** NQA ISO 45001:2018 Gap Analysis**

**Instructions For Use**

This gap analysis document provides a simple framework for evaluating your OHS management system against the requirements of ISO 45001:2018.

Please complete the table by recording the evidence acquired from one full internal audit against the requirements of ISO 45001:2018 *(Clients should have access to the standard and details of its requirements to aid understanding).*

This document, once completed should be retained by the client and made available during your assessment visit (*please retain the completed document electronically - if possible*).

If you are unable to provide evidence of compliance, you may not be ready to complete the migration to ISO 45001:2018.

In this case, please inform NQA that you need additional time to prepare for the migration – we will work with you to select a mutually agreeable date to complete.

**Please ensure that this completed document and internal audit records are available for your assessor at the opening meeting of your migration assessment**. **A Management Review (against the 45001 standard requirements) must be completed prior to the assessment visit.**

Sections marked as ***(Assessor to Complete)*** will be completed by the assessor during the migration audit.

**Client name:**

**Certificate number:**

**Date of completion:**

**NQA visit report number:** Tip: Ensure that these new concepts have been deployed in a manner that supports the *Process Approach* and *Risk Based Thinking*.

Items highlighted in yellow require documented information as identified in the standard; “retain” implies a record– other items may also require documented information.

Multi-site organisations should ensure that the requirements have been considered for all relevant locations, especially where individual locations have unique circumstances.

| **OHSAS 18001:2007 Clause / New requirement.** | **ISO 45001:2018**  **Requirements / *Activity*** | **Evidence to support compliance** | ***(Assessor to Complete)***  ***Has the Client Demonstrated they have Met the requirements of this clause?*** | | ***(Assessor to Complete)***  ***Comments if Required*** |
| --- | --- | --- | --- | --- | --- |
|  | | | ***Yes*** | ***No*** |  |
| **New Requirement** | 4.1, **Context of the organization:**  **Understanding the organization and its context :**  Has the organization identified both internal and external issues and interested parties in addition to workers, that are relevant to and/or support the management system and the strategic direction of the organization?  *Have the significant strategic risks and opportunities been identified?*  *Have the interested parties (internal and external) been identified?*  *What drives the OH&S culture of your organization?* |  |  |  |  |
| **New Requirement** | **4.2 - Understanding the needs and expectations of interested parties.**  Who might affect or be affected by your activities and what their relevant and significant interests might be?  Have you taken their needs into account within the OH&SMS?  *Consider:*  *Are their needs understood?*  *Does this identify legal or other requirements.*  *How do you demonstrate these processes?* |  |  |  |  |
| 4.1 – General system requirements - including the scope. | **4.3 - Determining the scope of the OHS management system**  Does the documented statement of scope allow for:  a) The external and internal issues referred to in 4.1;  b) Requirements referred to in 4.2;  c) The work related activities performed. |  |  |  |  |
| 4.1 General requirements | **4.4 - OHS Management System**  No significant change |  |  |  |  |
| 4.4.1  4.4.3  4.4.6 | **5.1 - Leadership and Commitment**  Is "Top Management" engaged & leading OH&S, rather than delegating to someone further down your organization.  *Are workers being involved directly to protect, improve performance, and support the OH&S system.*  *Reflecting the significance of this Clause, there are 13 sub-clauses (a-m).* |  |  |  |  |
| 4.2  OH&S policy | **5.2 - OH&S Policy**  *Does the documented policy statement emphasize communication and participation of workers, across the organization; commit to "satisfy" legal and other requirements; commit to the hierarchy of controls to OH&S risks?* |  |  |  |  |
| 4.4.1  Resources, roles, responsibility, accountability & authority | **5.3 - Organizational roles, responsibilities and authorities**  Documented information is required for this.  Accountability as now been re-aligned to leadership  No other significant changes |  |  |  |  |
| 4.4.2  4.4.3  4.5.1  4.5.2  4.5.3 | **5.4 – Consultation and participation of workers**  *This clause has been substantially strengthened to capture, promote and include worker participation, engagement and communications.*  *Demonstrate the participation of non-managerial employees in OH&S Management, including incident investigations, risk assessments, control and monitoring activities and internal auditing etc.* |  |  |  |  |
| 4.3.1  4.3.2  4.3.3 | **6.0 Planning:**  **6.1.1– Actions to address risks and opportunities – General**  *Have the risks and opportunities from* ***4.1*** *been considered and have actions been defined to take advantage of the opportunities and mitigate the risks?*  *Has this included consideration of:*  *Hazards, risks, opportunities and legal / other requirements that may be applicable.*  *Documented information is required* |  |  |  |  |
| 4.3.1 | **6.1.2 – Hazard identification and assessment of risks and opportunities.**  6.1.2.1 / 2 /3  *Hazard identification, assessment of OHS and Other risks, Assessment of OHS opportunities and Other opportunities* |  |  |  |  |
| 4.3.2 | **6.1.3 – Determination of legal requirements and other requirements**  *The organization will need to document applicable legal and other obligations while also demonstrating how they are applied, implemented and complied with.* |  |  |  |  |
| 4.5.3.2  4.4.7  4.3.2 | **6.1.4 – Planning action**  *Plans are required to address risk, opportunities (including emergency situations) and legal and other requirements – action will require a review of effectiveness.* |  |  |  |  |
| 4.3.3. | **6.2 - OH &S objectives and planning to achieve them.**  **6.2.1 – OHS Objectives**  *OHS System required objectives must be documented.* |  |  |  |  |
| 4.3.3. | **6.2.2 – Planning to achieve OHS Objectives**  *Plans describing the requirements for achieving objectives shall require documentation.* |  |  |  |  |
| 4.4.2 | **7.0 Support:**  **7.1 – Resources;**  *Shall be determined and provided.* |  |  |  |  |
| 4.4.2 | **7.2 – Competence;**  *Shall be determined, checked and documented for workers* |  |  |  |  |
| 4.4.2 | **7.3 – Awareness;**  *Workers shall be made aware of the system policy and objectives and a range of relevant OHS performance indicators and actions including the ability to remove themselves from imminent and serious danger to life and health.* |  |  |  |  |
| 4.4.3 | **7.4 - Communication**  **7.4.1. General requirements;**  *Suitable documented information will be maintained regarding internal and external communications.*  *Processes will be need to be defined and established for what, when and who it communicates.*  *Participation and consultation are diffused through 45001, but this clause adds a requirement to consider what, who, and why needs to be communicated and whether the communications were successful.* |  |  |  |  |
|  | **7.4.2 – Internal communication** |  |  |  |  |
|  | **7.4.3 – External communication** |  |  |  |  |
| 4.4.4  4.4.5  4.5.4 | **7.5 Documented information.**  **7.5.1 – General:**  *Documented information replaces the idea of documents and records.*  *7.5.2 & 7.5.3:*  *Documented information may be data or reports held electronically or hard copy and requires appropriate controls for updating and retention.* |  |  |  |  |
| 4.4.6  4.4.7 | **8.0 – Operations.**  **8.1 - Operational planning and control ;**  **8.1.1 - General ;**  *Includes adapting work for workers*  **8.1.2 – Eliminating hazards and reducing risks ;**  *Apply the Hierarchy of controls.*  **8.1.3 - Management of change;**  *As applied to planned, temporary and permanent changes that can impact on OHS performance.*  **8.1.4 – Procurement;**  *OH&S controls relevant to the purchase of services, goods and materials.*  **8.1.4.2; *Contractors.***  **8.1.4.3; *Outsourcing.*** |  |  |  |  |
|  | **8.2 – Emergency preparedness and response;**  *Documented information is required*  *The revised standard strengthens and expands on the previous requirements and also includes communications***.** |  |  |  |  |
| 4.5, 4.5.1  4.5.2 | **9. – Performance evaluation –**  **9.1 - Monitoring, measurement, analysis and performance evaluation;**  **9.1.1 - General requirement;**  *Demonstrate that there is a process in place. Monitoring, measurement, analysis and evaluation of OH&S metrics must take into account business context, legal and other requirements, relevant third parties, policy risks, opportunities and objectives.*  **9.1.2 – Evaluation of compliance;**  *Similar to existing arrangements, but the frequency and method of compliance checking need to be considered.* |  |  |  |  |
| 4.5.5 | **9.2 – Internal Audit.**  **9.2.1 – Internal audit – General requirements;**  *Workers must be included in the audit process.*  **9.2.2 – Internal audit programme;**  *The audit programme must be planned and documented.* |  |  |  |  |
| 4.6 | **9.3 Management Review;**  *This builds on the previous standard with added emphasis*  *on improvement and communications based on risks,*  *opportunities and system effectiveness.*  *Consideration should include legal and other requirements, interested parties, organizational risk and opportunity.* |  |  |  |  |
| 4.5.3,  4.5.3.1  4.5.3.2 | **10.1 – Improvement – General requirement:**  *Note: Preventive Action has been dropped because this is addressed through management of risks and opportunities.*  **10.2 – Incidents, nonconformity and corrective action:**  *Corrective action is taken in a timely manner to control an incident or nonconformity and deal with the consequences.*  *Root cause analysis used to understand why an incident happened.*  *When corrective action has been completed, your organization considers whether further action is required to prevent a similar incident or nonconformity occurring in the future.*  *Your organization considers whether the potential for a similar problem remains - possibly in another area of the operation and acts to implement changes if needed.*  **10.3 – Continual improvement;**  *Shall be achieved and integrated into the system processes* |  |  |  |  |
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**Areas for further investigation:**