mid-Fen's process for Driver Management.

RM3 2019

Task:

- Identify the relevant RM3 Criteria;
- Determine the level of achievement using the RM3 guidance;
- Have you got any culture evidence?and what is the maturity level??

I will do the first one.....



Source – extract from internal audit report November 2017– Management of Change

Having reviewed the process/procedure for change management the auditors made the following observations:

1. Review of the Management of Change Policy found that it aimed to ensure that ‘every change, whether large or small, relating to equipment, process or organisational change shall be subject to a formal assessment proportionate to the change and potential risk’.

2. This policy was in-line with the review date and was dated May 2017 and was displayed on a Safety, Quality and Environment (SQE) noticeboard in reception.

3. A review of the actual process document showed it to be contained in the overall Health and Safety Manual stored on the SQE platform of the company portal. It is available to anyone in the organisation although it was noted that only Grade 4 (operational managers and above) had personal issue laptops.

4. The process description had clearly been developed from a number of industry approaches and guidance. The process described was consistent with the steps expected for good change management including initial scoping of the change, identification of potential effects including interfaces etc.

5. The process had been prefaced with a flow-diagram visualising the key stages. The detail of the process had been documented and split into chapters. It was said (Head of SQE) that this was done to emphasise the relevant steps. Each chapter had a named owner (specific individual, not role). For each chapter/element, there was a list of individuals to be involved (specific individuals, not roles). There was a short description of why they should be involved and what they would do.

6. Again, the process followed faithfully, the accepted principles of management of change, including comprehensive detail on document management and record keeping.

7. Discussion with a sample of those identified within the document demonstrated a clear understanding of the roles allocated to them. They were able to demonstrate a clear knowledge of the principles and more detailed questioning showed a wider breadth of knowledge beyond their specific role. It was however, noted that at least four of the named individuals were unavailable for interview as they had left the company.

8. Review of a specific, past project led to discussion with general employees who were affected by the change. The general consensus was that the change had gone very well. Some employees had said they had received emails telling them what was going to happen and regular updates through until completion, others did not receive any information. On completion they were asked if there was anything that they didn't like or that could be enhanced to make their lives easier. Overall, some were very happy with the change.

RCS3 Mgt of Change - overall assessment STANDARDISED
- This is an example of a criteria being assessed in its own right and also providing evidence for other criteria (eg policy, competence, record keeping etc)

SP2 Policy: STANDARDISED.
This is an 'associated policy'. It reflects most of the criteria (quantity of evidence?)

SP4 - some evidence of written SMS, bit not detailed evidence. It would be possible to make an assessment but this would be better as supporting evidence with previous examples (note documents available but only to managers)

OC1 - STANDARDISED:
Allocations seems clear and appropriate. Individuals understand their roles. However, some roles vacant. Allocation to named individuals?

OC4 Overall assessment Managed
-as inconsistent communication of information to employees

Having reviewed the process/procedure for change management the auditors made the following observations:

1. Review of the Management of Change Policy found that it aimed to ensure that 'every change, whether large or small, relating to equipment, process or organisational change shall be subject to a formal assessment proportionate to the change and potential risk'.
2. This policy was in-line with the review date and was dated May 2017 and was displayed on a Safety, Quality and Environment (SQE) noticeboard in reception.
3. A review of the actual process document showed it to be contained in the overall Health and Safety Manual stored on the SQE platform of the company portal. It is available to anyone in the organisation although it was noted that only Grade 4 (operational managers and above) had personal issue laptops.
4. The process description had clearly been developed from a number of industry approaches and guidance. The process described was consistent with the steps expected for good change management including initial scoping of the change, identification of potential effects including interfaces etc.
5. The process had been prefaced with a flow-diagram visualising the key stages. The detail of the process had been documented and split into chapters. It was said (Head of SQE) that this was done to emphasise the relevant steps. Each chapter had a named owner (specific individual, not role). For each chapter/element, there was a list of individuals to be involved (specific individuals, not roles). There was a short description of why they should be involved and what they would do.
6. Again, the process followed faithfully, the accepted principles of management of change, including comprehensive detail on document management and record keeping.
7. Discussion with a sample of those identified within the document demonstrated a clear understanding of the roles allocated to them. They were able to demonstrate a clear knowledge of the principles and more detailed questioning showed a wider breadth of knowledge beyond their specific role. It was however, noted that at least four of the named individuals were unavailable for interview as they had left the company.
8. Review of a specific, past project led to discussion with general employees who were affected by the change. The general consensus was that the change had gone very well. Some employees had said they had received emails telling them what was going to happen and regular updates through until completion, others did not receive any information. On completion they were asked if there was anything that they didn't like or that could be enhanced to make their lives easier. Overall, some were very happy with the change.

Source – extract from ORR inspection report dated 02/12/19– Driver Management

Having reviewed the process/procedure for driver management ORR made the following observations:

1. The H&S policy for Driver Management (dated May 2014) was clear and showed a commitment to deliver consistent levels of compliance with the relevant company standards. It also stated that the company aimed to be the best in the Group. The document had no provision for signature.
2. Discussion with the Driver Standards Manager (DSM) indicated that he had not been involved in the drafting of the document and that it was a 'historical thing' that he inherited back in 2004 when he joined the company. He was told he had to review it after an internal audit in 2014. He read it and thought it was ok so he updated the date. The policy document was stored in his office although others could access it on request. He wasn't sure how this fitted with the overall H&S policy (which was in a frame on the reception wall).
3. The company employ 148 drivers out of 9 depots. There is one DSM and 6 Driver Training Managers (DTM). They have a reasonably stable workforce with only about 10% turnover per year. The majority of their drivers are direct employees although at peak times they have a facility with another operating company to 'buy-in' extra drivers.

4. Route and traction knowledge for their own drivers is delivered through initial 'driver's school' for 6 months, then practical training for 12 months. After this, all trainees are tested and either marked competent or required to address weaknesses and continue training. It was unclear whether there were criteria for the maximum length of time or number of times a driver could undertake re-training.

5. Training records of the existing drivers were examined. Most records showed the personal details of each driver including the routes they signed, and when they signed it. It was more difficult to find consistent evidence of when the route and / or traction knowledge was reviewed. There were some records for most drivers but these were not all consistent or easily accessible.

6. The majority of drivers had come from other companies so did not need initial training. If they arrived having already signed a route (with proof) they were deemed as competent for that route.

7. The system for buying-in drivers was via a written contract describing the requirements of any driver (route / traction knowledge) and the financial arrangements. The supplying company are a very large, well-recognised organisation. For that reason, the DSM felt that an audit of their arrangements was unnecessary. 'There had never been a problem'.

Source – extract from ORR inspection report dated 02/12/19– Driver Management

SP2 Associated policies: Ad-Hoc / Managed due to lack of signature, no evidence of consultation, lack of understanding

OP2 CMS: Managed / Standardised. Some evidence of following structured processes as per industry standard. Weak structure for bought in resource as taken at face value. Record keeping not ideal. No evidence that drivers transferring route knowledge are systematically checked.

OC7 Record keeping: Managed - inconsistent records kept (important risks?)

RCS4 control of contractors: Ad hoc / Managed. No audit or drilling down to verify training and competence of contract drivers

Having reviewed the process/procedure for driver management ORR made the following observations;

1. The H&S policy for Driver Management (dated May 2014) was clear and showed a commitment to deliver consistent levels of compliance with the relevant company standards. It also stated that the company aimed to be the best in the Group. The document had no provision for signature.
2. Discussion with the Driver Standards Manager (DSM) indicated that he had not been involved in the drafting of the document and that it was a 'historical thing' that he inherited back in 2004 when he joined the company. He was not to review it after an internal audit in 2014. He read it and thought it was ok so he updated the date. The policy document was stored in his office although others could access it on request. He wasn't sure how this fitted with the overall H&S policy (which was in a frame on the reception wall)
3. The company employ 148 drivers out of 9 depots. There is DSM and 6 Driver Training Manager (DTM). They have a reasonably stable workforce with only about 10% turnover per year. The majority of the drivers are direct employees although at peak times they have a facility with another operating company to 'buy in' extra drivers.
4. Route and traction knowledge for their own drivers is delivered through initial 'driver's school' for 6 months then practical training for 12 months. After this, all trainees are tested and either marked competent or required to address weaknesses and continue training. It was unclear whether there were criteria for the maximum length of time or number of times a driver could undertake re training.
5. Training records of the existing drivers were examined. Most records showed the personal details of each driver including the routes they signed, and when they signed it. It was more difficult to find consistent evidence of when the route and or traction knowledge was reviewed. There were some records for most drivers but these were not all consistent or easily accessible.
6. The majority of drivers had come from other companies so did not need initial training. If they arrived having already signed a route (with proof) they were deemed as competent for that route.
7. The system for buy-in drivers was via a written contract describing requirements of any driver (route/traction knowledge) and the financial arrangements. The supplying company are a large, well recognised organisation. For that reason, the DSM felt that an audit of their arrangements was unnecessary. 'There had never been a problem'.

Creating the report.....

Theme	Criteria	Comments to support evidence	Assessed Level (and descriptor)					Assessed
			1	2	3	4	5	Level
Health and Safety policy, leadership and board governance	Leadership - SP1	critrion not assessed						
	Health, Safety Policy - SP2	The policy for Driver management was significantly out of date. There was no review or retention policy. This policy is an 'associated policy' with respect to the overall H&S policy however, it was not linked, communicated not did the 'owner' know how it fitted with the overall policy						2
	Board Governance - SP3	critrion not assessed						
	Written Safety Management Systems - SP4	critrion not assessed						
Organising for control and communication	Allocation of responsibilities - OC1	critrion not assessed						
	Management and supervisory accountability - OC2	critrion not assessed						
	Organisational structure - OC3	critrion not assessed						
	Internal Communication arrangements - OC4	critrion not assessed						
	System safety and interface arrangements - OC5	critrion not assessed						
	Organisational Culture - OC6		HOW TO USE CULTURE CALL OUTS (NB Scoring within OC6 automatically loaded from Cultural Assessment database)					#N/A
	Record keeping, document control and knowledge management - OC7	inconsistent records kept relating to training and policy documents. Important risks are not documented and recorded. The document relating to contract drivers relates to financial matters and not the safety risks						2
Worker involvement and internal cooperation	Worker involvement and internal cooperation - OP1	critrion not assessed						
	Competence management system - OP2	Some evidence of following structured processes as per industry standard. Weak structure for bought in resource as taken at face value. Record keeping not ideal. No evidence that drivers transferring route knowledge are systematically checked						2
Planning and implementing risk controls through coordinated management arrangements	Risk assessment and management - PI1	critrion not assessed						
	Objective/Target Setting - PI2	critrion not assessed						
	Workload planning - PI3	critrion not assessed						
	Safe systems of work including safety critical work - RCS1	critrion not assessed						
	Management of Assets - RCS2	critrion not assessed						
	Change management (Operational, processes, organisational and engineering) - RCS3	critrion not assessed						
	Control of contractors and suppliers - RCS4	No formalised process for selection and control of contractors (other than cost). No audit or drilling down to verify training and competence of contract drivers						1
Monitoring, Audit and Review	Emergency Planning - RCS5	critrion not assessed						
	Proactive monitoring arrangements - MRA1	critrion not assessed						
	Audit - MRA2	critrion not assessed						
	Incident investigation - MRA3	critrion not assessed						
	Management Review - MRA4	critrion not assessed						
Corrective Action - MRA5	critrion not assessed							

RM3 criteria	Comments to support Evidence	Assessed Level
Leadership - SP1	critrion not assessed	
Safety Policy - SP2	The policy for Driver management was significantly out of date. There was no review or retention policy. This policy is an 'associated policy' with respect to the overall H&S policy however, it was not linked, communicated not did the 'owner' know how it fitted with the overall policy	2
Board Governance - SP3	critrion not assessed	
Written Safety Management System - SP4	critrion not assessed	
Allocation of responsibilities - OC1	critrion not assessed	
Management and supervisory accountability - OC2	critrion not assessed	
Organisational structure (management cascade etc) - OC3	critrion not assessed	
Communication arrangements - OC4	critrion not assessed	
System safety and interface arrangements - OC5	critrion not assessed	
Culture management - OC6		#N/A
Record keeping - OC7	inconsistent records kept relating to training and policy documents. Important risks are not documented and recorded. The document relating to contract drivers relates to financial matters and not the safety risks	2
Worker involvement and internal cooperation - OP1	critrion not assessed	
Competence management system - OP2	Some evidence of following structured processes as per industry standard. Weak structure for bought in resource as taken at face value. Record keeping not ideal. No evidence that drivers transferring route knowledge are systematically checked	2
Risk assessment and management - PI1	critrion not assessed	
Objective/Target Setting - PI2	critrion not assessed	
Workload planning - PI3	critrion not assessed	
Safe systems of work including safety critical work - RCS1	critrion not assessed	
Asset management (including safe design of plant) - RCS2	critrion not assessed	
Change management (process, engineering, organisational) - RCS3	critrion not assessed	
Control of contractors - RCS4	No formalised process for selection and control of contractors (other than cost). No audit or drilling down to verify training and competence of contract drivers	1
Emergency Planning - RCS5	critrion not assessed	
Proactive monitoring arrangements - MRA1	critrion not assessed	
Audit - MRA2	critrion not assessed	
Incident investigation and management - MRA3	critrion not assessed	
Review at appropriate levels - MRA4	critrion not assessed	
Corrective Action / Change management - MRA5	critrion not assessed	

How it would be presented.....



Summary

- RM3-2019 is an evolution of the original model.
- It is not a new model
- The assessment levels are more stretching
- The culture bubbles are 'indicators only'
- Lots more information on [The ORR website section on RM3](#)



