

ABU DHABI INTERNATIONAL AIRPORT

Health, Safety, Security & Environment SOPs

Version 1.0

Effective as of 29 October 2023

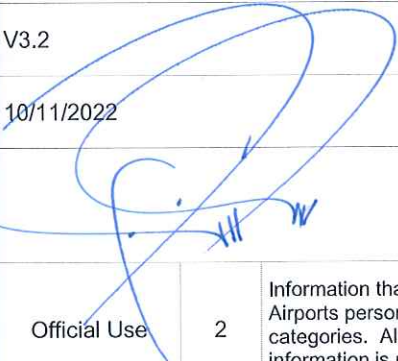
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STANDARD OPERATING PROCEDURE

Occupational Health & Safety Roles & Responsibilities

EHS & Sustainability

Business Process Area / Functional Area:	Abu Dhabi Airports
SOP Owner:	EHS & Sustainability
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			Dhabi Airports, shareholders, employees, business partners and/or clients.				
<i>A Standard Operating Procedure (SOP) consists of a set of statements describing instructions in an orderly manner for the purpose of achieving a result. SOPs are developed to maximize the efficiency and accuracy of implementation of a policy or operational process.</i>							
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1. Title

Roles and Responsibilities

2. Purpose

- 2.1. To describe the responsibilities and authorities for the Abu Dhabi Airports' occupational Health & Safety Management System and to define the organization structure for the effective operation of the OSHMS.
- 2.2. To identify occupational health and safety roles and responsibilities at each functions and levels within the Abu Dhabi Airports in compliance with applicable regulatory and other standard requirements.
- 2.3. To ensure suitable responsibility has been identified and delegated to the relevant authority, roles and responsibilities are delegated below reflecting within employee's job role as well as being incorporated in Abu Dhabi Airports' policies, procedures, work and safety instructions.
- 2.4. SOP must review every two years or & have change in the section.

3. Scope

- 3.1. Applies to International Standards on Occupational Health and Safety Management
- 3.2. Applies to departments, subsidiaries, and contractors responsible for the operations, management and activities in all airports under the Abu Dhabi Airports' authority.

4. Definitions and Abbreviations

Definitions	Description
Airport Tenants	Any person, other than an aircraft operator or foreign air carrier that has an agreement with the airport operator to conduct business on airport property.
AL ADAA	An OSH electronic application maintained by ADPHC for reporting and database management functionalities required by ADPHC for monitoring the implementation of ADPHC -SF.
Competent	Having adequate and sufficient training, qualifications and/or experience (or a combination) to be capable of carrying out a task safely and efficiently.
Contractors	Include principal contractors, sub-contractors, and tenants who may be engaged by the Abu Dhabi Airports for the construction, building and facilities maintenance and repair, communication, installations, services and deliveries in Abu Dhabi Airports premises. A person, organization, their employees or a nominated representative engaged to carry out work for the nominated entity in a contract for service arrangement.
Employer	Any qualified or legal person employing one or more employees in return for any kind of wage. A person or entity engaged in business and who utilizes employees to conduct that business.
Integrated Management System (IMS)	Describes the overall Abu Dhabi Airports IMS for Quality, Environmental, Occupational Health and Safety Management.

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	- ISO 9001:2015 – Quality Management System - ISO 14001:2015 – Environmental Management System - ISO 45001:2018 – Occupational Health and Safety Management System
Occupational Health & Safety Management System (OSHMS)	Describes the overall Abu Dhabi Airports Occupational Health and Safety Management. ISO 45001:2018 – Occupational Health and Safety Management System
Integrated Management System Steering Committee (IMSSC)	A committee that decides on the Integrated Management System priorities and manages the general course of its operation to support Abu Dhabi Airports commitment and ensure compliance to the ISO 9001:2015, ISO 14001:2015 and ISO 45001:2018 certifications and legal requirements.
International Organization for Standardization (ISO)	Is an international standard-setting body composed of representatives from various national standards organizations. Founded on 23 rd February 1947, the organization promotes worldwide proprietary, industrial and commercial standards.
Manager	A person who represents the Abu Dhabi Airports and who has the responsibility for the conduct of a department's business.
Permit to Work	The system that allows central control and ongoing monitoring of high risk activities.
Personal Protective Equipment	Any device, appliance or equipment designed to be worn or held by an individual for protection against one or more health and safety hazards to minimize their exposure to workplace risks.
Responsibility	An individual's obligation to carry-out assigned duties.
Risk Assessment	The process of determination of risk, usually in a quantitative or semi-quantitative manner. It is an evaluation of the likelihood of undesired events and the likelihood of harm or damage being caused together with the value judgements made concerning the significance of the result.
Sector Regulatory Authority (SRA)	A public authority or government agency responsible for exercising autonomous authority over some area of human activity in a regulatory or supervisory capacity.
Supervisor	A person who, at any level, has the day-to-day responsibility for employee's workplace activities and/or the person in control of the workplace. This definition includes those who are responsible for the allocation of tasks to staff and the overseeing of workshop activities and contractors.
Staff / Employee	An individual who has entered into or works under a contract of service with the Abu Dhabi Airports, whether the contract is express or implied, oral or written. - Natural persons working for the employer, or for contracted independent contractors; or any individual who carries out duties or actions specified by an employer for which the individual received remuneration from the employer. - Any male or female working, for a wage of any kind, in the service or under the management or control of an employer, albeit out of his sight.
Top Management	The person or persons at the highest level of the organizational management who have the day-to-day responsibilities of managing a corporation. May be known as CEO, Managing Director or Secretary General.
Abbreviations	Description
ADA	Abu Dhabi Airports
ALARP	As Low As Reasonably Practicable
CEO	Chief Executive Officer

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DMT	Department of Municipality and Transport
EAD	Environmental Agency of Abu Dhabi
EHS	Environment, Health and Safety
ESC	Emergency Services and Compliance
GCAA	General Civil Aviation Authority
GCAS	Gulf Centre for Aviation Studies
HOD	Head of Department
IMS	Integrated Management System
IMSSC	Integrated Management System Steering Committee
ISO	International Organization for Standardization
KPI	Key Performance Indicator
OSHMS	Occupational Health & Safety Management System
ADPHC	Abu Dhabi Public & Health Center
ADPHC- SF	Abu Dhabi Public & Health System Framework
PMS	Performance Measure System
PPE	Personal Protective Equipment
PTW	Permit to Work
SRA	Sector Regulatory Authority
TOR	Terms of Reference

5. Responsibilities

5.1. Abu Dhabi Airports

To demonstrate strong and active leadership and compliance to applicable regulatory and other standard requirements based on the OSHAD-SF V3.1 Element 1 "Roles and Responsibilities" the Top Management shall:

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5.1.1. Ensure that the responsibilities and authorities for relevant OSHMS roles are assigned, communicated and understood at all levels within the organization by:

- Assigning accountabilities and responsibilities for the OSHMS performance to Divisions / Departments
- Incorporating specific OSHMS responsibilities into position descriptions
- Incorporating KPI's into the performance review process.

5.1.2. Ensure that roles and responsibilities link with those of stakeholders and interested parties as appropriate and applicable.

5.2. Chief Executive Officer

The CEO is accountable for ensuring effective implementation of the Occupational Health & Safety Management System within the organization.

5.2.1. He shall appoint a member of Senior Management as the OSH Management Representative with specific responsibility and authority for, Occupational Health and Safety Management to:

- Ensure that the OSHMS is established, implemented, conforms and maintained to the regulatory and other standard requirements (ISO 14001:2015, ISO 45001:2018, ADPHC, EAD, etc.)
- Ensure that the processes are delivering their intended outputs.
- Report the performance and opportunities for improvement of the OSHMS to Top Management
- Ensure the promotion of customer focus throughout Abu Dhabi Airports.
- Ensure the integrity of the OSHMS is maintained.

5.2.2. Is responsible for ensuring provision of adequate qualified, trained and competent personnel to enhance the OSHMS performance in coordination with Department / Subsidiary management.

5.3. OSH Management Representative

Ensures the development of the system, regular reporting of performance to Management and ensuring that occupational safety and health is linked into the overall business objectives and strategies:

- Develop and manage Abu Dhabi Airports OSHMS in order to get and maintain related certifications and meet national and international rules and regulations
- Adhere and comply with OSHAD, ISO 45001 & ISO 14001 and maintain organization documents according to regulatory bodies.
- Drive and leverage environment, health and safety performance across Abu Dhabi Airports and ensure that the employees have a proper understanding of the workplace's hazards and risks.
- Develops and implements inspection policies and procedures, and a schedule of routine inspections.
- Develops health and safety procedures for all areas of the company.
- Assist with decisions related to planning, purchasing, etc. In order to ensure that health and safety requirements are being met and adhered to.
- Liaise with the Airport Emergency Services in order to conduct investigations and audits that are related to health and safety checks across Abu Dhabi Airports
- Design and develop policies and procedures related to health and safety for the use of Abu Dhabi Airports.
- Raise awareness across Abu Dhabi Airports about the importance to adhere to rules and regulations related to occupational health and safety.

5.4. Department Management

Shall ensure that the occupational health and safety policies, procedures and guidelines are implemented and that responsibilities in the OSHMS are properly assigned to, and accepted by, the individual managers and supervisors within their respective departments and area of responsibility.

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Managers

- Integrate occupational health and safety considerations into the design, planning and execution of all work, including where plant and equipment is concerned.
 - Ensure all department / contracted staff under their responsibility received adequate training on OSHMS policies and procedures and are competent to perform their duties without risk / impact to themselves and others within the airport premises.
 - Develop documented set of processes for the department operations that take into account best practices adopted for its activities, regular monitoring and updating in accordance with the OSHMS policies and procedures.
 - Allocate responsibility and delegation of authority for OSHMS issues by appointing competent Department OSHMS Representative/s and/or Document Controller/s.
 - Regular discussion of occupational health and safety issues through periodic Department meetings:
 - Internal and external audit results.
 - Workplace inspections findings.
 - Risk Management
 - Updates to OSHMS processes / department procedures
 - Regulatory and other standard requirements
 - Incident reporting / investigation issues
 - Ensure that no hazardous operational activities are undertaken unless a risk assessment of the work is completed and responsible person is satisfied that all potential hazards associated with the work are controlled to ALARP.
 - Ensure the implementation, monitoring and effectiveness of the risk management program in their area of responsibility.
 - Ensure appropriate investigations and corrective actions are implemented for hazards and/or incidents reported in their area of responsibility
 - Ensure department supervisors organize sufficient control measures for their specified working environment and maintain safe standards throughout its duration.
 - Encourage staff involvement in resolving OSHMS related issues at the department level and if necessary through the department OSHMS Representative.
 - Ensure that corrective actions for non-conformities as a result of internal and external audits, workplace inspections, hazard and incident investigations are completed as per required timeframe.
 - Organize department team for the investigation of incidents and assists in the conduct of investigation as needed.
 - Ensure that occupational health and safety responsibilities are incorporated in staff job descriptions in coordination with Human Resource.
 - Ensure that visitors are not exposed to the risks to their health and safety while inside the airport premises.

Supervisors

- 5.4.15. Integrate appropriate occupational health and safety management into processes and culture.
- 5.4.16. Undertake safety briefings and ensuring that direct and contracted staff under their responsibility work in a safe manner at all times.

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- 5.4.17. Ensure that all occupational health and safety issues (hazards and incidents), are reported to their Line Manager and EHS Section within the required timeframe, initiate in the conduct of investigation and implementation of corrective actions recommended.
- 5.4.18. Consultation with staff in the preparation of risk assessment and ensure implementation of appropriate risk control measures.
- 5.4.19. They shall ensure that all work areas under their control are kept tidy and free from waste, rubbish or clutter.
- 5.4.20. Ensure that staff are issued and used appropriate protective equipment as required.

Employees and Contracted Staff

This level of the organization includes all employees of the Abu Dhabi Airports, up to and including the CEO, as well as those individuals on AD Airports payroll on a contract basis.

- 5.4.21. It is the responsibility of all employees to work in a safe manner and not put themselves or others at risk/impact through the way they work, control measures given in the form of risk / impact assessments & operating procedures will provide guidance at all times.
- 5.4.22. Shall report any occupational health and safety issues to their supervisor that may place them or their co-workers at an unacceptable level of risk / impact and assist in the preparation of risk / impact assessments.
- 5.4.23. Shall report accidents, injuries, near-miss incidents and dangerous occurrences to their supervisor, line manager or duty manager which shall then be sent to the EHS section email (ESHReporting@adairports.ae) and assist in the conduct of investigation as required.
- 5.4.24. Comply with any instructions given by management relating to occupational health and safety issues.
- 5.4.25. Wear mandatory protective equipment within specified working areas at all times within airport premises.
- 5.4.26. Assist in the conduct of workplace inspections on their area of responsibility and ensure that work place hazards are immediately corrected to prevent incidents from happening.
- 5.4.27. Be familiar with the location of personnel and emergency equipment and, if appropriately trained, using the emergency equipment properly.
- 5.4.28. Assist department management in identifying OSHMS training needs.
- 5.4.29. Participate in occupational health and safety roles (i.e. OSHMS representative, OSHMS Document Controller, First Aider, Fire Warden) when required.

Department / Subsidiary IMS Representatives

Acts as the interface between the Compliance Department and respective Department / Subsidiary as regards to the implementation and maintenance of an efficient integrated management system and to facilitate achieving and maintaining compliance to the Abu Dhabi Airports' management standards.

- 5.4.30. Liaise with OSHMS & Compliance Section on staff awareness for OSHMS policies and procedures.
- 5.4.31. Report to department / subsidiary management on OSHMS performance and the need for improvement.
- 5.4.32. Provide assistance during OSHMS related internal / external audits, and ensure timely follow-up and closure of non-conformities.
- 5.4.33. Assist in the review and update of department policies and procedures to ensure implementation of OSHMS policies and procedures.

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- 5.4.34. Raise OSH matters and issues to Department / Subsidiary management on behalf of employees.
- 5.4.35. Assists in conducting OSH inspections of the workplace.
- 5.4.36. Assists in the investigation of EHS issues or incidents.
- 5.4.37. Attends OSH committee meetings as required.
- 5.4.38. Acts as the Document Controller during the absence of department / subsidiary document controller.

Department / Subsidiary Document Controller

Ensure document management consistency within the department / subsidiary maintaining control and traceability of the documentation.

- 5.4.34. Responsible for the coordination of controlled documentation within the department / subsidiary.
- 5.4.35. Checking, filing and uploading of occupational health and safety documentation.
- 5.4.36. Immediately remove cancelled or superseded documentation from use when notified. Clearly mark or identify cancelled or superseded documents the department need to retain.
- 5.4.37. Liaise and communicate with department staff to ensure occupational health and safety issues are addressed.
- 5.4.38. Acts as the Department / Subsidiary OSHMS Representatives during his/her absence.

Note: The Department or Subsidiary may choose to assign an OSHMS Representative and Document Controller depending on the size of the department or subsidiary.

5.5. Quality Assurance Section

Responsible for advising and overseeing the implementation of the Abu Dhabi Airports' Integrated Management System requirements, ensuring to undertake:

- 5.5.1. Establish and maintain an effective OSHMS for airports activities and ensure that it forms an integral part of operations management.
- 5.5.2. Assist departments and subsidiary management to discharge their duties and responsibilities for all matters pertaining to OSHMS.
- 5.5.3. Monitor and update regulatory and other standards requirements applicable to AD Airports' activities to ensure compliance and advise changes to legislation and standards.
- 5.5.4. Ensure that internal & external audits, workplace inspections are conducted as per schedule and non-conformities / corrective actions are followed-up and completed within the required timeframe.

5.6. IMS Section

The main goal of the IMS Section is to understand, meet and/or exceed expectations inherent to all business processes by having an Integrated Management System that ensures monitoring of all processes.

- 5.6.1. Provides the framework and methods for the implementation of the OSHMS in the IMS.
- 5.6.2. Check the effectiveness of the OSHMS and the implementation of the policies and procedures to attain Abu Dhabi Airports IMS objectives and targets.
- 5.6.3. Recommend measures on improving the OSHMS.

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5.6.4. Maintain and control OSHMS documents and records.

5.6.5. Ensure that the OSHMS page in the intranet (MATARI) is updated and maintained.

5.7. EHS Section

The primary role of the EHS Section is to advise Department Management on all environmental, occupational health and safety matters to ensure Abu Dhabi Airports' complies with applicable regulatory and other standard requirements.

- 5.7.1. Facilitate the development, implementation, review and update of items pertaining to EHS as part of the ADA OSHMS.
- 5.7.2. Provide reports to SVP-Operations Assurance office and Chief Operations Officer to ensure progress and effectiveness of the OSH management system.
- 5.7.3. Keep abreast with changes to current legislations, advise relevant stakeholders on changes and attend relevant courses / seminars to assist accurate interpretation of legislation and enable implementation within Abu Dhabi Airports.
- 5.7.4. Initiate and formulate, through consultative process the Abu Dhabi Airports EHS policies and procedures.
- 5.7.5. Assist in identifying environmental, occupational health and safety training needs in coordination with departments and GCAS, and to highlight areas where training is required to meet the standards imposed by regulators.
- 5.7.6. Provide advice, technical support, disseminate and convey environmental, occupational health and safety information to department management as needed.
- 5.7.7. Analyze statistical information related to performance measure and identify significant trends and directions to management.
- 5.7.8. Conduct periodic audits and workplace inspections to identify, evaluate and control, occupational health and safety hazards / impacts.
- 5.7.9. Carry-out investigation on reported incidents as required and report to ADPHC through AL ADAA on-line reporting as per the required time frame.
- 5.7.10. Ensure that hazards / impacts assessments as required by the regulators are conducted and reviewed at relevant intervals and to maintain records of the same in coordination with departments / subsidiaries.
- 5.7.11. Stop airport undertaking that are considered unsafe and presenting potential danger to any person.
- 5.7.12. Ensure effective communication between department managers and EHS Section and that EHS programs are consistent with entity policies and procedures.
- 5.7.13. Ensure that Abu Dhabi Airports undergo annual third party external compliance audit by an OSH registered auditor and submit results to the DMT as the concerned SRA.

5.8. Non-Operations Departments

OSHMS culture and processes need to be embedded in all departments and activities within the Abu Dhabi Airports.

- 5.8.1. Human Resource

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- Incorporate OSHMS roles and responsibilities in employee job roles / description, induction training and performance management programs in coordination with relevant departments.
- Incorporate occupational health and safety requirements in Department procedures as needed.
- Provide information and statistics to assist in the calculation and analysis of key performance indicators.
- Assist and participate in the development of OSHMS strategy and implementation plans.
- Assist and participate in the development and awareness of OSHMS policies and procedures.
- Implement risks assessment process based on department activities.

5.8.2. Finance / Procurement

- Incorporate occupational health and safety requirements in tender and procurement procedures and documents.
- Ensure OSHMS performance is included when evaluating and monitoring service providers / contractors overall performance.
- Implement risk assessment process based on department activities.
- Assign department OSHMS Representative and/or Document Controller.

5.8.3. Other Departments

- Incorporate occupational health and safety requirements in Department procedures as needed.
- Assign department OSHMS Representative and/or Document Controller.
- Implement risk assessment process based on department activities.

5.9. Contractors / Airport Tenants

This classification is external to the Abu Dhabi Airports organization, and includes all those individuals or organizations working on a contract for ADA.

The OSH responsibilities attached to this classification includes:

- 5.9.1. Demonstrating the establishment of an OSH Policy statement and the maintenance of an OSH program, with objectives and standards consistent with applicable legislation and the Abu Dhabi Airport's OSH requirements.
- 5.9.2. Ensure that workers are adequately trained in the work being undertaken, are aware of hazardous substances that may be used at the workplace; and wear appropriate PPE provided.
- 5.9.3. Identifying and assessing potential health and safety risks associated with the work they are going to perform; depending on the contract size – outlining how these risks will be managed in a Project Safety Plan for major contracts, or undertaking a job safety analysis and providing a safe work method statement for minor contracts.
- 5.9.4. Obtain permit to work (PTW) from relevant ADA department prior to commencing any hazardous work such as hot work, asbestos removal, demolition, confined space, electrical work, excavation work or roof entry.
- 5.9.5. Ensuring that all electrical equipment used on site are inspected, tested and tagged in accordance with regulatory requirements.
- 5.9.6. Undertaking regular site safety inspections to ensure that any potential risks to health and safety are managed.
- 5.9.7. Communicating with all relevant parties, prior to commencing work; where work may have an impact on the health and safety of ADA premises.
- 5.9.8. Communicating with all relevant parties, prior to commencing work; where work may have an impact on the health and safety of ADA premises.

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5.9.9. Reporting any hazards, accidents, injuries or dangerous occurrences promptly to ADA representative and relevant regulatory body.

5.9.10. Using personal protective equipment, protective devices, signage and barricading in accordance with EHS requirements.

Note: The above minimum responsibilities, or similar specific to the contracted job will be included in all contracts tendered and proof of the above may be required by ADA at any time from tending to project completion.

5.10. Visitors and General Public

Visitors and the general public are responsible for cooperating with the Abu Dhabi Airports' occupational health and safety requirements.

5.10.1. Comply with applicable EHS instructions.

5.10.2. Be familiar with emergency and evacuation procedures.

5.10.3. Take reasonable care for the health and safety of themselves and of any other persons who may be affected by their activities.

5.10.4. Not allowed into potentially hazardous areas where they may be exposed to risks without being accompanied by a competent airport staff.

5.11. Integrated Management System Steering Committee (IMSSC)

5.11.1. Review and evaluate the overall performance in achieving OSHMS objectives and targets.

5.11.2. Oversee the development and implementation of OSHMS policies, procedures and actions to achieve compliance with applicable regulatory and other standard requirements.

5.11.3. Ensure minutes of meeting are communicated to interested parties.

Note: Please refer to IMSSC TOR.

6. Procedure Steps	Responsible Party
6.1. General 6.1.1. All employees are expected to participate an active role in the development, review and implementation of ADA OSHMS and extend full support for but not limited to the following: ▪ OSHMS CORE SOPs ▪ Risk Assessments ▪ Workplace Inspections ▪ Reporting of Incidents and Hazards ▪ Internal / External Audits ▪ Suggestions for improvement ▪ Incident Investigations 6.1.2. Employees are responsible to: ▪ Cooperate with the management in the points mentioned in 6.1.1 ▪ Perform their duties responsibly.	All Department managers
6.2. Leadership & Commitment	▪ Senior Management

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6.2.1. Shall take the ultimate responsibility for managing and overseeing the implementation of the Abu Dhabi Airports' OSHMS.							
6.2.2. Development and authorization of ADA OSH Policy and Objectives & Targets.							
6.2.3. Provide support, presence and visible commitment in leading the organization towards achieving the entity desired occupational health and safety objectives and targets through activate involvement in all aspects of the system, leading the initiatives and by providing adequate resources required to effectively implement the OSHMS.							
6.3. Responsibilities, Authority and Accountability							
6.3.1. Responsibility, authority and accountability for OSHMS must be defined in individual role profiles. Such documentation must be communicated, agreed and readily accessible to the position holder.							
6.3.2. Expected to employ best feasible management practices to ensure safe and healthy premises.		▪ HOD ▪ Department Managers ▪ Contractor					
6.3.3. Responsible individually for implementing the ISO 45001:2018, and for complying with ADA EHS standards as well as ADPHC and other requirements.							
6.3.4. Designation of Department OSHMS Representative and/or Document Controller.							
6.4. Communication of Roles and Responsibilities							
6.4.1. Ensure that all personnel working under their respective responsibilities are fully aware of their roles and responsibilities with regard to occupational health and safety.		▪ HOD ▪ Department Managers ▪ Contractor					
6.4.2. Ensure that they are aware of their respective role profiles and that they function and perform according to the job specification prescribed to them.							
6.4.3. Communicate and consult with staff on EHS issues.							
6.4.4. Communicate to stakeholders on Abu Dhabi Airports' OSHMS requirements.							
6.5. Performance Measure to OSHMS Roles and Responsibilities							
6.5.1. Measure the conformance of their respective personnel with their defined EHS roles & responsibilities through regular performance appraisals carried out to each employee on an annual basis.		▪ HOD ▪ Department Managers ▪ Contractor					
6.5.2. Any employee found not meeting the required competency, roles and responsibilities shall be subjected to training and/or other appropriate actions to meet the requirements.							
6.6. Record and Records Keeping							
6.6.1. Ensure safekeeping of individual job profiles for staff under their responsibility.		▪ HOD ▪ Department Managers ▪ Contractor					
6.6.2. Review and update of job profiles are conducted periodically or as deemed necessary.							

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7. Monitoring, Evaluation and Review

- 7.1. This procedure will be reviewed as per AD Airports Document Management requirements or as the need arises to ensure effectiveness and applicability to AD Airports operation.
- 7.2. More frequent reviews may be done according to regulatory requirements and/or organizational change.

8. Potential Risks

Risk	Control Measure
8.1. Staff unaware of respective OSHMS roles and responsibilities.	OSHMS roles and responsibilities are enumerated in the CORE SOP's.
8.2. OSHMS roles and responsibilities are not identified in staff job roles.	- Incorporate OSHMS responsibilities in staff job role and discuss by immediate superior. - Incorporate OSHMS as part of staff performance measure.

9. Legal Requirements

- 9.1 Refer to EHS Section legal register.

10. Exceptions

- 10.1 Aerodrome Posts Holders responsibilities specified in the GCAA requirements.

11. Supporting Documentation and Tools

11.1 References

- ISO 14001:2015 – Environmental Management System, Clause 5.3 – Organizational roles, responsibilities and authorities.
- ISO 45001:2018 – Occupational Health & Safety Management System, Clause 4.4.1 – Resources, roles, responsibility and authority.
- Abu Dhabi Occupational Safety & Health (ADPHC-SF), Management System Elements

SOP Title:	Roles & Responsibilities						
SOP Ref. No.:	ADA/COR/SOP/033	Version No.:	V3.2	Version Date:	10/11/2022	Page:	16/17

- Abu Dhabi Occupational Safety & Health (ADPHC-SF) Guidance Document, OSH Roles and Responsibilities
- Abu Dhabi Airports Occupational Health & Safety System Manual, ADA/OSHMS/MAN/02
- Abu Dhabi Airports TOR, IMSSC, ADA/OPS/COO/TOR
- Abu Dhabi Airports EHS Handbook, Item 4.0
- 3rd Party Audit CARs (As Applicable)

11.2 Forms

- Department OSHMS Representative Nomination Form, ADA/COR/FOR/30/V3.0
- Department OSHMS Document Controller Nomination Form, ADA/COR/FOR/31/V1.0

12. Filing and Distribution

12.1 This document will be available in the Matari in electronic format.

12.2 Printed copies will be classified as “uncontrolled”.

13. Change Log

Version No.	Document Creation, Review, Approval and Change Tracking	Actioned by (Name, Title, Department)	Action Date	Change Effective Date
V1.0	Document Creation	GG EU	01/08/2016	01/12/2016
V1.1	Update of Procedural Steps Update of Supporting Documentation & Tools	EU	20/11/2017	01/12/2017
V2.0	Amended Title Page and Revision Amended of Purpose and Scope Amended of Definition & Abbreviation Amended of Responsibilities Amended of Procedure Steps Amended Potential Risks Amended Supporting Documents and Tools	EU	01/05/2019	01/06/2019
V2.1	Amended CORE SOP Owner Update of Version No. and Date Update of Change Log Added Legal requirements	EU MA	01/07/2019	

STANDARD OPERATING PROCEDURE

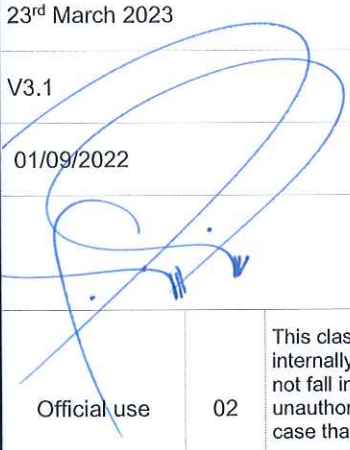
SOP Title:	Roles & Responsibilities						
SOP Ref. No.:	ADA/COR/SOP/033	Version No.:	V3.2	Version Date:	10/11/2022	Page:	17/17

V3.0	Update role & responsibilities Update of Procedural Steps	HA AA	01/11/2021	
V3.1	Review and update the version date	FA	01/09/2022	01/09/2022
V3.2	Amended Title Page and Revision Amended of Purpose and Scope Amended of Definition & Abbreviation Amended of Responsibilities Amended of Procedure Steps Amended Potential Risks Amended Supporting Documents and Tools	FA	10/11/2022	1/12/2022

N.B. This document is UNCONTROLLED unless signed by an authorized person in the appropriate section of this document or viewed in Workflow! on Abu Dhabi Airports Matari-SharePoint.

STANDARD OPERATING PROCEDURE

Occupational Health and Safety Risk Control Integrated Management System

Business Process Area / Functional Area:	Abu Dhabi Airports
SOP Owner:	EHS & Sustainability
SOP Ref. No:	ADA/COR/SOP/020/V3.1-01/09/2022
Implementation Date:	01/11/2021
Approved By:	Aws Al Khanjari
Approval Date:	23 rd March 2023
Version No.:	V3.1
Version Date:	01/09/2022
Approver's Signature: (for non-electronic copies)	
Information Classification	Official use 02 This classification refers to information that is to be used internally by the Abu Dhabi Airports personnel only, and does not fall into the previous three categories. Although unauthorized disclosure of this information is prohibited, in the case that it occurs, it is expected that there will be no serious repercussions to Abu Dhabi Airports, shareholders, employees, business partners and/or clients.

A Standard Operating Procedure (SOP) consists of a set of statements describing instructions in an orderly manner for the purpose of achieving a result. SOPs are developed to maximize the efficiency and accuracy of implementation of a policy or operational process.

Template Title:	SOP Template	Template Ref. No.:	TEM/03/SOP/V3.0/20072014	Version No.:	V3.0	Version Date:	20/07/2019
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All information contained in this document is proprietary to Abu Dhabi Airports and shall not be duplicated in any manner or released in part or full to any unauthorized persons. However, the contents of this document are not confidential and shall be accessible to all Abu Dhabi Airports employees and its subsidiaries.

SOP Title:	Occupational Health and Safety Risk Control						
SOP Ref. No.:	ADA/COR/SOP/020	Version No.:	V3.1	Version Date:	01/11/2021	Page:	2/13

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SOP Title:	Occupational Health and Safety Risk Control						
SOP Ref. No.:	ADA/COR/SOP/020	Version No.:	V3.1	Version Date:	01/11/2021	Page:	3/13

1. Title

Occupational Health and Safety Risk Control

2. Purpose

- 2.1. To ensure compliance with DOT, OSHAD and other applicable regulatory requirements and standards.
- 2.2. To highlight all occupational health and safety risk, based upon current knowledge and understanding, and describe current control measures in order to mitigate or reduce the potential effects.

3. Scope

- 3.1. This document (or parts thereof) applies to all departments within Abu Dhabi Airports Operations and any activities that may result in occupational ill health effects from exposure to the following: -
 - Asbestos
 - Legionnaires Disease
 - Indoor Air Quality
 - Display Screen Equipment
 - Hand Arm/Whole Body Vibration
 - Dust Control
 - Thermal Environment - refer to Section 5.7
 - Manual Handling - refer to Section 5.8

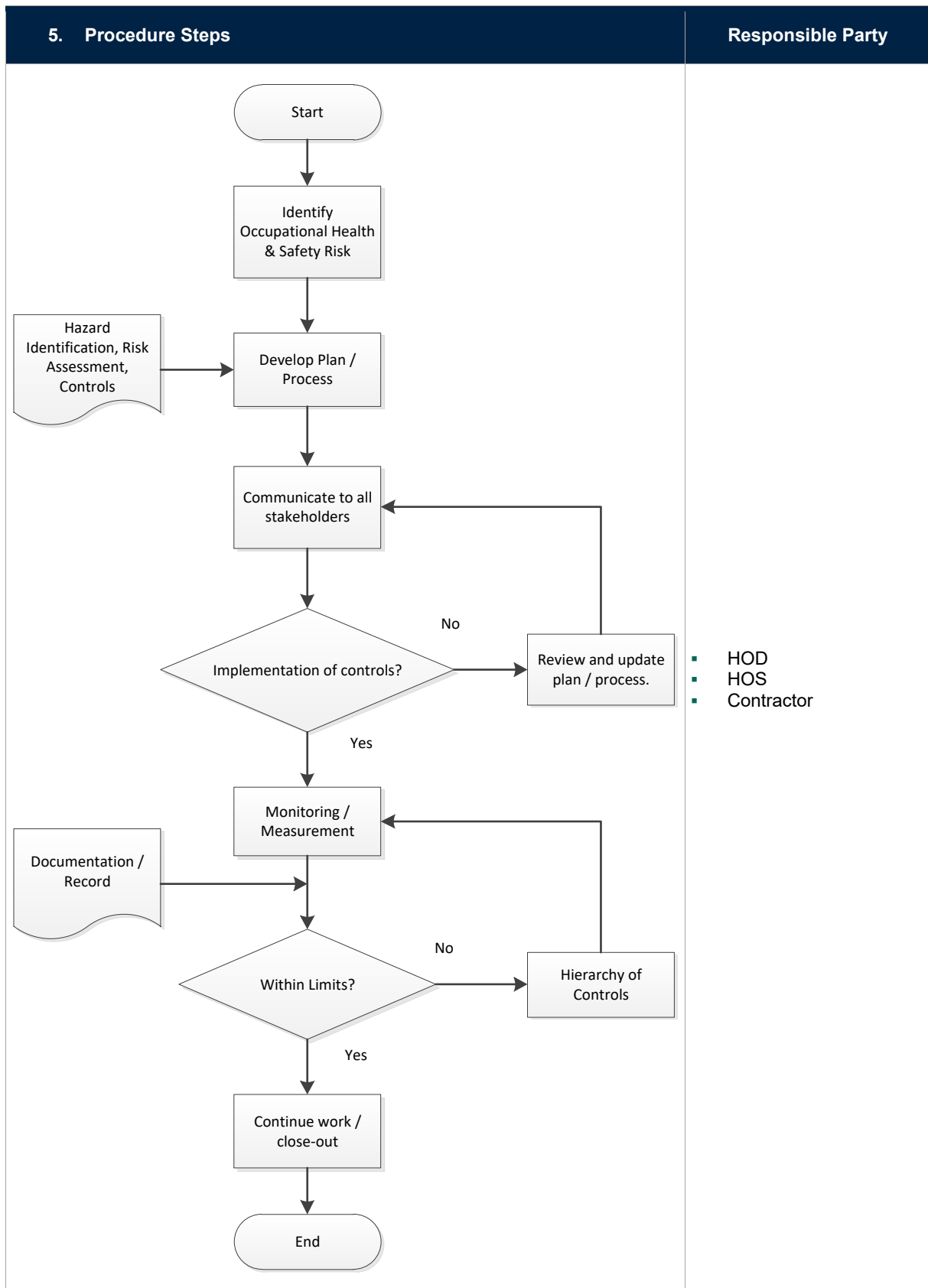
4. Definitions and Abbreviations

Definitions	Description
Asbestos	The fibrous form of mineral silicates belonging to the serpentine and amphibole groups of rock-forming minerals, including actinolite, amosite (brown asbestos), anthophyllite, chrysotile (white asbestos), crocidolite (blue asbestos), tremolite, or any mixture containing one or more of the mineral silicates belonging to the serpentine and amphibole groups (ref. OSHAD – SF Glossary of Terms, V3.0 July 2016)
Contractor	A person, organization, their employees or a nominated representative engaged to carry out work for the nominated entity in a contract for service arrangement (ref. OSHAD – SF Glossary of Terms, V3.0 July 2016).
Display Screen Equipment	Any alphanumeric or graphic display screen, regardless of the display process involved (ref. OSHAD – SF Glossary of Terms, V3.0 July 2016)
HA/WB VS	Hand Arm/Whole Body Vibration Syndrome, the effect on the human body of vibration from plant or equipment
Indoor Air Quality	Refers to the presence or absence of air pollutants in buildings. There are many sources of indoor air pollutants such as tobacco smoke, carbon monoxide (CO), and radon. Indoor air pollution can be caused by conditions that promote poor

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	indoor air quality such as inadequate ventilations or excessive moisture that can lead to mold growth. These are indicators of potential health effects. CO poisoning, allergies, asthma and deaths are health outcome indicators (ref. OSHAD – SF Glossary of Terms, V3.0 July 2016).
Legionnaires Disease	Is a potentially fatal pneumonia caused by legionella bacteria. It is the most well-known and serious form of a group of diseases known as legionellosis. Other similar (but usually less serious) conditions include Pontiac fever and Lochgoilhead fever.
Manual Handling	The act of moving an object (push, pull, lift, lower etc) by the applying human effort without the use of mechanical aids
Sedentary work	Being stationary, or in the same position, for long periods of time
Abbreviations	Description
DMT	Department of the Municipality & Transport
DSE	Display Screen Equipment
IAQ	Indoor Air Quality
ADPHC	Abu Dhabi Public Health Center

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5.1. General

5.1.1. Asbestos

- Where practicable, at the time of a “pre-works survey”, the Asbestos Register will be inspected in order to establish if there is any potential asbestos within the proposed working areas.
- Where this is not practicable (emergency works etc), prior to any works being undertaken on site, the nominated site/project supervisor will request and inspect the site Asbestos Register in order to establish if there is any potential asbestos within the proposed working areas.
- Where a building and/or installation may be “of an age” where asbestos could potentially be present, all maintenance/contractor personnel will be informed of any potential locations and type of asbestos (where this may be within their working areas) and provided with suitable training pursuant to the requirements of local regulations.
- Prior to the commencement of any works on such a site (i.e. one that may potentially contain asbestos) the site/project supervisor will establish a full “chain of command” reporting procedure.
- Where any works are undertaken and material suspected of being asbestos is uncovered all works will cease with immediate effect and the area cleared of all personnel.
- This will then be reported to the nominated site/project supervisor (by the person discovering the material as applicable) who will then report to “responsible person”, following the previously establish chain of command and issue a suspension of works notice as needed.
- All works within the immediate area will be suspended whilst an investigation is undertaken. No further works will be undertaken by site/project personnel within the immediate area until the “all clear/re-commencement of suspended works notice” has been issued in writing to the site/project supervisor.

- HOD
- HOS
- Contractor

5.2. General

5.2.1. Legionnaires Disease

- Infection is caused by breathing in small droplets of water contaminated by the bacteria. The bacteria will not cause harm by ingestion
- The disease cannot be passed from one person to another.
- Everyone is potentially susceptible to infection but some people are at higher risk, eg those over 45 years of age, smokers and heavy drinkers, those suffering from chronic respiratory or kidney disease, and people whose immune system is impaired.
- Legionella bacteria are common in natural water courses such as rivers and ponds. Since legionella are widespread in the environment, they may contaminate and grow in other water systems such as cooling towers and “domestic” hot and cold water services.
- They survive low temperatures and thrive at temperatures between 20-45°C if the conditions are right, eg if a supply of nutrients is present such as rust, sludge, scale, algae and other bacteria. They are killed by high temperatures (55-60°C).

- HOD
- HOS
- Contractor

5.3. General

5.3.1. Indoor Air Quality

- HOD
- HOS
- Contractor

▪ An initial appraisal of IAQ is undertaken by the collection of ambient air samples at nominated locations within a premises. ▪ The results of samples taken will be compared to the current suggested exposure limits and/or guidance and best practice in order to provide a clear and concise report of the conditions found at the time of inspection.	
5.3.2. Controlling the risk ▪ identify and assess sources of risk by undertaking a risk assessment ▪ prepare a scheme (or course of action) for preventing or controlling the risk ▪ implement and manage the scheme – appointing a person to be managerially responsible, sometimes referred to as the ‘responsible person’ ▪ select a suitable treatment system ▪ where practicable, limit the water temperature ▪ where practicable, do not store excessive volumes of water ▪ where practicable, minimize the volume of water that is “sprayed” ▪ keep records and check that what has been done is effective by means of regular sampling ▪ review the risk assessment at least every two years	▪ HOD ▪ HOS ▪ Contractor
5.4. General 5.4.1. Display Screen Equipment ▪ The purpose of this document is to ensure that ergonomic assessments are carried for the safe use and operation of visual display screens or DSE and that risk control measures are applied where necessary ▪ This requirement applies to all Abu Dhabi Airports employees and those working for Abu Dhabi Airports who habitually use DSE. ▪ The Department Management is responsible for ensuring assessments are carried out on the introduction of new DSE workstations, on the movement/change of location of DSE stations. ▪ All workstations are to be reviewed on a regular basis.	▪ HOD ▪ HOS ▪ Contractor
5.4.2. Potential Hazards ▪ Work related upper limb disorders, which can include muscular skeletal problems such as “carpel tunnel syndrome” an inflammation of the nerves affecting the arms, ostio-arthritis, an inflammation of the inter-vertebral membrane (particularly in the neck) due to poor posture ▪ Eye strain or irritation (can be more acute in personnel that wear glasses or contact lenses.	
5.4.3. Risk Assessment ▪ Person – has the person been trained to adjust the work station to suit their physique, do they wear glasses or contact lenses, are they new to this type of work etc ▪ Environment – is there adequate space in which to move,	▪ HOD ▪ HOS ▪ Contractor

▪ suitable lighting etc ▪ Furniture – is the chair adjustable and gives correct support, can the correct posture be adopted, is the work surface overcrowded etc. ▪ DSE – does the screen or position create glare, is the screen height adjustable, can it be positioned to suit the user, are the characters on the screen clear and of a suitable size etc. ▪ Task – is the task sedentary or can it be alternated etc 5.4.4. Controlling the Risk ▪ Train staff in personal workstation set up and simple exercises for parts of the body most at risk. ▪ Provision of suitable furniture and equipment that can be adjusted. ▪ Develop a “work-flow” that will incorporate breaks from the use of DSE (moving around the office etc). ▪ Occupational health monitoring as requested. ▪ Carry out regular DSE assessments and reviews.	
5.5. General 5.5.1. Vibration ▪ Excessive use of hand held or guided vibrating tools and equipment can have a serious and lasting effect on the body. ▪ In general vibration can cause severe pain and numbness in the fingers, the sensation of pins and needles, loss of sense of touch, loss of grip strength and painful wrists. ▪ The above sensations/pains are more noticeable in cold weather with the digits blanching hence the term Vibration White Finger.	▪ HOD ▪ HOS ▪ Contractor
5.5.2. Potential Hazards ▪ the magnitude, type and duration of exposure, including any exposure to intermittent vibration or repeated shocks ▪ the effects of exposure to vibration on employees whose health is at particular risk from such exposure ▪ any effects of vibration on the workplace and work equipment, including the proper handling of controls, the reading of indicators, the stability of structures and the security of joints ▪ any information provided by the manufacturers of work equipment ▪ the availability of replacement equipment designed to reduce exposure to vibration ▪ any extension of exposure at the workplace to whole-body vibration beyond normal working hours, including exposure in rest facilities supervised by the employer ▪ specific working conditions such as low temperatures ▪ appropriate information obtained from health surveillance including, where possible, published information.	▪ HOD ▪ HOS ▪ Contractor
5.5.3. Risk Assessment ▪ observation of specific work practices ▪ reference to relevant information on the probable magnitude of the vibration corresponding to the equipment used in the particular working conditions ▪ if necessary, measurement of the magnitude of vibration to which	▪ HOD ▪ HOS ▪ Contractor

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his employees are liable to be exposed the employer shall assess whether any employees are likely to be exposed to vibration at or above an exposure action value or above an exposure limit value.		
5.5.4. Control measures to be implemented. - Use alternative method that avoids or reduces vibration - Select low vibration equipment - Rotate job to reduce exposure times - Encourage hand & finger exercise - Toolbox talks on avoiding risks		- HOD - HOS - Contractor
5.6. General 5.6.1. Dust Control - Silica occurs as a natural component of many materials used or encountered in construction activities. - This information sheet deals with crystalline silica which can cause lung disease. Crystalline silica is present in substantial quantities in sand, sandstone and granite, and often forms a significant proportion of clay, shale and slate. - It can also be found in chalk, limestone and other rock and soil, though this is unusual. Products such as concrete and mortar also contain crystalline silica.		- HOD - HOS - Contractor
5.6.2. Potential Hazards - Breathing in the very fine dust of crystalline silica can lead to the development of silicosis. This involves scarring of the lung tissue and can lead to breathing difficulties. Exposure to very high concentrations over a relatively short period of time can cause acute silicosis, resulting in rapidly progressive breathlessness and death within a few months of onset. - Similarly, accelerated silicosis, which can progress to death within a decade, has been associated with high exposures to silica in sand blasting. - More common is progressive silicosis, usually because of exposure over a longer period. This causes fibrosis (hardening or scarring) of the lung tissue with a consequent loss of lung function. - Victims are likely to suffer severe shortness of breath and will find it difficult or impossible to walk even short distances or upstairs. - The effect continues to develop after exposure has stopped and is irreversible. Sufferers usually become house- or bed-bound and often die prematurely due to heart failure. - Silica may be linked to lung cancer. If this is the case it is most likely that it occurs as a progression of lung fibrosis. - Precautions taken to control the risk of fibrosis will serve to control the risk of lung cancer.		- HOD - HOS - Contractor
5.6.3. Risk Assessment - In most cases, when it is reasonable to expect dust levels to be significant, you should consider the need for atmospheric sampling of respirable dust and respirable silica. - As a general rule, levels greater than 0.1 mg/m³ can be regarded as significant. In cases of doubt it should usually be assumed that levels will be significant unless sampling from very similar work has shown otherwise. Results of sampling may be needed to find out the control measures that will be		- HOD - HOS - Contractor

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appropriate for a particular activity. As well as evaluating the risk and describing the precautions, the assessment should set out in detail the way in which the control measures are to be monitored, supervised and maintained.		
5.6.4. Corrective Measure	- First of all, try to get rid of silica dust from your work. Sometimes silica can be eliminated by substituting other materials, for instance, using non-silica grits for blasting. - Where this is not possible they should specify the least hazardous products which perform to an acceptable standard. It may be possible to get rid of or reduce the need for scabbling, cutting or drilling concrete through design. - Provision of adequate PPE.	- HOD - HOS - Contractor
5.7. General		
5.7.1. Manual Handling	- The selection of persons to carry out manual handling or lifting tasks will be based on the training given, age, physical build etc. - Where loads have to be manually handled, the need to ensure that accesses are safe is especially important. - The training provided should be based on the physical structure of the body and the effect of attempting to handle loads in various positions. All departmental manager and supervisor will ensure that materials are handled as far as reasonably practicable, by mechanical means. Where the use of a machine is impracticable, sufficient labor must be available to handle any heavy or awkward loads and instructions must be issued to site on the handling of these loads. - Supervisory staff will instruct any operative in the correct handling and lifting of loads as required. - Supervisory staff will ensure that a supply of suitable gloves is available for issue as required for the handling of materials that could cause injuries to the hands - The supervision will not require any operative, particularly a young person, to lift any load without assistance which is likely to cause injury.	- HOD - HOS - Contractor
5.7.2. Potential Hazards	- Back strain, slipped disc. - Hernias. - Lacerations, crushing of hands or fingers. - Tenosynovitis (tendon inflammation). - Bruised or broken toes or feet. - Various sprains, strains etc.	

6. Monitoring, Evaluation and Review

- 6.1. Internal audits are undertaken at planned intervals based on risk to determine whether the SOP is effectively implemented and maintained.

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SOP Ref. No.:	ADA/COR/SOP/020	Version No.:	V3.1	Version Date:	01/11/2021	Page:	11/13

- 6.2. Department Management and CEHS are responsible for monitoring the effectiveness of the SoP's under their control.
- 6.3. Monitoring methods shall demonstrate the ability of the SoP to achieve planned results. Correction and corrective action shall be taken, as appropriate; to ensure conformity of the activity when planned results are not achieved.
- 6.4. The SoP should be reviewed on an annual basis or more frequently if needed, to ensure the continuing suitability, adequacy and effectiveness of the SoP. This review shall include assessing opportunities for improvement and the need for changes to the SoP.

7. Potential Risks

Risk	Control Measure
7.1. Injury / Illness	- Risk assessment, implementation of control measures. - Consultation and communication to all stakeholders.

8. Exceptions

- 8.1. The preceding list of Occupational Health and Safety Risks are not "exhaustive" and additional risks may be added.
- 8.2. All "high risk" activities will be covered under the following SOP's:
- 8.2.1. Noise Assessment and Control
 - 8.2.2. Confined Space Working, Working at Height and Electricity are all covered within The Control of High Risk Activities

9. Legal Requirements

This section is to specify what Laws, Regulations, standards or guidelines the department deal within this SOP.

ADPHC

DMT

10. Supporting Documentation and Tools

- 10.1. References:
- OSHAD – SF CoP 1.10 Management \ of Asbestos Containing Materials, V3.0 July 2016
 - OSHAD – SF CoP 3.1 Vibration, V3.0 July 2016
 - OSHAD – SF CoP 14.0 Manual Handling and Ergonomic, V3.0 July 2016
 - OSHAD – SF CoP 52.0 Local Exhaust Ventilation, V3.0 July 2016
 - OSHAD – SF Elements, V3.0 July 2016

SOP Title:	Occupational Health and Safety Risk Control					
SOP Ref. No.:	ADA/COR/SOP/020	Version No.:	V3.1	Version Date:	01/11/2021	Page: 12/13

11. Filing and Distribution

- 10.1. All documents related to IMS are kept in Share Point and employees are informed via email regarding the distribution of core documents such as, IMS Policy, IMS Manual, and IMS Core Procedures and related forms and other department documentation, which will be accessible via IMS Share Point portal. Authorized Departments are responsible for distributing the respective department documentation to concerned parties. Documents are controlled.
- 10.2. Compliance & EHS, authorized department members, respective Department Document Controllers, and GMs, will be provided relevant access to all IMS documentation as per respective Share Point workflow.
- 10.3. Records retention period is for a minimum of five years unless required otherwise by Organizational need, Statutory or Regulatory requirements.

12. Change Log

Version No.	Document Creation, Review, Approval and Change Tracking	Actioned by (Name, Title, Department)	Action Date	Change Effective Date
V0.1	First version published			
V0.2	Review and Update	AG		
V1.0	Updated the interface process, change in template, version no and responsibility as per the current structure.	MS	14/01/2015	15/01/2015
V2.0	Update of Template and Version No. Update of Purpose Update of Definitions and Abbreviation Update of Procedure Steps Update of Monitoring, Evaluation and Review Update of Potential Risk Update of Supporting Documents and Tools Update of Filing & Distribution Update of Change Log	GG EU	16/11/2016	
V2.1	Update of Title Page, Version No. and Version Date Amended DMAT to DOT	EU	28/02/2018	01/03/2018
V3	Replacing the DOT with DMT	AO	02/11/2021	

STANDARD OPERATING PROCEDURE

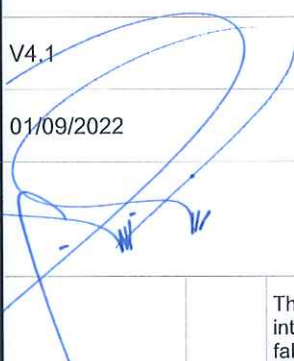
SOP Title:	Occupational Health and Safety Risk Control						
SOP Ref. No.:	ADA/COR/SOP/020	Version No.:	V3.1	Version Date:	01/11/2021	Page:	13/13
	Replacing the OSHAD with ADPHC						
V3.1	SOP Review and version date changed		FA		01/09/2022		01/09/2022

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STANDARD OPERATING PROCEDURE

Contractor Management

Emergency Services and Compliance

Business Process Area / Functional Area:	Abu Dhabi Airports		
SOP Owner:	EHS & Sustanibility		
SOP Ref. No:	ADA/COR/SOP/012-V4.1-01/09/2022		
Implementation Date:	01/11/2021		
Approved By:	Aws Al Khanjari		
Approval Date:	23 rd March 2023		
Version No.:	V4.1		
Version Date:	01/09/2022		
Approver's Signature: (for non-electronic copies)			
Information Classification	Official Use	02	This classification refers to information that is to be used internally by the Abu Dhabi Airports personnel only, and does not fall into the previous three categories. Although unauthorized disclosure of this information is prohibited, in the case that it occurs, it is expected that there will be no serious repercussions to Abu Dhabi Airports, shareholders, employees, business partners and/or clients.

A Standard Operating Procedure (SOP) consists of a set of statements describing instructions in an orderly manner for the purpose of achieving a result. SOPs are developed to maximize the efficiency and accuracy of implementation of a policy or operational process.

Template Title:	SOP Template	Template Ref. No.:	TEM/03/SOP/V4.0/01072019	Version No.:	V4.1	Version Date:	01/11/2021
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SOP Title:	Contractor Management						
SOP Ref. No.:	ADA/COR/SOP/012	Version No.:	V4.1	Version Date:	01/10/2021	Page:	2/14

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SOP Ref. No.:	ADA/COR/SOP/012	Version No.:	V4.1	Version Date:	01/10/2021	Page:	3/14

1. Title

Contractor Management

2. Purpose

- 2.1. To ensure compliance with applicable regulatory and standard requirements.
- 2.2. The purpose of this procedure is to ensure suitable and sufficient controls are implemented to eliminate or minimise health and safety hazards and environmental impacts associated with work activities undertaken by Contractors and Sub-Contractors in Abu Dhabi Airports premises.
- 2.3. Ensure a systematic approach to the management of contractors so that the risks to environmental impacts, occupational health and safety and aviation safety are minimize.

3. Scope

- 1.1. The procedure covers hazard & risk management, levels of supervision and monitoring, together with a review of performance upon completion for works undertaken by contractors at any terminal, ancillary building and other areas controlled by Abu Dhabi Airports and its subsidiaries.
 - (a) The tender documents should include not only a detailed scope of works, but also any information related to sequencing and phasing within the scope.
 - (b) The scope of works should include sufficient detail to allow a competent contractor to fully understand the requirements of the project.

4. Definitions and Abbreviations

Definitions	Description
Client	Refer to the Abu Dhabi Airports.
Contractor	A person, organization, their employees or a nominated representative engaged to carry out work for the entity in a contract for service arrangement.
Permit to Work	The system that allows central control and ongoing monitoring of higher risk activities to ensure that activities are: ▪ Authorized ▪ Carried out by qualified personnel using appropriate safety precautions

SOP Title:	Contractor Management						
SOP Ref. No.:	ADA/COR/SOP/012	Version No.:	V4.1	Version Date:	01/10/2021	Page:	4/14

	- Those activities with potentially hazardous interactions do not take place at the same time Activities included in the system should include: - Hot works - Confined spaces - Electrical Work - Working at Heights - Roof Access - Excavation and trenching - Energy Isolation
Personal Protective Equipment (PPE)	Any device, appliance or equipment (including clothing or sunscreen affording protection against the weather) designed to be worn or held by an individual for protection against one or more health and safety hazards, or minimize their exposure to workplace risks. It includes, but is not limited to, items such as facemasks, and respirators, eye protection, high visibility clothing, coveralls, goggles, helmets, safety harnesses, gloves and footwear.
Project Manager / Client Representative	The project manager / client representative for the construction work is the person / entity appointed by the developer / client to carry out the management, planning and monitoring of the construction work on behalf of the developer / client
Safety Data Sheet (SDS)	A form containing data regarding the properties of a particular substance. It is intended to provide employees and emergency personnel with procedures for handling or working with that substance in a safe manner, and includes information such as physical data, toxicity, health effects, first aid, reactivity, storage, disposal, protective equipment, and spill handling procedures. SDS information may include instructions for the safe use and potential hazards associated with a particular material or product. SDS must be available anywhere chemicals are being stored and used.
Sub - Contractor	Is an entity engaged by the principal contractor to assist with the contracted work.
Abbreviations	Description
ADA	Abu Dhabi Airports
DMT	Department of Municipality and Transport
EHS	Environment, Health and Safety
ADPHC	Abu Dhabi Public Health Center
FOD	Foreign Object Debris
HOD	Head Of Department
ADPHC	Abu Dhabi Public Health Center

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OSHAD-SF	Abu Dhabi Occupational Safety & Health Center- System Framework
PPE	Personal Protective Equipment
PTW	Permit to Work
SLA	Service Level Agreement
SOP	Standard Operating Procedure

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5. Procedure Steps	Responsible Party
<pre> graph TD Start([Start]) --> Identify[Identify Project] Identify --> Tendering[Tendering process] Tendering --> Eval{Pass Tendering Evaluation} Eval -- No --> Tendering Eval -- Yes --> Selection[Selection of Contractor] SR[Specific Requirements] --> Selection Selection --> Mobilization[Mobilization / Pre-Commencement] Mobilization --> OnSite[On-site Management / Monitoring] OnSite --> Conforms{Conforms with requirements} Conforms -- No --> Issue[Issue Non-Conformance] Issue --> OnSite Conforms -- Yes --> Completion[Project Completion / Hand-Over] Completion --> End([End]) </pre>	- Project Manager / Client Representative - EHS Section - Contractor - Procurement Department
3.1. General Contractors engaged or appointed by Abu Dhabi Airports are expected to execute their work in a safe and environmentally friendly manner without risk to employees, other persons and airport premises that may be affected by their work or the environment.	- EHS Manager - Contractor

5.1.1. Ensure that contractors are not allowed to commence work at a site until their health, safety & environmental competence has been verified as meeting Abu Dhabi Airports requirements.

3.1.2. Ensure that risks related to contractor related hazards are controlled. This includes:

- Design and implementation of safe systems of work
- Undertaking hazard identification and risk control activities
- Providing proper and safe equipment and substances
- Providing adequate instructions, training and supervision

3.1.3. Not all steps in the procedure may be relevant in case of minor works, however, the overall intent of this procedure must be met.

5.1.4. Ensure that a Contractor personnel or focal person is designated to ensure that environmental, occupational safety & health and aviation safety requirements are met during the course of work.

5.2. Selection of Contractors 5.2.1. Contractors are selected from the relevant category for the nature of work to be undertaken. 5.2.2. Where contractors are selected by alternative means, the selection criteria must include evidence of compliance with all legislative and ADA requirements.		▪ EHS Manager ▪ Project Manager / Client Representative
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5.3. Mobilization / Pre-commencement

5.3.1. Prior to commencement, depending on the nature and complexity of the scope of work, the awarded contractor shall demonstrate their understanding of hazards and proposed control measures to be taken to minimise risk associated with the work activities. Dependent on the size and complexity of the work, contractors may either:

- Be engaged as labour only and follow all safety control arrangements defined by the Abu Dhabi Airports EHSMS
- Demonstrate and implement their own arrangements for EHS risk management in accordance with relevant legislative and/or regulatory requirements throughout the contract duration.

5.3.2. As a minimum, all contractors' staff shall be provided with EHS information relative to their activities prior to entry on the site/facility by means of a site induction comprising:

- Facility orientation
- Access Controls
- EHS rules (Policy, Procedure, Prohibition)
- Emergency response (including first aid)

5.3.3. Evidence of Site inductions will be recorded within the respective project file.

5.3.4. No contract workers are allowed to commence work until approved. The Project Manager / Client Representative is responsible for ensuring that approval is obtained in sufficient time to meet programme commencement targets.

- Project Manager / Client Representative
- Contractor / Sub-contractor

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5.4. Onsite Management of Contractors

5.4.1. Conform with applicable statutory requirements, policies and procedures of the Abu Dhabi Airports.

5.4.2. Ensure that works are being undertaken in accordance with the ADA requirements.

5.4.3. Housekeeping

- Ensure that rubbish or excess equipment and/or materials is not allowed to accumulate in the immediate work area, and in no circumstances is material for disposal to be stored outside the working area.
- All surplus and rubbish should be cleared from the site on completion of the contract.
- Excessive dust build up is to be avoided.
- Suitable dust control mats are to be used where the work area is immediately adjacent to passenger area.
- Good housekeeping is to be maintained at all times.
- Bins should be provided for collection of waste when working airside to prevent attracting wildlife (ie. FOD, food waste, construction waste).

5.4.4. Pollution Control

- Under no circumstances should hazardous substances be flushed into drainage or sewage systems as a means of disposal.
- Prevent sand, soil, cement or any other solid construction materials being washed into the drainage / sewage system.

5.4.5. Working at Height

- Scaffolding will be erected only by competent persons who will carry-out statutory inspections and maintain records of inspections.
- Scaffolding should be erected based on applicable regulatory requirements.
- Roof works are not allowed without authorization. Applicable PPE must be worn.

5.4.6. Road Safety

- Any excavations, storage and skips must be guarded using appropriate signs, rails, traffic cones and lights, etc.
- Road works must be agreed with the Project Manager / Client Representative and relevant department.

5.4.7. Delivery, Unloading and Hoisting of Materials

- Responsible for the delivery, unloading, hoisting and storage of their own materials. At no time should these activity obstruct or make unsafe normal access to areas outside the immediate vicinity of the works / project.

5.4.8. Hazardous Materials

- Hazardous substances are not allowed inside ADA premises without approval from the Project Manager / Client Representative. The substance may only be utilized once the appropriate documentation and relevant assessments have been presented.

- Contractors
- Sub – Contractors

- Project Manager / Client Representative

5.4.9. Temporary Facilities / Contractor Welfare ▪ Ensure that suitable and sufficient welfare facilities are either made available by the Contractor or provided by Abu Dhabi Airports. ▪ All plans for such temporary facilities provided by the Contractor / Sub-Contractor (offices, toilets, storage containers, including electrical supply etc) are submitted for inspection and approval prior to commencement of work.	
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5.5. Management of Risk

5.5.1. Submit a general and/or specific risk assessment and supporting control arrangements (method statements), taking into account any relevant additional EHS information provided prior to carrying out any work, and where considered necessary by the Project Manager / Client Representative.

5.5.2. General Method statements may need to be amended as required on site based on the results of the task specific risk assessments, and also include any specific arrangements to minimise environmental impact. (It is noted that these arrangements may be separate).

5.5.3. Work may not be permitted to commence on any site unless:

- The Contractor has discussed and agreed EHS control arrangements with the nominated Project Manager / Client Representative;
- The Contractor has responded with appropriate risk assessments and control measures (where necessary);
- The Project Manager / Client Representative has given written authorisation to proceed;
- The contractor has been made aware of the monitoring & reporting obligations;
- All contractor plant & equipment has been verified as meeting the stated requirements;
- The contractor personnel have completed the site induction process;

5.5.4. Ensure that work sites are secured in such a way as to prevent unauthorized entry by airport staff, airport tenants, and/or the general public.

5.5.5. In addition to the above, and where requested by the Project Manager / Client Representative, the contractor will be requested to prepare and submit for approval a "fire prevention program" this program may be prepared in conjunction with and incorporated within other risk assessment and or "permit to work" controls.

- Contractor
- Sub - Contractor

5.6. Contractor Monitoring 5.6.1. During the execution of contract, activities on site, is subject to performance monitoring in accordance with an agreed schedule or SLA provided prior to commencement. The level of supervision and monitoring applied, is dependant on the level of confidence established and the risk of harm to employees, contract staff, the environment and comprise:	▪ Project Manager / Client Representative ▪ Contractor / Sub-Contractor ▪ EHS Section
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▪ Compliance with EH&S Legislation ▪ Understanding of H&S Hazards and Risks ▪ Understand of Significant Environmental Aspects ▪ Compliance with Site Specific Rules ▪ Compliance with EH&S Control Arrangements (including use of PPE where identified) 5.6.2. All monitoring (audit & Inspections) carried out are recorded together with any identified corrective action considered necessary. The project /contracts manager will monitor the implementation and closure of all corrective actions in conjunction with the contractor management. Failure by a contractor (contractor staff) to comply with recommended corrective actions may result in termination of the contract. 5.6.3. Upon completion of the scope of work, and at the discretion of Project / Contracts Manager a post contract review is undertaken reporting on the results of ongoing monitoring previously identified and including: ▪ Overall contractor competence ▪ Willingness to comply ▪ Effectiveness of corrective action implementation ▪ Levels of improvement demonstrated (if any) ▪ Lessons learnt 5.6.4. The results of such reviews compiled and issued to procurement / purchasing department for use in subsequent contractor competence evaluation process.	
5.7. Monitoring Performance 5.7.1. Contractor providing services are to submit monthly EHS performance report to EHS Section not later than 7th of each succeeding month.	▪ Contractor / Sub-Contractor
5.8. Accident / Incident Reporting 5.8.1. All incidents, emergencies and near misses are to be reported immediately to the Project Manager / Client Representative. 5.8.2. Ensure that accidents and incidents reported are investigated and dealt with in an expedient manner with corrective / preventive actions implemented.	▪ Project Manager / Client Representative ▪ Contractor / Sub-contractor
5.9. Emergency Response 5.9.1. Ensure that contractor personnel are aware of the emergency response procedure, assembly points, the location of emergency alarm activation, fire suppression systems and emergency contact numbers. 5.9.2. Use of fire suppression equipment is not permitted unless during the course of an emergency or permission granted by Project Manager / Client Representative in coordination with the Fire Safety & Standard Section.	• Project Manager / Client Representative • Contractor / Sub-Contractor
5.10. Permit to Work 5.10.1. PTW are designed to ensure that safe methods of working are adopted in circumstances where there is a potential hazard to those	• Project Manager / Client Representative

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carrying out the work or to people in the vicinity of the work. PTW are to be obtained from authorized personnel or department prior commencing of work and must be signed off once the work is completed. Once issued the conditions of the permit must be followed at all times. 5.10.2. A Non-Objection Certificate (NOC) shall be obtained from relevant departments depending on the nature of the work activity and type of PTW application.		Contractor / Sub-Contractor					
Documentation - The following but not limited to may be requested from the Contractor / Sub-Contractor to ensure compliance with regulatory and ADA requirements: - OHS Policy Statement - Project Method Statements - Risk assessments - Training Records - Safety Data Sheets (SDS) - Equipment list and PAT testing results - Maintenance / inspection records - Incidents Investigation Report		- Project Manager / Client Representative - EHS Section - Contractor / Sub-Contractor					
5.12. Punitive Actions 5.12.1. Disciplinary actions shall be considered upon completion of a thorough investigation in case of non-conformities to ADA EHS requirements, unsafe practices, unacceptable behaviour or any event that might impair the health and safety of ADA staff, general public, airport tenants or the contractor / sub-contractor personnel. 5.12.2. Contractors / Sub-Contractors could be denied access to the airport premises incase of serious misconduct.		- Project Manager / Client Representative - Contractor / Sub-Contractor					

6. Monitoring, Evaluation and Review

- 6.1. The ADA Management of Contractors CORE SOP shall be reviewed as per ADAC Document Management requirements, or if there are any significant changes to operational and regulatory requirements.
- 6.2. Compliance and EHS shall be notified of any proposed changes to enable a full evaluation and review to be carried out prior to the implementation of the proposed changes.

7. Potential Risks

Risk	Control Measure
7.1. Task specific risks are to be identified and recorded by contractor or project/contract manager prior to the commencement of works	Task specific risks control measures are to be identified and recorded by contractor or

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	project/contract manager prior to the commencement of works. - Implementation of PTW. - Required awareness on airport EHS, SMS, Fire Safety, Security, etc.
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8. Exceptions

This procedure does not include following processes:

- 8.1. CP&C projects outside the Abu Dhabi Airports premises.
- 8.2. Airport tenants projects not under Abu Dhabi Airports.

9. Legal Requirements

This section is to specify what Laws, Regulations, standards or guidelines the department deal with in this SOP. This SOP under ADPHC and DMT

- (a) The successful contractor should be able to demonstrate how they identify and comply with all applicable legal requirements. The procedure should clearly identify what legislation is relevant to the entity, how it impacts their operations and also how they comply with the requirement.
- (b) Further entities with robust management systems will be able to demonstrate how these requirements are communicated within their firm and also responsibilities for the upkeep and review of the legal registers etc.

10. Supporting Documentation and Tools

10.1 References

- Abu Dhabi Occupational Safety & Health (OSHAD-SF) Manual.
- Abu Dhabi Occupational Safety and Health System Framework, OSHAD-SF, Element 3 – Management of Contractors
- Abu Dhabi Occupational Safety & Health System (OSHAD-SF), COP 21.0 – NOC Systems
- Abu Dhabi Occupational Safety and Health System Framework, OSHAD-SF Technical Guideline, Management of Contractors “
- Management of Contractor, FM, ADA/ADIA/OPS/FM/CAS/SOP/105

1.2 Forms / Registers:

- Contractor EHS Monthly Report – ADA/COR/FOR/029
- EHS Non-Objection Certificate – ADA/COR/FOR/037
- PTW NOC Document Register – ADA/COR/REG/032

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11. Filing and Distribution

- 11.1. All documents related to IMS are kept in Share Point and employees are informed via email regarding the distribution of core documents such as, IMS Policy, IMS Manual, and IMS Core Procedures and related forms and other department documentation, which will be accessible via IMS Share Point portal. Authorized Departments are responsible for distributing the respective department documentation to concerned parties. Documents are controlled.
- 11.2. Compliance & EHS, authorized department members, respective Department Document Controllers, and GMs, will be provided relevant access to all IMS documentation as per respective Share Point workflow.
- 10.3. Records Retention period is for a minimum of five years unless required otherwise by Organizational need, Statutory or Regulatory requirements.

12. Change Log

Version No.	Document Creation, Review, Approval and Change Tracking	Actioned by (Name, Title, Department)	Action Date	Change Effective Date
V1.0	First version published			
V1.1	Added Airport working rules, Hyperlinks, SOP owner & approved by,	AG & NN		
V1.3	Added Abu Dhabi Airports Procurement and Contracts Manual link	RA		
V2.0	Change SOP Template and Version No.	MS	14/01/2015	15/01/2015
V3.0	Updated Purpose and Scope Amended of Abbreviation and Definition Amended Procedure Steps Update of Monitoring, Evaluation & Review Update of Potential Risk Update of Exceptions Update of Supporting Documentation and Tools Update of Filing & Distribution Update of Change Log	GG EU	03/08/2016	
V3.1	Updated Procedure Steps	EU	01/07/2017	01/12/2017

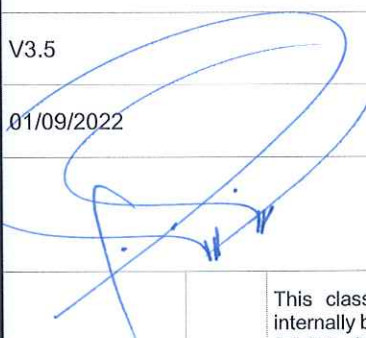
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	Update of Supporting Documentation and Tools Update of Version No. of Date						
V3.2	Update abbreviations & reviewed Update of Supporting Documentation and Tools Update of Version No. of Date	Abdul Aziz		26/02/2019			
V3.3	Update of Title Block Update of Definition and Abbreviations Update of Version No. and Date Update of Change Log Added Legal Requirements	MA		31/10/2019			
V4.0	SOP review Update abbreviations Monitoring, Evaluation and Review	AA MA		01/10/2021			
V4.1	Review and Update the SOP version date	FA		01/09/2022		01/09/2022	

N.B. This document is UNCONTROLLED unless signed by an authorized person in the appropriate section of this document or viewed in Workflo! on Abu Dhabi Airports Matari-Sharepoint.

STANDARD OPERATING PROCEDURE

Internal and External Communication

Emergency Services and Compliance

Business Process Area / Functional Area:	Abu Dhabi Airports
SOP Owner:	EHS & Sustainability
SOP Ref. No:	ADA/COR/SOP/005-V3.5-01/09/2022
Implementation Date:	01/11/2021
Approved By:	Aws Al Khanjari
Approval Date:	23 rd March 2023
Version No.:	V3.5
Version Date:	01/09/2022
Approver's Signature: (for non-electronic copies)	
Information Classification	Official use 02
This classification refers to information that is to be used internally by the Abu Dhabi Airports personnel only, and does not fall into the previous three categories. Although unauthorized disclosure of this information is prohibited, in the case that it occurs, it is expected that there will be no serious repercussions to Abu Dhabi Airports, shareholders, employees, business partners and /or clients.	

A Standard Operating Procedure (SOP) consists of a set of statements describing instructions in an orderly manner for the purpose of achieving a result. SOPs are developed to maximize the efficiency and accuracy of implementation of a policy or operational process.

Template Title:	SOP Template	Template Ref. No.:	TEM/03/SOP/V4.0/01072019	Version No.:	V4.0	Version Date:	01/07/2019
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SOP Title:	Internal and External Communication						
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1. Title

Internal and External Communication

2. Purpose

- 2.1. To ensure compliance with applicable regulatory and standards requirements.
- 2.2. To provide direction for achieving effective and open consultation and communication with employees, contractors, relevant stakeholders and encourage participation in the identification and implementation of the Integrated Management System (IMS).
- 2.3. This procedure outlines the consultative arrangements that are to be developed and implemented across all Abu Dhabi Airports workplaces to:
 - 2.3.1. Ensure that necessary quality assurance, occupational safety and health, environmental and aviation safety information is regularly communicated.
 - 2.3.2. Ensure that information required externally by regulatory and certification bodies is necessarily supplied.

3. Scope

- 3.1. The processes described apply to all employees on Abu Dhabi Airports premises including external regulatory bodies.

4. Definitions and Abbreviations

Definitions	Description
Communication	Any act by which one person gives to or receives from person information about that person's needs, desires, perceptions, knowledge, or affective states. Communication may be intentional or unintentional, may involve conventional or unconventional signals, any take linguistic or non-linguistic forms, and may occur through spoken or other modes.
Consultation	Requires that Abu Dhabi Airports seeks and consider the views of staff on IMS issues. It gives them an opportunity to have input into the final decisions that are made by management.
Department IMS Representatives	Nominated by departments to be responsible for following up of Aviation Safety, Quality, environment, health and safety issues in Abu Dhabi Airports and to gather input from fellow employees on how Environment, Health and Safety issues can be controlled.
IMS Steering Committee	It is a form of consultation where management and employee representatives discuss IMS issues and action controls. ▪ The role of the committee is to engage in consultation, monitoring, reviewing and evaluating the IMS Management System and procedures, and discuss issues that could affect the health, safety and welfare of Abu Dhabi Airports staff, contractors, visitors, and passengers.

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Preventive Action	It is pro-active and involves taking action before an incident occurs, by identifying a hazard and taking steps to prevent any incident which may result from the hazard
Abbreviations	Description
DMT	Department of Municipality and Transport
EHS	Environment, Health and Safety
OHSMS	Occupational Health and Safety Management System
HOD	Head of Department
IMS	Integrated Management System
MOM	Minutes of Meeting
ADPHC-SF	Abu Dhabi Public and Health Center - System Framework
QMS	Quality Management System
SAG	Safety Action Group
SMS	Safety Management System
SRB	Safety Review Board
SRC	Safety Review Committee

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5. Procedure Steps	Responsible Party
<pre> graph TD Start([Start]) --> IMS[IMS Issues] Input1[Audits; Investigations; Performance Measure; Objectives & Targets; Results of Inspections; Legal Requirements; Policies; Procedures; Guidelines; Bulletin; Work Instructions; Plans] --> Comm[Communicated to Internal & External Stakeholders] Input2[Memos; Intranet; E-mail; Correspondence; Training/ Lectures; Meetings; Campaign; Posters; Leaflets] --> Comm Comm --> End([End]) </pre>	▪ HOD ▪ EHS & Sustainability
5.1. General Under the legislative requirements, all employers are required to communicate and consult with their employees, so far as reasonably practicable, on matters that directly affect or are likely to affect the health and safety of staff. 5.1.1. Effective communication and consultation will lead to: ▪ Decisions that take into account a wider range of ideas about IMS issues in the workplace and how to address these issues. ▪ Stronger commitment to decisions because everyone is involved in reaching them. ▪ Respect and trust because there is a better understanding of the IMS issues and of each other's point of view. ▪ Identification of risks arising from the workplace which will be transferred into the risk register 5.1.2. Stakeholders can access relevant IMS information through but not limited to: ▪ Accessing online resources. ▪ Discussion with supervisors, IMS representatives and/or committee members. ▪ Communication with Airport Operations ▪ Attending meetings ▪ Reading communications.	▪ HOD
5.2. Communication 5.2.1. Information is accessible through forums such as IMS resources and consultation mechanisms including:	

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- Abu Dhabi Airports Intranet Site - IMS Performance measures - Management Committee meeting minutes - Incident reports - Internal and external IMS training programs (GCAS) - Material Safety data Sheets (MSDS)		- IMS Section - Procurement Department / EHS - EHS Section - Contractor Project Managers Representatives
5.2.2.	Management decision to communicate significant environmental impacts is taken during the management review meeting process and will be communicated. Information may also be made available through: - Notice boards - Posters - Leaflets - Meetings and toolbox talks - Newsletters - Cascaded in Management meetings - Signage - Permit to Work conditions when applicable	
5.2.3.	Ensure that all IMS information is made available and disseminated to staff, contractors, sub-contractors and airport tenants which includes: - Identified EHS risks and controls; - Results of incidents that may have an impact on environmental, health and safety; - Minutes of IMS Steering Committee, SAG, SRB & SRC meetings; - Processes that enable safe work practices in the department; - Information on EHS, QMS and SMS; - Legal and other requirements, if applicable; - Department IMS management plans; and - Reported parameters as indicated by the IMS representatives.	
5.2.4.	Provide assists to department managers in audit preparations, finding closures, documents reviewed and updated when required.	
5.2.5.	Maintain appropriate records.	
5.2.6.	Develop and implement procurement procedures to ensure that IMS (which consist of EHS, QMS and SMS), are accounted for in the selection of products and/or services.	
5.2.7.	Liaise and consult with management on EHS, QMS and SMS aspects of product procurement.	
5.2.8.	Maintain appropriate records.	
5.2.9.	DMT communications will be established through progress meetings or Al Adaa Software that will be called for when necessary and through performance reporting on a quarterly basis.	
5.2.10.	The following but not limited to must be done during implementation of change management: - Provision of information regarding workplace changes. - Organize and attend EHS review and sign-off meetings. - Incorporating issues into building plans as agreed at EHS review meetings. - Ensure the general public, staff, visitors and passengers safety precautions are addressed during construction and/or renovation works.	

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- Ensure that the primary contractor has successfully completed the contractor induction process prior to commencing work. - Maintain communication with the contractor, providing job supervision and the review of safety performance. - Ensure that safe premises are provided for contractors carrying out their work.		
5.3. Consultation Consultation will be undertaken to ensure that all employees are provided with an opportunity to participate in the development of practices, procedures, plans relating to Aviation Safety, Quality, Environment Protection, and Occupational Health and Safety at work. 5.3.1. Consultation is required: - When identifying hazards and risks and deciding how to control risks - When making decisions regarding facilities related to welfare like toilets, first aid - During development of IMS policies and procedures - Determining the membership of any IMS committees. 5.3.2. When changes are proposed to: - Workplace, example, new buildings, alterations to existing buildings, renovations, maintenance, repairs and minor modifications - Machinery/equipment, substances, processes and other things used in the workplace - Any activity performed that may affect the health and safety of staff and the environment. 5.3.3. Consultation shall be facilitated through the following arrangements - Employee representation on department IMS representative - IMS Steering Committee - Department Management Committee - Staff meetings - Local consultation facilitated by supervisors and managers 5.3.4. Consultation with employees must involve - Sharing of information about environment, health and safety matter - Providing a reasonable opportunity to express view about IMS matters, and taking into account views prior to making a decision.		- HOD - EHS & Sustainability
5.4. Suggestions & Feedback 5.4.1. Employees at all levels are encouraged to report suggestions and feedback related to the IMS. Record all feedback received from staff. 5.4.2. Received feedback should be assessed and should prompt initiatives to generate continual improvement of the Integrated Management System.		IMS Section
6. Monitoring, Evaluation and Review		
6.1. Monitoring, evaluation and review of this procedure shall be carried out as per ADAC Document Management SOP requirements, as the need arises or as required by regulatory and/or certification bodies. 6.2. The effectiveness of this procedure is carried out on an ongoing basis through management reviews, audits and informal discussions.		

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- 6.3. Implementation of this procedure is reviewed during the conduct of internal audit and is subject to third party audit.
- 6.4. The procedure review is the responsibility of Senior Manager Compliance and relevant departments.
- 6.5. The process owner or department management has the responsibility of preparing department procedure/s by involving relevant stakeholders as needed.
- 6.6. The approval of department procedures is the responsibility of the HOD / Department GM.
- 6.7. Referencing of the department procedures is the responsibility of the respective department based on the IMS referencing guidelines.
- 6.8. Implementation and changes capturing document change management is the responsibility of the process owner or department management with review from compliance, with the exception of relevant departments.
- 6.9. Department management shall ensure the updated process is released as per document management CORE SOP.

7. Potential Risks

Risk	Control Measure
7.1. None communication of required information to relevant stakeholders.	- Department Management to ensure that required information (ie. Policy statements; objectives and targets; etc.) are communicated to relevant stakeholders. - Meetings are documented and MOM's are communicated. - Invitation to management review meetings extended to relevant staff as needed.
7.2. None consultation of relevant staff in the development of procedures, policies and plans.	

8. Exceptions

Not Applicable

9. Legal Requirements

This section is to specify what Laws, Regulations, standards or guidelines the department deal with in this SOP. If not applicable, to mention N/A in this section.

10. Supporting Documentation and Tools

10.1. References

- Abu Dhabi Occupational Safety & Health (ADPHC-SF) Manual,
- Abu Dhabi Occupational Safety & Health (ADPHC-SF) Element 4
- ISO 9001:2015: Quality Management System

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- ISO 14001: 2015 Environmental Management System
- ISO 45001:2018 –Occupational Health and Safety Management System

11. Filing and Distribution

- 11.1. All documents related to the IMS are kept in MATARI – IMS CORE SOPs and employees are informed via email regarding the distribution of core documents such as, IMS Policy, IMS Manual, and IMS Core Procedures and related forms and other department documentation, which will be accessible via MATARI – IMS CORE SOPs portal. Authorized Departments are responsible for distributing the respective department documentation to concerned parties. Documents are controlled.
- 11.2. Compliance & EHS, authorized department members, respective Department Document Controllers, and GMs, will be provided relevant access to all IMS documentation as per respective SharePoint workflows.
- 11.3. Records retention period is for a minimum of five years unless required otherwise by Organizational need, Statutory or Regulatory requirements.

12. Change Log

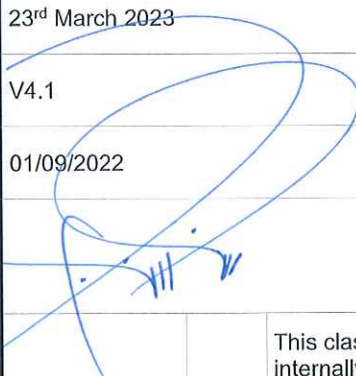
Version No.	Document Creation, Review, Approval and Change Tracking	Actioned by (Name, Title, Department)	Action Date	Change Effective Date
V1.0	First version published			
V1.1	Additional of management decision to communicate significant environmental aspects			
V2.0	Change Template and Version No and responsibility as per the current structure.	MS	14/01/2015	15/01/2015
V3.0	Update Version No. Update of Definitions and Abbreviations Update of Procedure Steps Update of Monitoring, Evaluation and Review Update of Potential Risk Update of Supporting Documentation & Tools Update of Filing & Distribution Update of Change Log	ON AA AN MS GG EU	07/09/2016	01/12/2016
V3.1	Update of Version Number & Date Update of Supporting Documentation & Tools	EU	23/11/2017	01/12/2017
V3.2	Update of Version Number & Date	MA	07/04/2019	

SOP Title:	Internal and External Communication						
SOP Ref. No.:	ADA/COR/SOP/005	Version No.:	V3.5	Version Date:	01/11/2021	Page:	10/10
	Update of Supporting Documentation & Tools Update Abbreviations						
V3.3	Change SOP Owner Updated Definition & Abbreviation Update No. 9 Update of Monitoring Evaluation and Review Update of Potential Risks Adding legal requirements	MA, EU		01/07/2019			
V3.4	Replacing 18001 with 45001:2018 and version number Updated Definition Remove induction programs in 5.2	AA MA		1/11/2021			
V3.5	SOP Review and version date updated	FA		01/09/2022		01/09/2022	

N.B. This document is UNCONTROLLED unless signed by an authorized person in the appropriate section of this document or viewed in Workflo! on Abu Dhabi Airports Matari-Sharepoint.

STANDARD OPERATING PROCEDURE

Training, Awareness and Competency Emergency Services and Compliance

Business Process Area / Functional Area:	Abu Dhabi Airports		
SOP Owner:	EHS & Sustainability		
SOP Ref. No:	ADA/COR/SOP/010/V4.1-01/09/2022		
Implementation Date:	01/11/2021		
Approved By:	Aws Al Khanjari		
Approval Date:	23 rd March 2023		
Version No.:	V4.1		
Version Date:	01/09/2022		
Approver's Signature: (for non-electronic copies)			
Information Classification	Official use	02	This classification refers to information that is to be used internally by the Abu Dhabi Airports personnel only , and does not fall into the previous three categories. Although unauthorized disclosure of this information is prohibited, in the case that it occurs, it is expected that there will be no serious repercussions to Abu Dhabi Airports, shareholders, employees, business partners and /or clients.

A Standard Operating Procedure (SOP) consists of a set of statements describing instructions in an orderly manner for the purpose of achieving a result. SOPs are developed to maximize the efficiency and accuracy of implementation of a policy or operational process.

All information contained in this document is proprietary to Abu Dhabi Airports and shall not be duplicated in any manner or released in part or full to any unauthorized persons. However, the contents of this document are not confidential and shall be accessible to all Abu Dhabi Airports employees and its subsidiaries.

SOP Title:	Training, Awareness and Competency						
SOP Ref. No.:	ADA/COR/SOP/032	Version No.:	V4.1	Version Date:	01/11/2021	Page:	3/12

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SOP Title:	Training, Awareness and Competency						
SOP Ref. No.:	ADA/COR/SOP/032	Version No.:	V4.1	Version Date:	01/11/2021	Page:	4/12

1. Title

Training, Awareness and Competency.

2. Purpose

- 2.1. To ensure compliance with applicable regulatory and standard requirements.
- 2.2. To describe Abu Dhabi Airports requirements for allocating appropriate resources and for ensuring and increasing IMS related training, awareness and competence of Abu Dhabi Airports employees and relevant Contracted Staff.

The purpose of this procedure are:

- To develop an IMS training curriculum that addresses pertinent regulatory requirements and best practices.
- To assist line managers, instructors, and subject matter experts in the development of course objectives, instructional strategies and the evaluation of IMS-related training programs.
- To provide appropriate document systems to record all IMS – related training courses.
- To establish and implement IMS training procedures and policies.
- To ensure continuous program improvement of all aspects of the IMS training program.

3. Scope

- 3.1. This procedure applies to all Abu Dhabi Airport organizations.
- 3.2. The requirements of this standard are applicable to all IMS – related training.

4. Definitions and Abbreviations

Definition	Description
Competence (competent person)	The ability to perform a particular job in compliance with performance standards; in possession of required skill, knowledge, qualification and/or capacity.
Contractor	A person, organization, their employees or a nominated representative engaged to carry out work for the nominated entity in a contract for service arrangement.
Induction	The process of which new employees are introduced to a workplace and its policies and processes.
Role Profile	A description of a particular work function that includes the elements deemed necessary to perform the post effectively.
Training	Organized activity aimed at imparting information and/or instructions to improve the recipient's performance or to help him or her attain a required level of knowledge or skill.

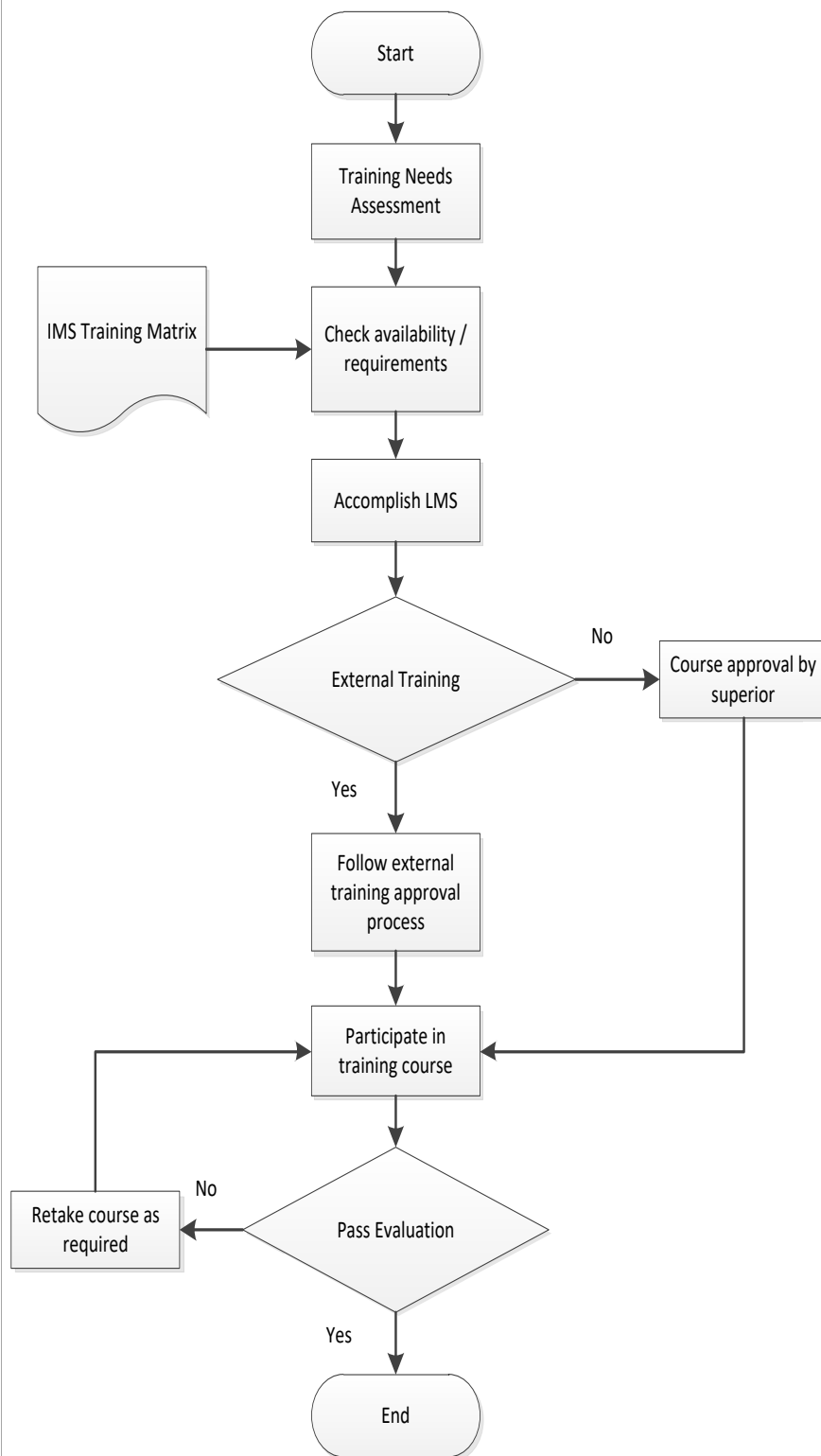
SOP Title:	Training, Awareness and Competency						
SOP Ref. No.:	ADA/COR/SOP/032	Version No.:	V4.1	Version Date:	01/11/2021	Page:	5/12

Training Needs Assessment	Is a training evaluation based on the Company's scope, activities, legal and other requirements, assessment and training requirements, derived from the organization's current and anticipated operational control.
Abbreviations	Description
ADA	Abu Dhabi Airports
CPD	Continuous Professional Development
EHS	Environment, Health and Safety
GCAA	General Civil Aviation Authority
GCAS	Gulf Center for Aviation Studies
HOD	Head of Department
HR	Human Resource
IMS	Integrated Management System
LMS	Learning Management System
ADPHC	Abu Dhabi Public & Health Center
TNA	Training Needs Analysis

SOP Title:	Training, Awareness and Competency					
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5. Procedure Steps

Responsible Party



- HOD
- Contractor

5.1. General 5.1.1. Abu Dhabi Airports' employees are selected, trained and evaluated to ensure that those personnel performing work are competent on the basis of the following: ▪ Education ▪ Training ▪ Skills ▪ Experience 5.1.2. Job requirements have been developed for each position affecting quality, environment, occupational health and safety, and aviation safety and documented in personnel Role Profile. These define desired minimum requirements for each position, including four criteria listed above.	
5.2. Identify Training Required Appropriate training shall be provided to ensure that an employee is competent to do his job safely ▪ Use of LMS through the Matari to identify generic and risk specific training competencies. ▪ Task specific training competencies shall be identified by needs analysis, safe work procedures, legislative requirements and incident trend.	▪ HOD ▪ Contractor
5.3. Induction Training 5.3.1. New joiners shall undergo the course in coordination with GCAS. 5.3.2. Ensure that induction training for new employees will commence within the first week of employment so that employees become familiar with the basic procedures at their place of work. Where this is not possible, induction training will take place as soon as possible after the employee has started work.	▪ HOD ▪ Contractor
5.4. IMS Training Sessions 5.4.1. Employee IMS training sessions shall be scheduled in coordination with the IMS Section and GCAS. 5.4.2. Attendance is mandatory unless excused by the immediate superior. 5.4.3. IMS training sessions shall occur at a frequency that ensures all initial and refresher courses are performed in a timely manner as regards to employee work related responsibilities. 5.4.4. Attendees shall sign and date the IMS training registration sheet to acknowledge and document they understood the contents of the training session.	▪ HOD ▪ Contractor
5.5. Training Needs Assessment 5.5.1. Based on the department's activities, regulatory and other requirements, assessment and training requirements.	▪ HOD ▪ Contractor

5.5.2. Reviewed at least annually and updated to reflect changes in the workplace, activities, equipment, processes or procedures. 5.5.3. Appropriate for the intended audience and adequately address the department levels, risks, aptitude, literacy and language skills. 5.5.4. Identify expected competency level and implement methods to assess competency as a result of training. 5.5.5. The following minimum requirements must be met when undertaking a training needs analysis: ▪ EHS/SMS Policy and Management System training ▪ Competency requirements for identified roles or tasks ▪ Risk management requirements ▪ Requirements of relevant operational control procedures ▪ IMS/EHS/SMS roles and responsibilities ▪ Emergency response ▪ Subject specific training (ie. Manual handling, Safety in the Heat, etc. ▪ Task specific training (ie. Confined space, working at heights, etc.) 5.5.6. Newly identified competencies are to be incorporated in the IMS Training and Competency Matrix. Note: Training courses shall be risk-based and shall consider requirements of all employees, contractors, visitors and relevant stakeholders.	
5.6. Specialized Task-Specific Training 5.6.1. Specialized training will be identified within each department to ensure all operations are carried out safely and efficiently (ie. emergency warden, first aider, internal auditing, airside driving, risk assessment, etc.).	▪ HOD ▪ Contractor
5.7. Refresher Training 5.7.1. Refresher training courses are to be conducted based on regulatory requirements (ie. first aid, emergency response, etc.). 5.7.2. Other training courses that do not legally require refreshing at set time periods, should be refreshed as and when felt appropriate by the line manager. This may be prompted by the following issues: ▪ General health and safety concerns ▪ Risk assessment process ▪ Result of an incident	▪ HOD ▪ Contractor
5.8. Continuous Professional Development (CPD) 5.8.1. CPD training courses should be undertaken in agreement with department management, and must be arranged by the staff requiring it. 5.8.2. Funding for this type of training may be provided, where department management feels it appropriate to enable the staff to satisfy job and legal requirements (ie. ADPHC, GCAA, etc.)	▪ HOD

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5.9. Documentation / Records		
5.9.1. All training records are to be maintained in the employee training file kept in each Department / Subsidiary. Such records should indicate the following:	▪ Type of training ▪ Method of training ▪ Duration of training ▪ Date of completion ▪ Location ▪ Instructor	▪ HOD ▪ GCAS ▪ Contractor
5.9.2. Personnel undergoing third party training on their own initiative shall inform respective Department / Subsidiary management to update training records.		
5.9.3. Issued training certificates should be held by the individual attendees.		
5.10. Assessment of Competence		
5.10.1. In order to determine whether the skill or knowledge gap has been successfully attained, assessment of competence is required to be undertaken after completion of training.		▪ HOD ▪ Contractor
5.11. Contractors / Service Providers		
5.11.1. Long term contractors not provided with training by their own employers should be treated as ADA's employee and shall receive training relevant to their role.		▪ Contractor
5.11.2. Training courses will be provided by competent persons either in house or through the use of external consultants and/or service providers as required.		

6. Monitoring, Evaluation and Review

6.1. This procedure shall be reviewed and updated as per ADAC Document Management requirements or as the need arises depending on changes to regulatory requirements, processes or effectiveness of the training program.

6.2. Training programs shall be reviewed and updated to reflect on changes to the workplace, activities, equipment, processes or procedures.

Program Evaluation

- The program will be reviewed every year In order to ensure applicability to Abu Dhabi Airports and subsidiaries.

Conditions which might warrant a review of this procedure on a more frequent basis would include:

- Reported hazards and injuries
- Non-conformances based on audits, inspections
- IMS Steering Committee.

Following the completion of any review, the training program will be revised and updated in order to correct any deficiencies.

Changes will be communicated to Department and Subsidiaries IMS Representatives and Management Review Committees.

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6.3. Monitoring and Evaluation of Competency

- It is necessary to have a systematic means of recording the observation of the trainee's skills. For task specific training, this is most commonly achieved by a simple yes or no checklist of the required skill.
- The level of competency may be deemed to be inappropriate where evidence indicates there has been deterioration in the level of competency which includes:
 - Failure to safely use and operate equipment
 - Occurrence of an incident resulting from the person performing the task
 - Holding an expired certification or license
 - Task and process or equipment has been change and requires all persons to demonstrate their competency.

As such, the person or staff may be deemed not competent until competency can be demonstrated through the process of reassessment.

7. Potential Risks

Risk	Control Measure
7.1. Failure to provide adequate levels of suitable training and competency.	▪ Annual update and implementation of TNA. ▪ Department Management to ensure department staff and contractors are provided with appropriate training.

8. Exceptions

This procedure does not include the following processes:

- 8.1. Airport Tenants training program.
- 8.2. Contractor training program.
- 8.3. Aviation related training program.

9. Legal Requirements

This section is to specify what Laws, Regulations, standards or guidelines the department deal with in this SOP. If not applicable, to mention N/A in this section.

10. Supporting Documentation and Tools

10.1 References:

- Abi Dhabi Occupational Safety & Health
- Abu Dhabi Occupational Safety and Health – System Framework (ADPHC-SF) Management System Elements; Element 5 – Training, Awareness and Competency
- ISO 14001:2015 Environmental Management System
- ISO 45001:2018 Occupational Health & Safety Management System
- ADAC Employee Handbook – HR Policy - Chapter 7: Training & Development

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- Standard Operating Procedure – Training Programmes / GCAS
- GCAA CAR's (As Applicable)

10.2 Forms

- Training Attendance Form
- Training Feedback Form
- Training Matrix

11. Filing and Distribution

- 11.1 Training records shall be maintained as evidence of training delivery and assessment of competence. Maintenance of records shall be kept in accordance with confidentiality requirements.
- System for Training Assessment and Records:
 - All IMS training records must be documented and copies shall be retained in their respective Departments and Subsidiaries for a period of three years.
 - HR and Department management and Subsidiaries are responsible to maintain and update employee training records.
 - Documentation of the training needs assessment shall include:
 - Names of those who conducted the assessment
 - Date of assessment
 - IMS Training programs or matrix shall be documented.

12 Change Log

Version No.	Document Creation, Review, Approval and Change Tracking	Actioned by (Name, Title, Department)	Action Date	Change Effective Date
V1.0	First version published			
V1.1	Editorial Change Added Forms	RA		
V2.0	Change Template and Version No and responsibility as per the current structure.	MS	14/01/2015	15/01/2015
V3.0	Change Template and Version Number Amend Purpose / Scope Update of Definition / Abbreviation Amend Procedure Steps Updated Monitoring, Evaluation & Review Updated Potential Risk Updated Supporting Documentation & Tools Updated Change Log	ON AA AN MS GG EU	07/09/2016	

STANDARD OPERATING PROCEDURE

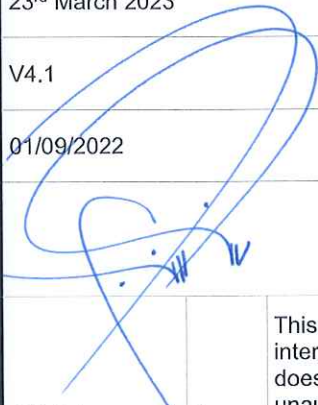
SOP Title:	Training, Awareness and Competency					
SOP Ref. No.:	ADA/COR/SOP/032	Version No.:	V4.1	Version Date:	01/11/2021	Page: 12/12
V3.1	Update Version Number and Date Updated Supporting Documentation & Tools	EU		27/08/2017	01/12/2017	
V3.2	Included CPD in the Abbreviations Changed ref. ADPHC SF Glossary of Terms V3.0 July 2016 to V3.1 March 2019	MA		08/04/2019		
V3.3	Update Title Page Update of Purpose Update Definition and abbreviations Updating of Procedure Steps Update Supporting Documentation and Tools Change SOP Owner Added Legal requirements	MA EU		01/07/2019		
V4.0	Replacing 18001 with 45001:2018 and version number SOP Review	MA		1/11/2021		
V4.1	SOP Review and change version date	FA		01/09/2022	01/09/2022	

N.B. This document is UNCONTROLLED unless signed by an authorized person in the appropriate section of this document or viewed in Workflo! on Abu Dhabi Airports Matari-Sharepoint.

STANDARD OPERATING PROCEDURE

Emergency Preparedness and Response

Emergency Services and Compliance

Business Process Area / Functional Area:	Abu Dhabi Airports
SOP Owner:	EHS & Sustainability
SOP Ref. No:	ADA/COR/SOP/016-V4.1-01/09/2022
Implementation Date:	31/10/2021
Approved By:	Aws Al Khanjari
Approval Date:	23 rd March 2023
Version No.:	V4.1
Version Date:	01/09/2022
Approver's Signature: (for non-electronic copies)	
Information Classification	Official use 2 This classification refers to information that is to be used internally by the Abu Dhabi Airports personnel only, and does not fall into the previous three categories. Although unauthorized disclosure of this information is prohibited, in the case that it occurs, it is expected that there will be no serious repercussions to Abu Dhabi Airports, shareholders, employees, business partners and/or clients.

A Standard Operating Procedure (SOP) consists of a set of statements describing instructions in an orderly manner for the purpose of achieving a result. SOPs are developed to maximize the efficiency and accuracy of implementation of a policy or operational process.

Template Title:	SOP Template	Template Ref. No.:	TEM/03/SOP/ V4.0/0107201 9	Version No.:	V4.0	Version Date:	01/07/2019
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SOP Title:	Emergency Preparedness and Response						
SOP Ref. No.:	ADA/COR/SOP/016	Version No.:	V4.1	Version Date:	31/10/2021	Page:	3/10

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8. Exception	7
9. Legal Requirements	7
10. Supporting Documents and Tools	7
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SOP Title:	Emergency Preparedness and Response						
SOP Ref. No.:	ADA/COR/SOP/016	Version No.:	V4.1	Version Date:	31/10/2021	Page:	4/10

1. Title

Emergency Preparedness and Response

2. Purpose

- 2.1. To ensure compliance with applicable regulatory and standard requirements.
- 2.2. To provide a system for identifying potential environmental, occupational safety and health incidents and emergency situations, and for developing appropriate emergency response plans.
- 2.3. To establish and maintain a system for carrying out emergency preparedness and response actions within the premises of the Abu Dhabi Airports and areas of its operations, with the aim of minimizing the impacts of emergency situations on the environment, including occupational health and safety risks to employees, contractors, general public and interested parties.

3. Scope

- 3.1. Applicable to all emergency situations which could have significant impacts to Abu Dhabi Airports operations.
- 3.2. This procedure applies to all activities and areas in Abu Dhabi Airports premises that may cause, or be exposed to, uncontrolled releases of hazardous substances, fire, explosion, contamination, and other such emergencies caused by incidents or natural disasters.
- 3.3. It is intended to cover, but not limited to:
 - Fatality or significant injuries to staff, contractors and the general public.
 - Disruption of operations, cause physical or environmental damage.
 - Affect the Abu Dhabi Airports financial standing or public image.

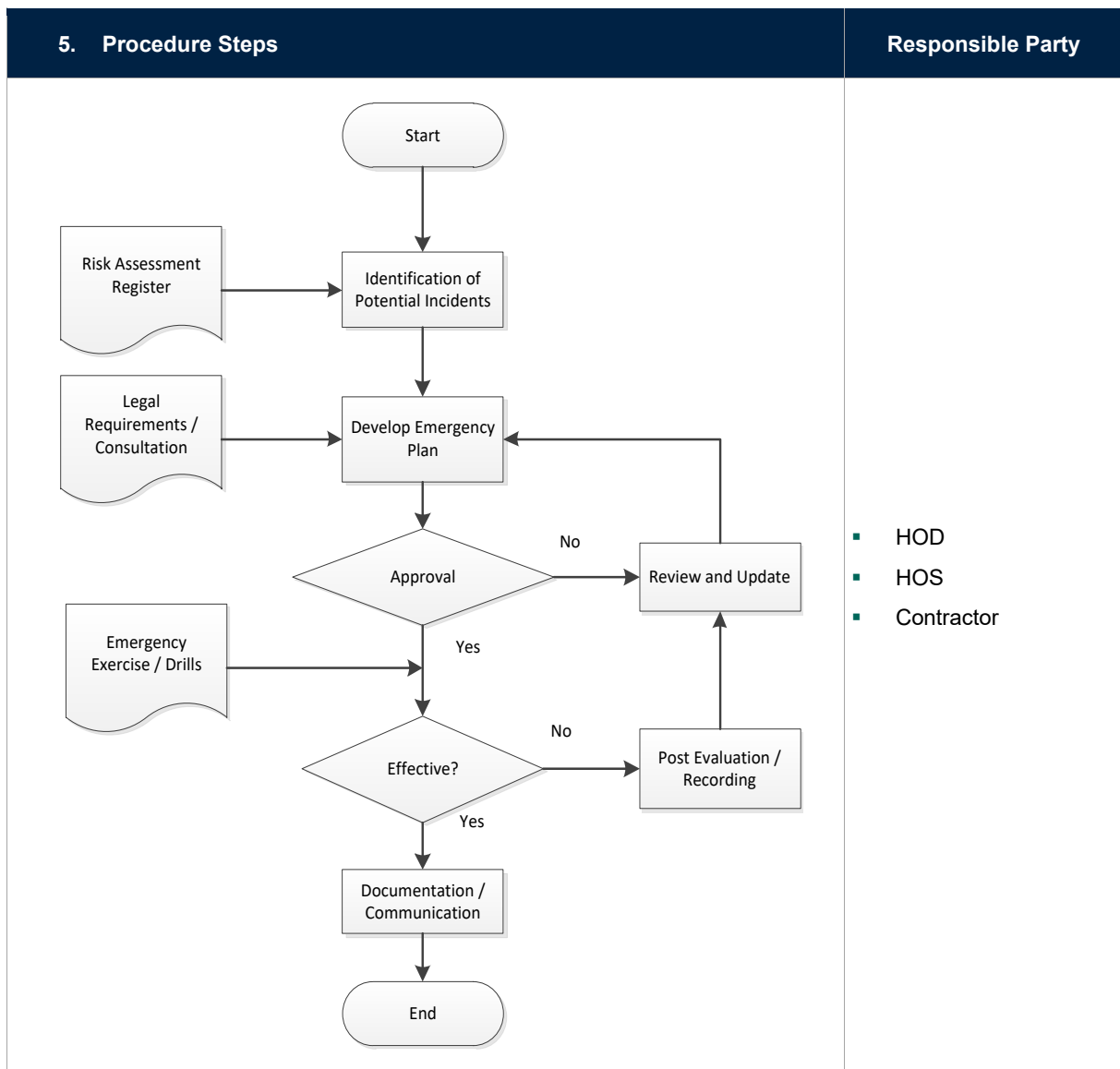
4. Definitions and Abbreviations

Definition	Description
Competent	Having adequate and sufficient training, qualifications and/or experience (or a combination) to be capable of carrying out a task safely and efficiently.
Contractor	A person, organization, their employees or a nominated representative engaged to carry out work for the nominated entity in a contract for service arrangement.
Emergency	A sudden, urgent, usually unexpected occurrence or occasion requiring immediate action.
Emergency Plan	Systematic instructions and procedures that clearly detail what needs to be done, how, when and by whom before and after the time an anticipated emergency event occurs.
Hazard	Any substance, physical effect, or condition with potential to harm people, or property.

STANDARD OPERATING PROCEDURE

SOP Title:	Emergency Preparedness and Response						
SOP Ref. No.:	ADA/COR/SOP/016	Version No.:	V4.1	Version Date:	31/10/2021	Page:	5/10

Abbreviations	Description
ADA	Abu Dhabi Airports
AEP	Airport Emergency Plan
DMT	Department of the Municipality & Transport
ADPHC	Abu Dhabi Public Health Center
HOD	Head of Department
HOS	Head of Section



5.1. General Abu Dhabi Airports will ensure that it has a documented emergency management plan that is maintained and regularly tested as part of a process of continuous improvement. This procedure does not provide specific plans or response instructions for any particular type of emergency. The actual emergency procedures and instructions are referenced in the Airport Emergency Plan manuals and the Abu Dhabi Airports Evacuation Procedure Guidelines. Emergency situations will be responded to as prescribed in the AEP and/or Evacuation Procedures Guidelines.	
5.2. Identification of Potential Incidents 5.2.1. Identify potential incidents and emergency situations arising from EHS risk assessment associated with department activities, operations and processes, including the means to eliminate, control and minimized the hazards and risk associated with it. 5.2.2. Emergency response plans are identified based on potential hazards. 5.2.3. Hazards that may be caused by natural disasters and by external forces must be identified and evaluated. 5.2.4. Verify if emergency response plan comply with applicable legal requirements. If not, the plans are updated to achieve compliance.	▪ HOD ▪ HOS ▪ Contractor
5.3. Documentation & Communication 5.3.1. Emergency response plans shall be documented and communicated to all. 5.3.2. Emergency contact numbers should be identified, listed in the emergency preparedness plan, and posted. 5.3.3. Responsibilities in case of emergencies should be clearly defined for management and employees. 5.3.4. A chain of command should be established to minimize confusion. 5.3.5. An evacuation plan shall be posted in strategic locations for the general awareness of all. The plan should show instructions, evacuation routes, closest exits, and location of emergency equipment. Employees and general public should follow these instructions and be familiar with the evacuation plan.	▪ HOD ▪ HOS ▪ Contractor
5.4. Reporting 5.4.1. All occurrences, emergency situations and incidents shall be communicated immediately to the EHS Section through EHSreporting@adac.ae following the required process in the Hazard / Incident Reporting & Investigation CORE SOP.	▪ HOD ▪ HOS ▪ Contractor
5.5. Emergency Exercise 5.5.1. Coordinate with relevant departments and implement emergency exercise in their areas of responsibilities. 5.5.2. Periodic emergency exercises shall cover potential incidents identified.	▪ HOD ▪ HOS ▪ Contractor
5.6. Development of Emergency Response Plan	

SOP Title:	Emergency Preparedness and Response						
SOP Ref. No.:	ADA/COR/SOP/016	Version No.:	V4.1	Version Date:	31/10/2021	Page:	7/10

5.6.1. Depending on the nature and extent of the potential emergency, development of emergency preparedness and response plans may require preparatory studies and gathering of information about such issues as: ▪ Affected media (ie. Ground, water, air) ▪ Dispersion pattern and rate (ie. Wind direction, drainage pattern, surface / underground water, etc.) ▪ Release containment and mitigation techniques and equipment. ▪ Environmentally sensitive features (ie. Wetlands, habitat, endangered species, residential, etc.) ▪ Communicable Diseases (i.e., MERS, SARS, Covid - 19, etc.) 5.6.2. Emergency Response plans may include but not limited to the following elements: ▪ Designation of authority ▪ Training of personnel ▪ Personal protection equipment ▪ Communication systems and equipment ▪ Evacuation plans and procedures ▪ External assistance and other resources ▪ Notification and reporting	▪ HOD ▪ HOS ▪ Contractor
5.7. Training and Awareness 5.7.1. Ensure that employees are capable of undertaking roles and responsibilities assigned within the emergency response plan. 5.7.2. Emergency response plan are to be part of the employee / contractor induction program. 5.7.3. Designated employees to carry out specific roles and responsibilities in emergency response plans shall be trained to a level appropriate to accomplish out their roles and responsibilities in a safe, proficient and expedient manner. 5.7.4. Contractors, Sub-contractors, Airport Tenants and the General public are to be aware of the airport emergency plan through posted signages and instructions.	▪ HOD ▪ HOS ▪ Contractor
5.8. Monitoring & Inspection 5.8.1. Emergency equipment provided, deployed are in good working condition and accessible in strategic areas, where potential emergencies identified could potentially occur.	▪ HOD ▪ HOS ▪ Contractor

6. Monitoring, Evaluation and Review

- 6.1. Emergency procedures are reviewed and revised as necessary after each occurrence of incidents and/or emergencies.
- 6.2. Heads of Departments and Subsidiaries are responsible for notifying relevant departments of any changes in their departments or subsidiaries that would create new potential hazards.
- 6.3. Response practice drills may be required to enable an evaluation of the efficacy of all Response Procedures. This will be carried out with full liaison between departments and emergency responders as appropriate to the drill.
- 6.4. Contractors, airport tenants and airlines are responsible for ensuring that respective staff is aware of airport emergency response process.

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7. Potential Risks

Risk	Control Measure
7.1. Staff is not aware of their roles and responsibilities in the notification, reporting and response to entity emergency response plans.	- Emergency response plans to be part of employee / contractor induction training. - Designated staff to undergo periodic emergency response plan training. - Uploading of emergency response plans in the Abu Dhabi Airports intranet. - Posting of emergency numbers and instructions in conspicuous areas.
7.2. Inadequate and inappropriate resources.	- Conduct of periodic emergency drills and exercises and carry out post emergency drill assessment. - Robust risk assessment process to identify potential emergency incidents and appropriate resources. - Provision of adequate budget. - Periodic inspection / maintenance of emergency response equipment.

8. Exceptions

Not applicable

9. Legal Requirements

This section is to specify what Laws, Regulations, standards or guidelines the department deal with in this SOP. ADPHC, DMT, Abu Dhabi Airports Evacuation Procedure Guidelines & Abu Dhabi Airports Emergency Plans Abu Dhabi International Airport for all Airports.

10. Supporting Documentation and Tools

10.1. References

- Abu Dhabi Airports Emergency Plans
 - Abu Dhabi International Airport
 - Al Ain International Airport
 - Al Bateen Executive Airport
 - Delma Airport
 - Sir Baniyas Airport
- Abu Dhabi Airports Evacuation Procedure Guidelines
- Abu Dhabi Occupational Safety & Health (OSHAD-SF) Manual
- Abu Dhabi Occupational Safety & Health (OSHAD-SF) Element 6
- ISO 14001: 2004 – Environmental Management System
- OSHAS 45001:2018 – Occupational Health & Safety Assessment Series
- Fuel and Oil Spillage CORE SOP
- AEP Communicable Disease Control

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11. Filing and Distribution

11.1. Emergency response plans are maintained in electronic format and uploaded in the ADA Intranet.

12. Change Log

Version No.	Document Creation, Review, Approval and Change Tracking	Actioned by (Name, Title, Department)	Action Date	Change Effective Date
V1.0	First version published			
V1.1	Additional Monitoring Evaluation and Review	AG		
V2.0	Change Template and Version No and responsibility as per the current structure	MS	14/01/2015	15/01/2015
V3.0	Updated Version No. Updated Purpose & Scope Amended Definitions and Abbreviations Updated Procedures Steps Added Potential Risks Added Exceptions Updated Supporting Documentation and Tools Amended Filing and Distribution Updated Change Log	OA AA AN MS GG EU	13/07/2016	01/12/2016
V3.1	Updated Version & Date Updated Supporting Documentation & Tools	EU	25/09/2017	01/12/2017
V3.2	Update and Amended Definitions and Abbreviations Updated Supporting Documentation & Tools	HA MA	01/05/2019	
V3.3	Amended CORE SOP Owner Update of Version No. and Date Update of Purpose	MA	01/07/2019	

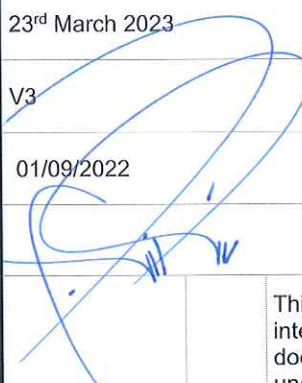
SOP Title:	Emergency Preparedness and Response						
SOP Ref. No.:	ADA/COR/SOP/016	Version No.:	V4.1	Version Date:	31/10/2021	Page:	10/10

	Update of Definition and Abbreviation Update of Supporting Documents and Tools Update of Change Log Added Legal Requirements			
V3.4	Replacing 18001 with 45001:2018 and version number	MA	1/2/2021	
V4.	Replacing the DOT with DMT Replacing the OSHAD with ADPHC	AO	31/10/2021	
V4.1	SOP Review and change version date	FA	01/09/2022	01/09/2022

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STANDARD OPERATING PROCEDURE

Objectives, Targets and Management Plans Emergency Services and Compliance

Business Process Area / Functional Area:	Abu Dhabi Airports
SOP Owner:	EHS and Sustainability
SOP Ref. No:	ADA/COR/SOP/008-V3.-01/09/2022
Implementation Date:	01/11/2021
Approved By:	Aws Al Khanjari
Approval Date:	23 rd March 2023
Version No.:	V3
Version Date:	01/09/2022
Approver's Signature: (for non-electronic copies)	
Information Classification	Official use 2
This classification refers to information that is to be used internally by the Abu Dhabi Airports personnel only, and does not fall into the previous three categories. Although unauthorized disclosure of this information is prohibited, in the case that it occurs, it is expected that there will be no serious repercussions to Abu Dhabi Airports, shareholders, employees, business partners and/or clients.	

A Standard Operating Procedure (SOP) consists of a set of statements describing instructions in an orderly manner for the purpose of achieving a result. SOPs are developed to maximize the efficiency and accuracy of implementation of a policy or operational process.

Template Title:	SOP Template	Template Ref. No.:	TEM/03/SOP/V 4.0/01072019	Version No.:	V3	Version Date:	01/11/2021
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All information contained in this document is proprietary to Abu Dhabi Airports and shall not be duplicated in any manner or released in part or full to any unauthorized persons. However, the contents of this document are not confidential and shall be accessible to all Abu Dhabi Airports employees and its subsidiaries.

SOP Title:	Objectives, Targets and Management Plans						
SOP Ref. No.:	ADA/COR/SOP/008	Version No.:	V3	Version Date:	01/11/2022	Page:	2/8

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1. Title

Objectives, Targets and Management Plans

2. Purpose

- 2.1. To ensure compliance with applicable regulatory and standard requirements.
- 2.2. The purpose of this procedure is to establish practices associated for implementing and maintaining IMS management plans based on objectives, targets and key performance indicators for each functional level within Abu Dhabi Airports

3. Scope

- 3.1. Relates to managing those activities, products and services that are under the control of the Abu Dhabi Airports.
- 3.2. Identification and allocation of resources and responsibilities at each level and function to provide the framework for achieving the objectives and targets of the Abu Dhabi Airports.

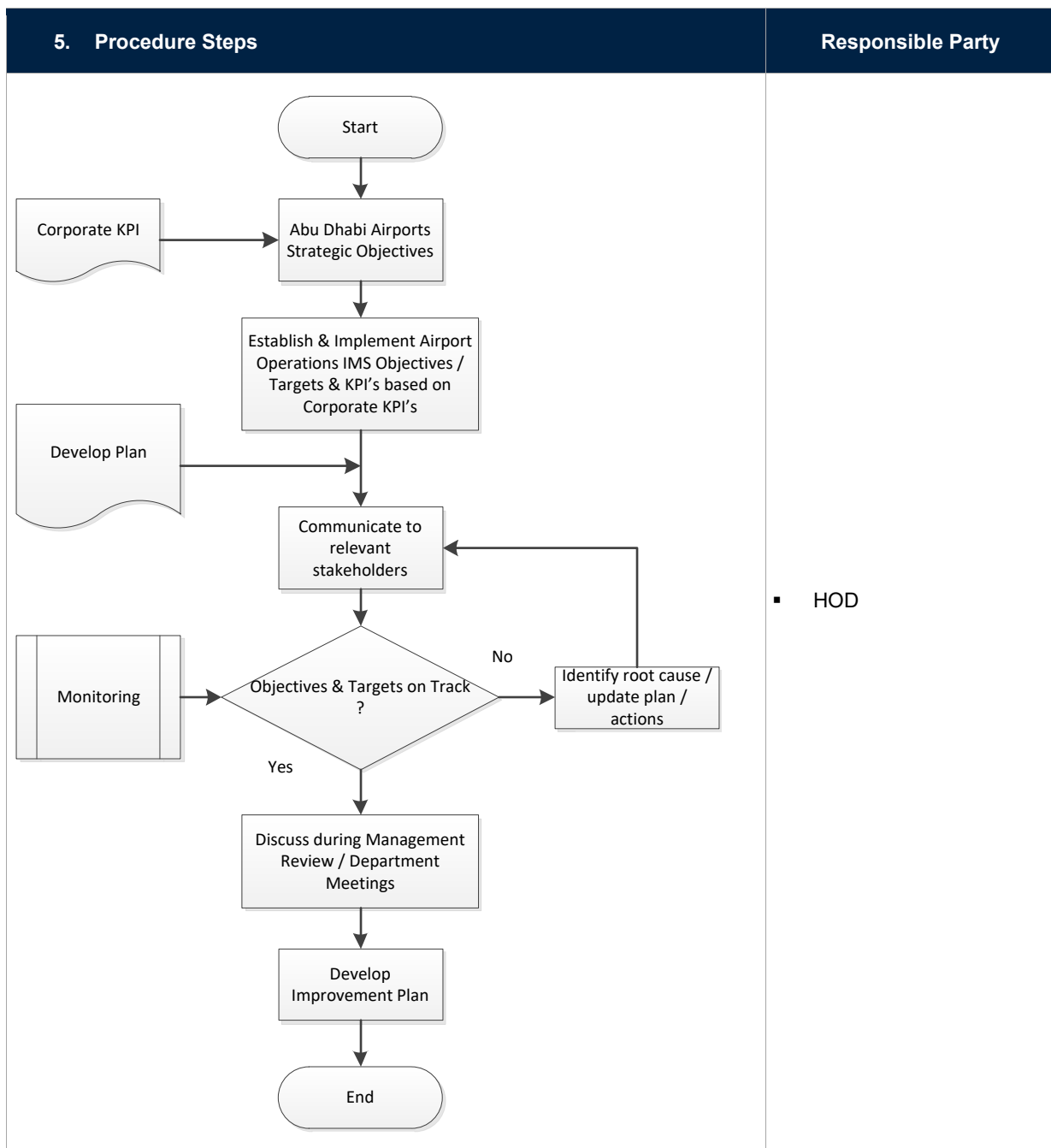
4. Definitions and Abbreviations

Definitions	Description
Management Plans	A documented plan detailing an action or series of actions required to be undertaken to achieve established Quality and EHS objectives and targets.
Objectives	Overall IMS goal (quantifiable where practicable), arising from the IMS Commitment & Policy Statement that Abu Dhabi Airports sets itself to achieve.
Targets	A detailed performance requirement (quantifiable where practicable) pertaining to the organization, that arises from the IMS objectives and that needs to be met in order for the objectives to be achieved.
Abbreviations	Description
DMT	Department of Municipality &Transport
EHS	Environment, Health and Safety
HOD	Head of Department
IMS	Integrated Management System
IMSSC	Integrated Management System Steering Committee

STANDARD OPERATING PROCEDURE

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OGSM	Objectives, Goals, Strategies, Measures
OHS	Occupational Health and Safety
OHSAS	Occupational Health and Safety Assessment Series
ADPHC	Abu Dhabi Public Health Center



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5.1. General		
5.1.1.	Sets a range of objectives and targets based on the IMS risk profile, legislative, and corporate requirements.	
5.1.2.	Ensure that DOT OHS objectives and targets when applicable are communicated to the management and they need to cascade it to applicable airports and departments.	
5.1.3.	The system incorporates objectives which are designed to facilitate the management and implementation of aviation safety, quality, environmental protection, occupational health and safety in the workplace.	
5.2. Establishing Department & Subsidiary IMS Objectives and Targets		
5.2.1.	Shall be quantified and measurable, realistic and achievable, identified with time scales, and shall form the basis of the management programs at relevant levels.	▪ HOD
5.2.2.	Clearly documented and communicated to staff and stakeholders.	
5.2.3.	Aligned with Abu Dhabi Airports IMS Policy and shall be a mechanism for delivering continual improvement in IMS performance.	
5.3. Performance Measure		
5.3.1.	Thought should be given to reporting lead indicators or performance based on activities in addition to EHS performance measures such as lost workday cases, or injuries:	▪ HOD
	▪ Number of workplace safety inspections conducted.	
	▪ Number of internal audits conducted.	
	▪ Number of trainings completed.	
	▪ Number of near-miss or hazard reports made.	
5.4. Performance Review		
5.4.1.	Monitor the progress in meeting objectives, targets and management plan against identified measures periodically throughout the year. This can be done during periodic management review.	▪ HOD
5.4.2.	Progress with meeting entity objectives and performance measure will be monitored during the IMSSC meetings.	▪ EHS & Sustainability

6. Monitoring, Evaluation and Review

- 6.1. Monitoring of progress towards objectives and targets. Progress towards objectives and targets is monitored through:
- Department Management meetings
 - Completed workplace inspections
 - Attendance IMS / EHS related training courses
 - Incidents and accidents per department and subsidiaries
 - Environmental performance measure
 - Corrective and preventive actions implemented as a result of inspections, audits, incident investigations and hazardous conditions and practices reported

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- 6.2. The IMS Section shall monitor the progress of Abu Dhabi Airports wide objectives and targets and endorsed IMS and EHS plans.
- 6.3. IMS objectives, targets and management plans shall be reviewed at least semi-annually to ensure continuing relevance and suitability.
- 6.4. Department Heads are to ensure that IMS objectives and targets are consistent with the Abu Dhabi Airports IMS Policy; is measurable and consistent with a goal of continual improvement. It shall be reviewed at least semi-annually or as deem necessary.
- 6.5. This procedure must be reviewed annually or when significant changes to regulatory requirements are implemented or as the need arises.

7. Potential Risks

Risk	Control Measure
7.1. EHS management plans not implemented due to none identification and monitoring of EHS objectives and targets.	- Periodic monitoring of EHS objectives & targets. - Communication of EHS objectives & targets to relevant departments.

8. Exceptions

Not Applicable

9. Legal Requirements

This section is to specify what Laws, Regulations, standards or guidelines the department deal with in this SOP. If not applicable, to mention N/A in this section.

10. Supporting Documentation and Tools

10.1. References

- Abu Dhabi Occupational Safety & Health (OSHAD-SF) Manual
- Abu Dhabi Occupational Safety & Health (OSHAD-SF) Element 7 – Monitoring, Investigation and Reporting
- GCAA – CAR PART IX – Aerodrome Regulations
- GCAA – CAR PART X – Safety Management System
- ISO 14001:2015 Environmental Management System
- ISO 45001:2018 Occupational Health and Safety Management System

10.2. Forms

- OGSM

11. Filing and Distribution

- 11.1. All documents related to IMS are kept in MATARI – IMS Share Point and employees are informed via email regarding the distribution of core documents such as, IMS Policy, IMS Manual, and IMS Core

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Procedures and related forms and other department documentation, which will be accessible via MATARI – IMS share point portal. Authorized Departments are responsible for distributing the respective department documentation to concerned parties. Documents are controlled.

- 11.2. Compliance & EHS, authorized department members, respective Department Document Controllers, and GMs, will be provided relevant access to all IMS documentation as per respective IMS Share Point workflow.
- 11.3. Records Retention period is for a minimum of five years unless required otherwise by Organizational need, Statutory or Regulatory requirements.

12. Change Log

Version No.	Document Creation, Review, Approval and Change Tracking	Actioned by (Name, Title, Department)	Action Date	Change Effective Date
V0.1	First version published			
V0.2	Editorial Change Update Forms Title	RA		
V1.0	Change Template and Version No and responsibility as per the current structure.	MS	14/01/2015	15/01/2015
V2.0	Update Template and Version No. Update Definition & Abbreviation Update of Procedure Steps Update of Monitoring, Evaluation & Review Update of Potential Risk Update Exception Update Supporting Documentation & Tools Update of Change Log	ON AA AN MS GG EU	07/09/2016	
V2.1	Update of Version No. and Date Update of Supporting Documentation & Tools	EU	20/11/2017	01/12/2017
V2.2	Added IMSSC in the Abbreviations Update of Supporting Documentation & Tools	MA	07/04/2019	
V2.3	Amended CORE SOP Owner Update of Version No. and Date Update of Purpose Update of Definition and Abbreviation	EU MA	01/07/2019	

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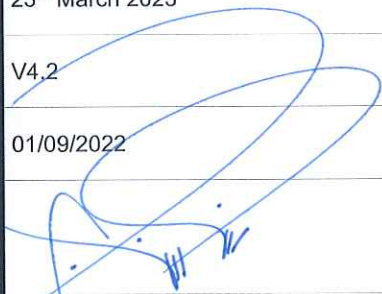
	Update of Change Log Added Legal requirements			
V2.4	Replacing 18001 with 45001:2018 and version number	MA	1/2/2021	
V3	Review the SOP and change version date	FA	01/09/2022	01/09/2022

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STANDARD OPERATING PROCEDURE

Hazard and Incident Reporting and Investigation

Emergency Services and Compliance

Business Process Area / Functional Area:	Abu Dhabi Airports		
SOP Owner:	EHS & Sustainability		
SOP Ref. No:	ADA/COR/SOP/004-V4.2- 01/09/2022		
Implementation Date:	01/11/2021		
Approved By:	Aws Al Khanjari		
Approval Date:	23 rd March 2023		
Version No.:	V4.2		
Version Date:	01/09/2022		
Approver's Signature: (for non-electronic copies)			
Information Classification	Official Use	2	This classification refers to information that is to be used internally by the Abu Dhabi Airports personnel only, and does not fall into the previous three categories. Although unauthorized disclosure of this information is prohibited, in the case that it occurs, it is expected that there will be no serious repercussions to Abu Dhabi Airports, shareholders, employees, business partners and/or clients.

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Template Title:	SOP Template	Template Ref. No.:	TEM/03/SOP/ V4.0/0107201 9	Version No.:	V4.2	Version Date:	01/11/2021
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SOP Title:	Hazard and Incident Reporting & Investigation						
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1. Title

Hazard and Incident Reporting & Investigation

2. Purpose

- 2.1. To ensure compliance with applicable regulatory and other requirements and standards.
- 2.2. The notification, reporting and investigation of aviation, environmental, health and safety hazards and incidents are conducted in a timely manner with preventative actions identified and implemented.
- 2.3. Accurate information is collected to analyse trends in hazard classification, incident types and make recommendations with the aim of controlling hazards.
- 2.4. Follow-up, monitoring and review of corrective actions implemented are undertaken and that hazards are eliminated or reduced to ALARP and that new hazards are not introduced in the workplace.
- 2.5. Aviation, occupational health and safety and environmental related hazards and incidents are reported to management as needed.

3. Scope

The procedure applies to reporting of the following hazards and incidents in Abu Dhabi Airports premises but not limited to:

- 3.1. Hazards that could lead to injuries or illnesses to staff, contractors and the general public inside airport premises.
- 3.2. Occupational injuries or illness to staff on company authorized activities (ie., field activities, off-premises, duty travel and attendance to training courses).
- 3.3. Occupational injuries or illness to airport tenants / contractors / sub-contractors working on premises owned or occupied by the Abu Dhabi Airports.
- 3.4. Injuries involving the general public and / or passengers sustained while in the Abu Dhabi Airports premises;
- 3.5. Incidents (ie, near-miss / near-accidents), that have the potential to cause injuries or illnesses, including exposure to chemicals and/or physical agents.
- 3.6. Incidents that cause or have the potential to cause serious property damage (ie., fire, explosions, natural calamities).
- 3.7. Accidents involving company owned or rented vehicles.
- 3.8. Sporting or other recreational injuries sustained by staff while participating in company organized social activities.
- 3.9. Incidents involving staff while on work-related business trips or attending company authorized training courses.
- 3.10. Uncontrolled emissions or release that may pose a risk to the environment (air, water and land).
- 3.11. Incident investigations for serious injury's (fatality and dangerous occurrence).

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SOP Ref. No.:	ADA/COR/SOP/004	Version No.:	V4.2	Version Date:	01/11/2021	Page: 5/23

4. Definitions and Abbreviations

Definitions	Description
Airport Tenant	Any person, other than an aircraft operator that has an agreement with the airport operator to conduct business at Abu Dhabi Airports premises.
AL ADAA	OSH Electronic application maintained by ADPHC for reporting and database management functionalities required by OSHAD for monitoring and implementation of OSHAD-SF.
As Low As Reasonably Practicable (ALARP)	To reduce the risk to a level which is as low as reasonably practical and involved balancing reduction in risk against the time, trouble, difficulty and cost of achieving it. This level represents the point, objectively assessed, at which the time, trouble, difficulty and cost of further reduction measures becomes unreasonably disproportionate to the additional risk reduction obtained.
Consequence	The outcome of an incident.
Contractor	A person, organization, their employees or a nominated representative engaged to carry out work for the nominated entity in a contract for service arrangement.
Fatality (work-related)	Is a death resulting from work related injury or illness, regardless of the time intervening between injury or illness and death.
First Aid	An immediate assistance given to a person suffering from a sudden illness or injury in the workplace, with care provided to preserve life, prevent the condition from worsening, and/or promote recovery. Such care may be considered "first aid" even though provided by a health-care professional.
First Aid Injury	Is a minor work-related injury or illness that calls for only simple "First Aid" treatment and does not call for follow-up treatment by a health-care professional. First aid injuries do not result in lost time from work or work restrictions.
Hazard	Any substance, physical effect, or condition with the potential to harm people or property and have an effect on the environment.
Hierarchy of EHS Control Measures	The means of controlling exposure to environmental, occupational health and safety hazards, listed in preferential order as follows. ▪ Elimination ▪ Substitution (alternatives) ▪ Engineering / Isolation (plant and equipment) ▪ Administration (procedural) ▪ Personal Protective Equipment
Incident	An event or chain of events which has caused or could have caused fatality, injury, illness and/or damage (loss of assets, the environment, entity reputation or to third parties). Note: an incident for the purpose of this procedure will include "near miss"

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Lost Workday Case	A work-related injury or illness that results in an injured person temporarily unable to perform any regular job or restricted work activity on a subsequent scheduled workday or shift, supported by a medical report from an approved medical practitioner. Note: a. <i>Lost Time Injury (LTI) vs. Lost Work Day Case (LWDC): A lost time injury is a reporting requirement and is a collection of a number of different consequences that can occur following an incident, such as a fatality, permanent disability, etc. A lost work day case is a single injury or illness which has resulted in a work day being lost excluding fatalities.</i> b. <i>If a LWDC transforms into Fatality or Permanent Total Disability, it will no longer be considered as LWDC. Incident Severity, Statistics and KPIs shall be updated accordingly for severity of injury.</i>
Medical Treatment Case (MTC)	A work related injury or illness that calls for medication, treatment, or medical check that is administered by a health-care professional and that goes beyond first aid. Does not result in lost time from work beyond the date of the injury.
Near Miss	An unplanned event, event series or condition that occurred at the workplace which, although not resulting in any injury, illness or environmental damage, had the potential to do so.
Occupational Illness / Disease	Any work related abnormal condition or disorder, other than an injury, which is mainly caused by exposure to environmental factors associated with the employment. It includes acute and chronic illness or diseases that may be caused by repetitive motion, inhalation, infectious organisms, absorption, ingestion or direct contact. Whether a case involves a work-related injury or an occupational illness is determined by the nature of the original event or exposure that caused the case, not by the resulting condition of the affected employee.
Permanent Partial Disability	Any work-related injury, which results in the complete loss, or permanent loss of use, of any part of the body or any permanent impairment of function of parts of the body, regardless of any pre-existing disability of the injured member or impaired body function.
Permanent Total Disability	Any work related injury which permanently incapacitates an employee and results in termination of employment.
Restricted Workday Case	Restricted work case (RWC) is a work-related injury or illness that results in limitations on work activity that prevent an individual from doing any task of his/her normal job or from doing all of the job for any part of the day.
Sub - Contractor	An entity engaged by the main / principal contractor to assist with the contracted work.
Serious Dangerous Occurrence	A significant incident arising out of or in the course of work that did not result in Serious injuries / and or fatalities but had the potential to have done so.
Serious Occupational Illness / Disease	Any work-related abnormal condition or disorder, other than an injury, which is mainly caused by exposure to environmental factors associated with the employment. It includes acute and chronic illness or diseases that may be caused by repetitive motion, inhalation, infectious organisms, absorption, ingestion or direct contact.

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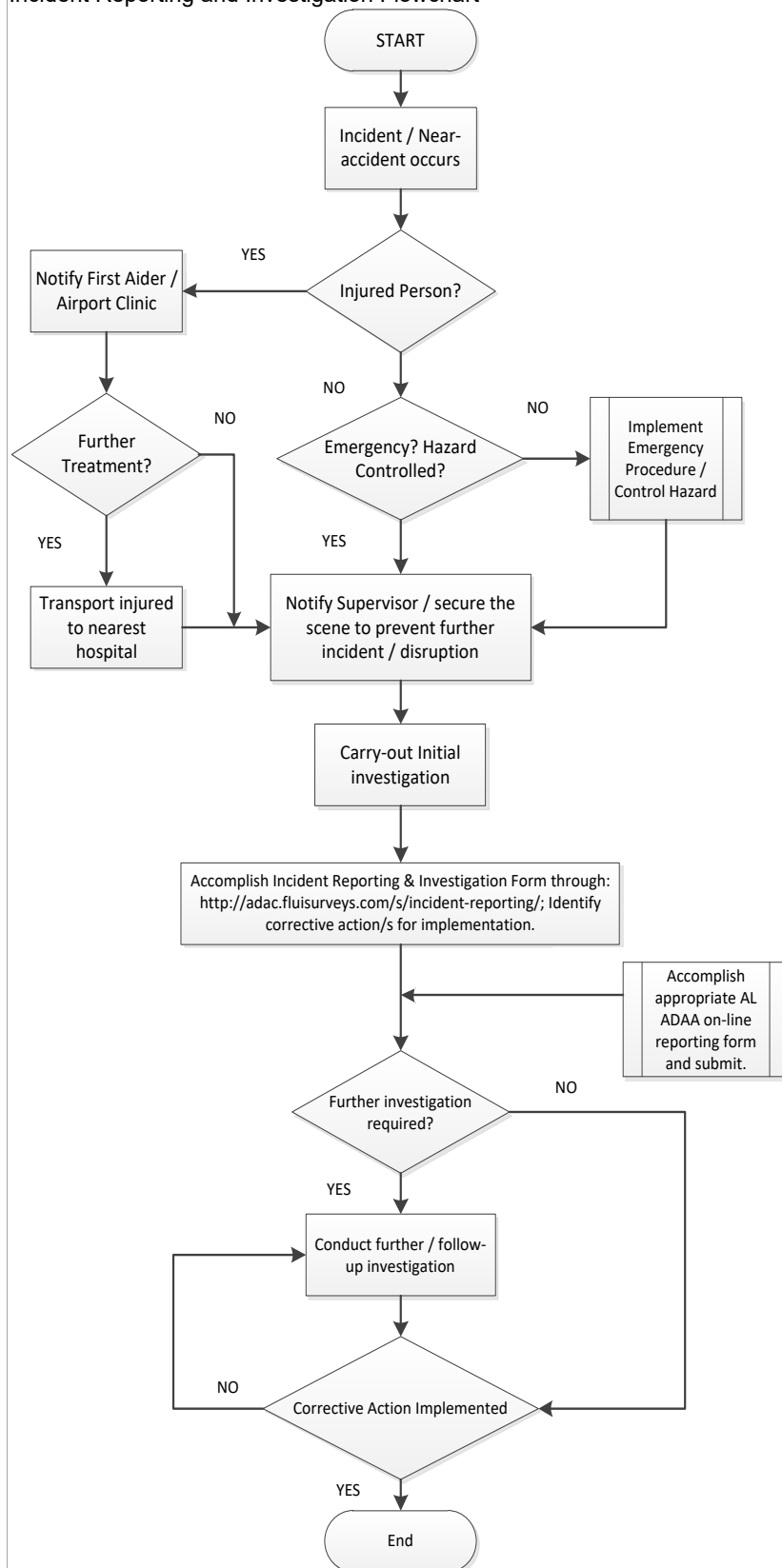
	Whether a case involves a work-related injury or an Occupational Illness, is determined by the nature of the original event or exposure that caused the case, not by the resulting condition of the affected employee.
Abbreviations	Description
ALARP	As Low as Reasonably Practicable
DMT	Department of the Municipality & Transport
EHS	Environment, Health & Safety
ESC	Emergency Services and Compliance
HOD	Head of Department
HOS	Head of Section
ADPHC	Abu Dhabi Public Health Center

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5. Procedure Steps

Responsible Party

Incident Reporting and Investigation Flowchart



- Reporting Person
 - Airport Staff
 - Airport Tenant
 - Contractor
 - General Public

- Reporting Person
 - Airport Staff
 - Airport Tenant
 - Contractor
 - General Public

- Department Manager / Supervisor
- Duty Manager
- Airside Safety
- Contractor / Airport Tenant

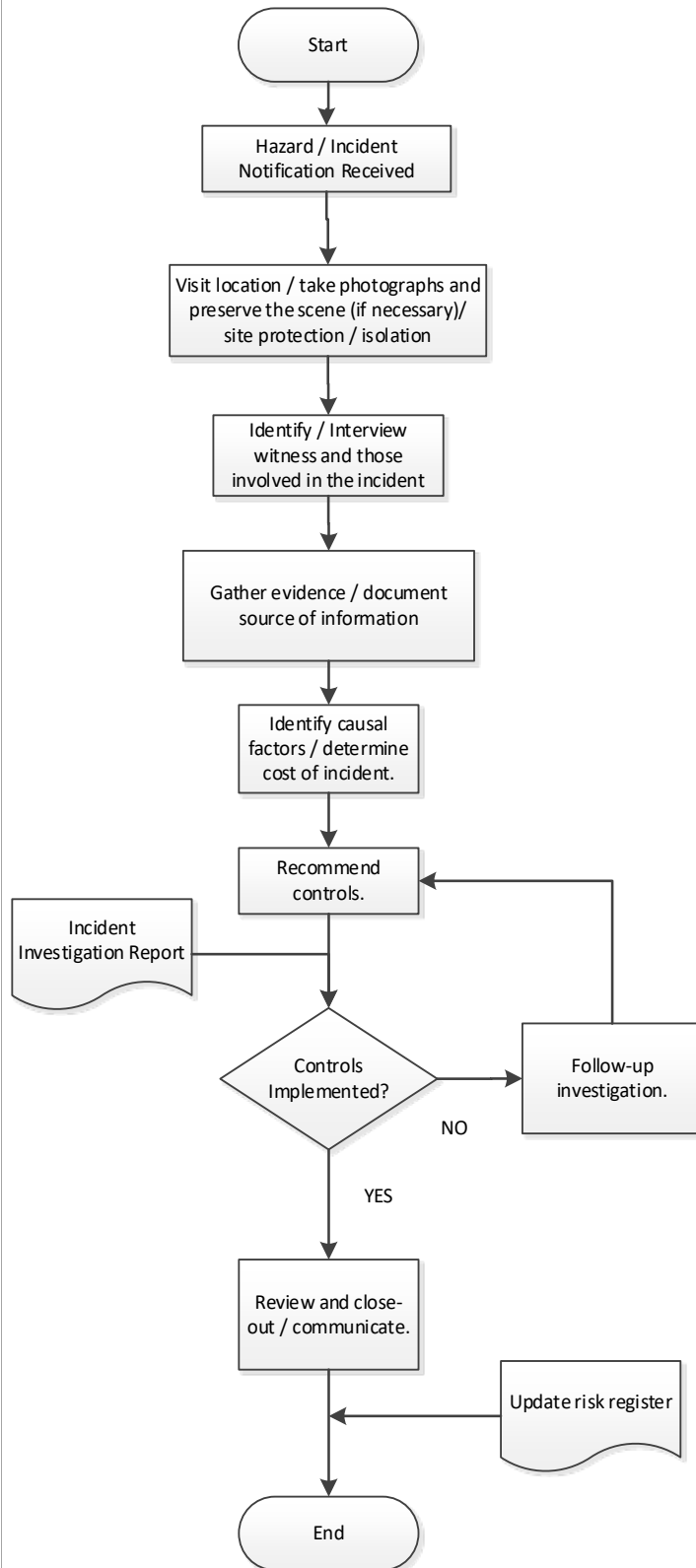
- Department Manager / Supervisor

- EHS Section

- EHS Section
- Fire Safety & Standards Section

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Hazard or Incident Investigation Process Flowchart



- Department Supervisor / Manager
- Airport Tenant
- Contractor
- EHS Section
- Fire Safety & Standards

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5.1. General

The general procedures and responsibilities associated in the reporting and investigation of EHS hazards or incidents are described as:

- 5.1.1. Unsafe practices or conditions which has the potential for accidents shall be reported without delay to the concerned supervisor and/or department manager. Where possible, immediate action/s are to be taken to eliminate or reduce any hazards.
- 5.1.2. Incidents, injuries, and dangerous occurrences are to be reported and investigated within the specified timeframe.
- 5.1.3. Staff, contractors and airport tenants are to take reasonable care for their own health and safety and the protection of the environment and for the health and safety of anyone else that may be affected by their work activity (i.e., general public).
- 5.1.4. Participate in the conduct of incident investigations as required.
- 5.1.5. Attend mandatory awareness and training courses as required.
- 5.1.6. Cooperate with the Abu Dhabi Airports Management in carrying out its obligations imposed on it by the regulators.

5.4. Notification / Reporting

EHS-related hazards or incidents shall immediately be reported to relevant departments and ADA EHS Section through e-mail EHSreporting@adac.ae.

- 5.4.1. Department / Subsidiary Management shall immediately be notified of any hazards and incidents in their respective areas of responsibility.
- 5.4.2. Submit the hazard or incident report form for the following enumerated hazards or incidents within a specified timeframe.

Incident Classification	Reporting Timeframe
Fatality	Immediately (within 24 hours of the incident)
Permanent Total Disability	
Permanent Partial Disability	
Lost Workday Case	
Serious Dangerous Occurrence	
Serious Injury	
Serious Occupational Illness / Disease	
Escape of Flammable / Hazardous Materials	
Restricted Workday Case	
Medical Treatment	
First Aid Injury	
Equipment / Property Damage	
Near Miss (near accident)	

- Department / Subsidiary Management
- Contractors / Sub-Contractors
- Airport Tenants

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5.4.3. The EHS Section shall immediately be notified of occupational health & safety, and environmental related hazards or incidents both airside and landside through EHSreporting@adac.ae with the following details: ▪ Classification of Hazard or Incident ▪ Date and Time of Hazard or Incident ▪ Location of Hazard or Incident ▪ Brief details of the hazard or incident ▪ Possible root cause ▪ Corrective action/s done. 5.4.4. Department or Subsidiary Managers shall immediately be notified of EHS related hazard or incidents within their areas of responsibility. 5.4.5. Respective DM (Terminal/Airside Operations), shall immediately be notified of EHS related hazards or incidents both airside and landside. 5.4.6. Note: ▪ <i>Where the incident involves a visitor, a passenger or member of the general public, the relevant point of contact for the person within the airport premises shall accomplish the applicable incident reporting form (i.e., airline, contractor, customer service, staff being visited).</i> ▪ <i>The Department / Subsidiary EHS risk assessment register shall be reviewed and updated to determine the risk associated with the incident reported.</i>	
5.5. Investigations Serious injury, serious Occupational Illness / Diseases, Serious Dangerous Occurrences, incidents are required to be investigated to prevent an incident from happening or occurrence of another incident. The investigation shall include consultation with relevant stakeholders. An investigation following a notification of a serious hazard or incident shall immediately be conducted to ensure that accuracy of findings are not compromised if the investigation is conducted at a later time and/or date. 5.5.1. Investigation are to be recorded using the Hazard and Incident Reporting and Investigation Form. 5.5.2. If staff resources are not enough, delegated departments can conduct investigation from an OSH perspective such as Airside Safety. 5.5.3. Hazards identified as a result of an investigation shall immediately be corrected. 5.5.4. Implementation of corrective actions based on the recommendations of the investigation shall be in accordance with the hierarchy of health and safety control measures (please refer to definition of terms). 5.5.5. Incidents involving more than one department, subsidiary, section or entity shall be investigated by a joint investigation team composed of representatives from the department, subsidiary, section or entity. 5.5.6. Incidents involving contractors, and sub-contractors shall be reported to EHS Section and the Project Owner within the required timeframe and investigated with corrective actions implemented and reported to EHS Section within one week of the incident. 5.5.7. Incidents involving the general public inside the terminals shall be reported within the required timeframe with the investigation report submitted to EHS Section within one week of the incident. 5.5.8. Fire-related incidents shall immediately be reported within the required timeframe and investigation report forwarded to EHS Section within one week of the incident. 5.5.9. Incidents involving fuel/oil spillages, vehicular accidents, and injuries at the airside shall immediately be reported within the required timeframe	▪ Department / Subsidiary Management ▪ Contractor / Sub-Contractor ▪ Terminal Operations Duty Managers ▪ Fire Safety & Standards ▪ Airside Operations Duty Managers

STANDARD OPERATING PROCEDURE

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with the investigation report forwarded to EHS Section within one week of the incident. 5.5.10. EHS incidents involving staff, contractor and the general public with high consequence shall be investigated and reported to relevant regulators within the required timeframe. Note: Please refer to Appendix 1: EHS Investigation Process	EHS Section
5.6. Communication of Investigation Results 5.6.1. Findings and conclusions of investigations shall be communicated to concerned department/s and discussed.	- Department / Subsidiary Management - Contractors
5.7. Record Keeping 5.7.1. Incident investigation is to be recorded using the Incident Reporting and Investigation form or use of other delegated departments. 5.7.2. Where required, pertinent documents should be attached electronically to investigation report. 5.7.3. Copies of records and documentations associated with incident reporting and investigation shall be kept for a retention of seven years. Note: Incident summary shall be kept in the workplace in a secure location.	- Department Manager - Supervisor - Airport Tenants - Airlines - Contractors
5.8. Training & Competence 5.8.1. Ensure that staff shall be trained in the reporting of incidents. 5.8.2. Staff involved in the investigation process are required to attend applicable training courses.	- Department Manager - Supervisor - Airport Tenants - Airlines - Contractors
5.9. Implementation of Corrective Actions 5.9.1. Corrective actions based on the severity of the incident shall be implemented within the required timeframe. 5.9.2. Corrective actions are to be recorded and monitored accordingly. 5.9.3. Appropriate actions are to be taken to ensure that hazards associated with the incident are eliminated where possible or controlled so that the risk of recurrence of a similar incident is minimized. Note: The Concerned Department shall: - Consult with senior management as necessary and seek approval for the implementation of corrective actions that require expenditure beyond their level of authority. - Liaise with other departments as necessary. - Source expert opinion as required.	- Department Manager - Supervisor - Airport Tenants - Airlines - Contractors

6. Monitoring, Evaluation and Review

6.1. Department / Subsidiary Management shall: 6.1.1. Track and monitor the implementation of agreed corrective and/or preventative actions based on the incident investigation report. 6.1.2. Ensure that hazards are re-assessed and further corrective actions identified if the hazards associated with the incident have not been adequately controlled.
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6.1.3. Discuss, monitor and evaluate controls for effectiveness in consultation with department staff in the affected area and other relevant stakeholders.

6.1.4. Assess department risk assessment as a result of an incident and if new hazards are identified.

6.1.5. Conduct a review of any controls implemented by workplace inspections.

11.2. Compliance Section Shall:

6.2.1. Review and update of this procedure annually in consultation with relevant departments to ensure it effectiveness and is in accordance with applicable legal requirements.

6.2.2. Communicate updated procedure to all concerned.

7. Potential Risks

Risk	Control Measure
7.1. Non reporting and investigation of an incident could result in the re-occurrence of an incident.	Develop and implement a robust incident reporting and investigation procedure.
7.2. Non awareness and understanding of staff in the importance of incident reporting.	- Communicate incident reporting and investigation procedure to stakeholders. - Monitor and evaluate trend of incident reporting and corrective actions implemented. - Awareness of staff on the importance of incident reporting and investigation.

8. Exceptions

This procedure does not include the following processes:

- 8.1. Aviation, or airside related incidents as a result of wildlife, incursions, foreign object debris, damage to aircraft, as mention in the SMS.
- 8.2. Aviation, or air traffic control or air navigations services related incidents.
- 8.3. Airside related incidents involving Etihad airlines, Etihad Airport Services - Ground, other airlines and/or military aircraft.
- 8.4. Incidents involving passengers during flight, during embarkation and disembarkation which is reported by the ground handlers.

9. Legal Requirements

This section is to specify what Laws, Regulations, standards or guidelines the department deal with in this SOP.

- ADPHC
- DMT

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10. Supporting Documentation and Tools

11.1. References

- Abu Dhabi Occupational Safety & Health (OSHAD-SF) Manual
- Abu Dhabi Occupational Safety & Health (OSHAD-SF) Element 7 – Monitoring, Investigation & Reporting.
- Abu Dhabi Occupational Safety and Health System Framework (OSHAD SF), Mechanism 6.0 – OSH Performance Monitoring and Reporting;
- Abu Dhabi Occupational Safety and Health System Framework (OSHAD SF), Mechanism 11.0 – Incident Notification Investigation and Reporting
- GCAA CAR PART X – Safety Management System
- Abu Dhabi Airports Aerodrome Investigation Procedure
- Internal Communications; re: Hazard & Incident Reporting System;
- ISO 14001:2015 Environmental Management System
- OHSAS 45001:2018 Occupational Health & Safety Assessment Series

11.2. Forms:

- Hazard and Incident Reporting Form

11. Filing and Distribution

11.1. This document is published in the workflow on ADA net to be accessible to all users.

11.2. It will be updated from time to time on business requirement and approval from Snr. Manager Compliance.

12. Change Log

Version No.	Document Creation, Review, Approval and Change Tracking	Actioned by (Name, Title, Department)	Action Date	Change Effective Date
V1.0	First version published			
V1.1	Editorial Changes, Added Forms	RA		
V1.2	Updated to link to legal register and risk assessments	AG		
V1.3	Reporting types and frequencies	NN		01 Dec 2012
V1.4	Hazard Reporting	EU		
V1.5	Amended to include investigation	EU		20/11/2013
V2.0	Change templates and version number and responsibility as per current structure	MS	14/01/2015	15/01/2015

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V3.0	Updated Version No. Amended Definition & Abbreviations Amended Process Flow Chart Amended Procedure Steps Amended Monitoring, Evaluation & Review Amended Potential Risk Amended Supporting Documents & Tools Updated Change Log Added Appendixes	EU	01/03/2016				
V3.1	Amended Version Number & Date Update of Procedure Steps Updated Supporting Documentation & Tools	EU	05/10/2017	01/12/2017			
V3.2	Amended Version Number & Date Update of Procedure Steps Update of Supporting Documentation & Tools	EU	23/05/2019	01/06/2019			
V3.3	Update SOP Owner Update of CORE SOP Title Update of Definition and Abbreviation Update of Procedure Steps Update of Supporting Documents and Tools Update of Change Log	EU MA	01/07/2019				
V4.0	Replacing 18001 with 45001:2018 and version number	MA	1/2/2021				
V4.1	Replacing the DOT with DMT Replacing the OSHAD with ADPHC	AO	01/11/2021				
V4.2	Review the SOP and update version date	FA	01/09/2022	01/09/2022			

N.B. This document is UNCONTROLLED unless signed by an authorized person in the appropriate section of this document or viewed in Workflo! on Abu Dhabi Airports Matari-Sharepoint.

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Appendix 1:

Environment, Health and Safety Investigation Process

The persons responsible and accountable for investigation for non-catastrophic accidents will be supervisory personnel. Where practicable, a worker representative will be included in the investigation team. Investigation teams for incidents that result in a loss of life or condition with a serious risk of loss of life will include management personnel and may include a consultant experienced in accident investigation.

Important Note: where practicable, the scene of an accident must be left untouched until permission to clear the scene has been granted by the management supervisor. Exceptions include activities for rescue work, or prevention of further failures or injuries.

Pre-Investigation Activities

1. Prepare an investigation kit of materials and equipment that may be necessary to aid in an investigation (e.g., measuring tape, pencil and paper, camera and report forms).
2. If an accident occurs, the accident site should be examined immediately. Ensure that no one else, including yourself, is in danger of injury.
3. Gather and review any written information pertaining to the accident or the activities that were underway. This may include witness statements, first aid notes, operating manuals written safe job procedures, blueprints, etc.
4. Review personnel files to those involved as well as that of the supervisor.
5. Review job site accident record.

Identify Factors for Investigation

Three stages of an accident should be considered to determine exactly what happened:

1. Pre-accident stage – the factors that permitted the sequence of events leading to the accident. These may include:
 - Employer characteristics (e.g., type of work areas, size, safety program, supervision, equipment maintenance, previous accident record, etc.).
 - Employee characteristics (e.g., age, sex, occupation, health, experience, training, previous accident record, etc.).
 - Availability of written safe job procedures.
 - Availability of personal protective equipment (e.g., fall protection harness, hardhats, respirator).
2. Accident stage, the immediate factors in the accident. These may include:
 - What the worker(s) was doing (example, task, specific activity, posture, location, etc.).
 - Materials, tools, equipment and machinery directly involved (e.g., type, brand, size, guarding, condition, etc.).
 - Actions and movements that led to the accident (example, fall, slip, trip, horseplay, walking, kneeling, etc.).
 - Environmental characteristics (weather, lighting, noise, temperature, vapors, ventilation, etc.).
 - Other persons involved and their employers.
3. Post accident stage, the factors occurring after the actual accident that minimized or increased the seriousness of the accident. These may include:
 - The time period between occurrence and reporting.
 - Additional injury or damage incurred.
 - Response time of emergency personnel.
 - First aid available on site.
 - Location and condition of emergency equipment.
 - Evacuation plans.
 - Personal protective equipment worn or unused.

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Investigation Activities

1. Visit the accident location. Make yourself thoroughly familiar with the area, machinery and equipment involved.
2. Review the accident incident investigation form for information still required to be obtained.
3. Gather necessary data: photos, measurements, notes, drawings, witness names, etc.
 - Interview witnesses and other persons who have details about the accident. Interviews require you to be fair and open minded; look for facts, not someone to blame for the accident.

Post-Investigation Activities

1. Review and analyze the information gathered.
2. Complete the investigation report and note whether any additional investigation will be required.
3. Forward the completed investigation report to appropriate management personnel.
4. Follow-up as necessary to ensure corrective actions are implemented.

ACCIDENT INVESTIGATION (DETERMINING THE FACTS)

- The accident scene shall be visited before the physical evidence is disturbed.
- Comprehensive visual record shall be made. Photographs shall be taken from many different angles and accurate sketches or diagrams shall be made before the accident scene is restored.
- Accident-related items that should be preserved shall be determined. When the investigation reveals that an item may have failed to operate properly, or was damaged, arrangements shall be made either to preserve the item as it was found at the accident scene or to document carefully any subsequent repairs or modifications.
- The people who are involved in the accident shall be identified. Also identify all eyewitnesses, including those who saw the events leading to the accident, those who saw the accident happen, and those who came upon the scene immediately following the accident.
- Interviews shall be conducted with everyone who was involved or can provide information.
- Witnesses shall be interviewed as soon as possible and shall be interviewed individually and in private so the comments of one do not influence the responses of others.
- The sources of information shall be carefully documented.
- All sources of potentially useful information shall be reviewed. These may include original design, operating logs, previous reports, procedures, equipment manuals, maintenance inspection, records of modification, employee training records, etc.
- The cost of the accident shall be determined.

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Schedule A – List of Serious Dangerous Occurrences

Explosion or Fire

- a) Explosion or fire in a room or place in which persons are at work, and which results in substantial damage to the structure of the site, or to any machinery or plant there, and the explosion or fire is a result of the ignition of dust, gas or vapor. The incident shall have also resulted in the complete suspension of ordinary work at the site or stoppage of machinery or workplace for at least 5 hours.
- b) Electrical short circuit or failure of electrical machinery, plant or apparatus, which results in an explosion, fire or structural damage and involves its stoppage or disuse for at least 5 hours.
- c) Explosion or fire affecting any site in which persons are at work and causing complete suspension of ordinary work in the site for at least 24 hours.

Failure and/or Collapse of Equipment

- a) Failure or collapse of false-work / formwork or its supports.
- b) Collapse, partial collapse, overturning or failure of load-bearing parts of scaffold, lifts and lifting plant, equipment and/or accessories.
- c) Failure of a breathing apparatus / equipment while in use or during testing immediately before use.
- d) Failure or endangering of diving equipment, the trapping of a diver, an explosion near a diver, or an uncontrolled ascent.
- e) The collapse, overturning, failure or malfunction of, or damage to, any plant/equipment that the employee is in contact with that had the potential to cause injury / illness / environmental damage.

Machinery Damage

- a) Bursting of a revolving vessel, wheel, grindstone or grinding wheel moved by mechanical power.
- b) Explosion or failure of the structure of a steam boiler, receiver or any container used for the storage at a pressure greater than atmospheric pressure of any gas or gases (including air) or any liquid or solid resulting from the compression of gas.

Collapse of Building / Structure or Excavation

- a) Any unintended collapse or partial collapse of:
 - i. any building or structure (whether above or below ground) under construction, reconstruction, alteration or demolition; and / or
 - ii. any floor or wall of any building (whether above or below ground) used as a place of work; and / or
 - iii. of an excavation or any shoring supporting an excavation.

Electric Lines, Cables and Pipelines

- a) Any unintentional incident in which plant or equipment either:
 - I. comes into contact with overhead or underground electric lines, cables or pipeline; or
 - II. causes an electrical discharge from such an electric line by coming into close proximity to it; and/or
 - III. causes an overhead line to be at an height less than that required by regulation.

Malfunction of Radiation Generating Equipment

- a) Any incident in which:
 - i. the malfunction of a radiation generator or its ancillary equipment used in research, fixed or mobile industrial radiography, medical x-ray; the irradiation of food, the processing of products by irradiation, or other use, causes it to fail to de-energize at the end of the intended exposure period; or
 - ii. the malfunction of equipment used in research, fixed or mobile industrial radiography, gamma irradiation, or other use, causes a radioactive source to fail to return to its safe position by the normal means at the end of the intended exposure period.

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Escape of Flammable Liquid and Gases

- a) The sudden, uncontrolled release inside a building:
- i. of 100 kilograms or more of a flammable liquid; and / or
 - ii. of 10 kilograms or more of a flammable liquid at a temperature above its normal boiling point; and / or
 - iii. of 10 kilograms or more of a flammable gas.
- b) The sudden, uncontrolled release in open air of 500 kilograms or more of any of the material referred to in sections (i), (ii) and (iii) above.

Escape of Hazardous Materials

- a) The accidental release or escape of any materials in any quantity sufficient to cause the death, major injury or any other damage to the health of any person.

Biological Agent

- a) Any incident which resulted in or could have resulted in the release or escape of a biological agent likely to cause severe human infection or illness.

Penetration (SHARPS) Injury

- a) When a person is injured by a sharp KNOWN to be contaminated with a blood borne virus (BBV) e.g. hepatitis B or C or HIV.

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Schedule B - List of Serious Injuries

Serious Injury shall be **notified** to the respective SRA as soon as possible, however:

Fatality within **24hrs of the incident** and

Other serious injuries within maximum of **3 working days from the date of incident**

Entity shall make the **initial notification** of Serious Injury to respective SRA (Form G) based on immediate judgment of the potential severity / seriousness of the injury.

Once the actual severity and consequences of the notified injury are established based on diagnosis by licensed health care professional and supported by medical report, the same shall be reported in the incident investigation report to the relevant SRA (summarized by OSHAD-SF - Form G1) as well as in the entity performance report to the SRA (Form E/E2).

Serious Injuries requiring notification to SRA include but are not limited to the below-listed work-related injuries:

- a) An injured person temporarily unable to perform any regular job or restricted work activity on a subsequent scheduled workday or shift, supported by a medical report from an approved medical practitioner.
- b) immediate medical treatment of the injured person(s) as an in-patient in a hospital;
- c) medical treatment of the injured person(s) within 48 hours of exposure to a substance;
- d) immediate medical treatment of the injured person(s) for:
 - i. fracture (not including fingers or toes);
 - ii. the loss of a distinct part or organ of the body, including the amputation of any part of body;
 - iii. loss of consciousness and/or requiring resuscitation;
 - iv. a serious head injury;
 - v. a serious eye injury, including loss of sight (temporary or permanent);
 - vi. exposure to a hazardous material;
 - vii. the separation of skin from any underlying tissue (such as scalping or de-gloving);
 - viii. electric shock or electrical burn;
 - ix. serious burns due to thermal and chemical agents;
 - x. entrapment of a body part in machinery/equipment/plant;
 - xi. a spinal injury;
 - xii. dislocation of joint;
 - xiii. the loss of bodily function; and
 - xiv. Serious laceration

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Schedule C - List of Serious Occupational Illness / Diseases

Reproduced from Federal Law No. 8, for 1980, on Regulation of Labour Relations – Schedule 1 and Amendments:

No.	Occupational Illness / Disease	Occupational Exposure
1	Conditions caused by ionizing radiation	Any work involving exposure to radium or any other radioactive substances or X-rays
2	Conditions caused by non-ionizing radiation and heat	Any work involving exposure to non-ionizing radiation (eg: lasers, Infra-red or Ultraviolet sources etc) and reflected light or heat as in welding works
3	Conditions caused by vibration	Any work involving exposure to vibration, as in use of air hammer, milling works and polishing
4	Conditions caused by abnormal pressure	Any work involving exposure to sudden atmospheric pressure or work under high or low atmospheric pressure
5	Occupational noise induced hearing loss	Any work involving exposure to the impact of noise, as well as drugs and chemicals that have an effect on hearing
6	Tuberculosis	Any work involving exposure to the tuberculosis microbe such as dealing with patients in hospitals or work in laboratories or handling of infected animals
7	Brucellosis	Any work involving exposure contact with infected people or infected animals or animal products eg: in the health sector, laboratories, agriculture sector or work on animal farms
8	Hepatitis A and B	Any work involving exposure to infected people or contaminated blood such as in hospitals and laboratories
9	HIV/AIDS	Any work involving exposure to infected people or contaminated blood such as in hospitals and laboratories
10	Tetanus	Any work involving exposure to sewage and agricultural works
11	Leptospirosis	Any work involving exposure to sewage works or agriculture or mines, tunnels, hunters or meat stores
12	Anthrax	Any work involving contact with infected animals by this disease or with their skins, horns and hair
13	Extrinsic Allergic Alveolitis	Any work involving exposure to fungus, spores, plants seeds and some animals such as working in animal farms, with birds and in agriculture
14	Poisoning caused by exposure to lead	Any work involving the use or handling of lead and organic or inorganic compounds or any substances containing lead as well as exposure to dust and fumes of lead and its compounds.
15	Poisoning caused by exposure to mercury	Any work involving the use or handling of mercury and its compounds or any substances containing mercury as well as exposure to dust, vapours and mists or fumes of mercury or its compounds or any substances containing an organic or inorganic mercury such as pesticides
16	Poisoning caused by exposure to arsenic	Any work involving the use of arsenic or exposure to fumes and dust of arsenic as in pesticide and drugs and any work involving the use of arsenic such as cleaning precipitated salts in boiling containers.
17	Poisoning caused by exposure to phosphorus	Any work involving the use or handling of phosphorus & organic phosphorus compounds or substances containing phosphorus, and any work exposure to dust and gases of phosphorus as in pesticides, fungicides, fertilizers and chemical industries.
18	Poisoning caused by exposure to antimony	Any work involving the use or handling of antimony or its compounds or substances containing antimony and any work involving exposure to dust and gases of antimony such as in mining operations and transportation of antimony
19	Poisoning caused by exposure to manganese	Any work involving the use or handling of manganese or its compounds or substances containing manganese and any work involving exposure to dust and gases of manganese such as in mining operations and transportation of manganese
20	Poisoning caused by exposure to petroleum and distillates	Any work involving the use or handling of petroleum and its gases or products or derivatives and any work involving exposure to such substances in solid liquid or gaseous form as in oil industry operations
21	Poisoning caused by exposure to carbon tetrachloride	Any work involving the use or handling of chloroform or produced carbon tetrachloride or any exposure to gases containing them as in petrochemical industries

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22	Conditions caused by exposure to coal, tars & oils	Any work involving the use or handling of coal, tars and oil or any exposure to gases resulting from them as in petrochemical industries
23	Poisoning caused by exposure to benzene	Any work involving the use or handling or exposure to benzene and its derivatives as in laboratories, chemical plants and painting
24	Conditions caused by exposure to aliphatic / aromatic / cyclic-amines	Any work involving the use or handling of aliphatic compounds or exposure to aromatic or cyclic-amines as in petrochemical industries.
25	Poisoning caused by exposure to benzene hexachloride	Any work involving the use or handling or exposure to benzene hexachloride as in oil industries and pesticides
26	Conditions caused by exposure to bromomethyl and chloromethyl	Any work involving the use or handling or exposure to fumes or gases of bromomethyl and chloromethyl as in fire extinguishers, airconditioning, and pesticides
27	Poisoning caused by exposure to formaldehyde	Any work involving exposure to formaldehyde
28	Poisoning caused by exposure to halothanes	Any work involving the use or handling or exposure to halothanes in health sector (Anaesthetics)
29	Conditions caused by exposure to carbon monoxide	Any work involving exposure to carbon monoxide in incomplete combustion processes, as in furnaces and maintenance of power generators
30	Poisoning caused by exposure to halogens	Any work involving exposure to halogenes or its products or dusts or fumes
31	Poisoning caused by exposure to carbon disulphide	Any work involving exposure to carbon disulfide and its fumes in chemical industries and laboratories
32	Conditions caused by exposure to cyanide	Any work involving the sue and exposure to cyanide
33	Poisoning caused by exposure to beryllium	Any work involving the use and exposure to beryllium or its compounds
34	Poisoning caused by exposure to selenium	Any work involving handling substances containing selenium such as in food industries and in plant supplements/fertilisers
35	Diseases caused by exposure to cements	Any work involving handling, transporting , manufacturing and using cements
36	Diseases caused by exposure to chromium/chromic acid	Any work involving preparation or using or handling chromium or chromic acid or bichromate or zinc chromate or any substance containing its compounds as in painting, detergents and cements
37	Poisoning caused by exposure to nickel	Any work involving exposure to fumes and dusts of nickle or substance containing nickle as in painting and nickle purification and mining
38	Poisoning caused by exposure to cadmium	Any work involving exposure to fumes and dusts of cadmium
39	Poisoning caused by exposure to vinyl chloride monomer	Any work involving manufacturing and polymerization processes of vinyl chloride .
40	Poisoning caused by exposure to isocyanates/polyurethanes	Any work involving exposure to polyurethane and using man-made mineral fibers
41	Conditions caused by exposure to epoxy resins	Any work involving the use and manufacturing epoxy resins
42	Conditions caused by exposure to wood dusts	Any work involving exposure to wood dust as in wood and furniture industries.
43	Pneumoconiosis (silicosis, asbestosis, siderosis, bysinosis) • Silicosis (Silicon dust) • Asbestosis (Asbestos dust) • Sideroses • Byssinosis	Any work involving exposure to freshly produced silica dust (silicon-oxide dust) or any substances containing fresh silica such as work in mining, stone quarrying or the hewing or crushing of rocks or manufacture of rock cement, the sandblasting of metals or any work involving similar exposure. Any work involving exposure to asbestos as in mining, manufacturing or to the substances containing asbestos such as construction materials, cement, manufacture thermo- resistant material and car brakes. Any work involving exposure to iron dust and fumes such as smelting and casting iron industries. Any work involving exposure to cotton dust as in the textile industry.

Additional Reportable Occupational Illness / Diseases:

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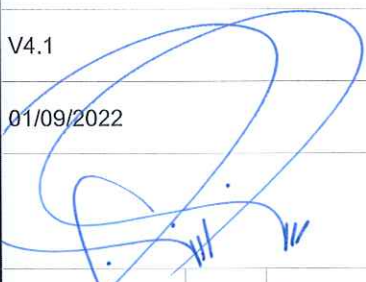
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No.	Disease	Occupation Causing the Disease
1.	Legionella	Any work requiring contact with water storage, distribution, and treatment systems that are contaminated with Legionella bacteria. This includes swimming pools, hot tubs, showers, cooling towers, and similar types of equipment
2.	Cumulative Trauma Disorder	Any work requiring repetition of a task that results in a muscular skeletal disorder
3.	Vibration white finger	Any work with equipment that continually vibrates the hands and causes reduced blood flow to the fingers
4.	Whole body vibration syndrome	Any work with equipment that exposes the body to whole body vibration and shocks and results in pain and injury
5.	Hand arm vibration syndrome	Any work with equipment that continually vibrates the hands and causes reduced blood flow to the fingers
6.	Cancer	Any occupational exposure to chemicals that results in cancer
7.	Tenosynovitis	Any work exposure that results in the inflammation of the fluid-filled sheath that surrounds a tendon
8.	Pleural Disease	Any work exposure that causes an accumulation or reduction of pleural fluid

STANDARD OPERATING PROCEDURE

Performance Monitoring, Measurement and Reporting

Emergency Services and Compliance

Business Process Area / Functional Area:	Abu Dhabi Airports
SOP Owner:	EHS & Sustainability
SOP Ref. No:	ADA/COR/SOP/013-V4.1-01/09/2022
Implementation Date:	01/11/2021
Approved By:	Aws Al Khanjari
Approval Date:	23 rd March 2023
Version No.:	V4.1
Version Date:	01/09/2022
Approver's Signature: (for non-electronic copies)	
Information Classification	Official use 02 This classification refers to information that is to be used internally by the Abu Dhabi Airports personnel only, and does not fall into the previous three categories. Although unauthorized disclosure of this information is prohibited, in the case that it occurs, it is expected that there will be no serious repercussions to Abu Dhabi Airports, shareholders, employees, business partners and/or clients.

A Standard Operating Procedure (SOP) consists of a set of statements describing instructions in an orderly manner for the purpose of achieving a result. SOPs are developed to maximize the efficiency and accuracy of implementation of a policy or operational process.

Template Title:	SOP Template	Template Ref. No.:	TEM/03/SOP/ V4.0/0107201 9	Version No.:	V4.0	Version Date:	01/07/2019
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SOP Title:	Performance Monitoring, Measurement and Reporting						
SOP Ref. No.:	ADA/COR/SOP/032	Version No.:	V4.1	Version Date:	01/11/2021	Page:	2/12

All information contained in this document is proprietary to Abu Dhabi Airports and shall not be duplicated in any manner or released in part or full to any unauthorized persons. However, the contents of this document are not confidential and shall be accessible to all Abu Dhabi Airports employees and its subsidiaries.

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1. Title

Performance Monitoring, Measurement & Reporting.

2. Purpose

- 2.1. To ensure compliance with applicable regulatory and other standards requirements.
- 2.2. To ensure that the Abu Dhabi Airports Integrated Management System are effective in meeting the objectives stated in the IMS Policy Statement.
- 2.3. The analysis and review of IMS performance information is crucial in the identification of aviation, quality, health, safety and environmental trends and allows for continuous improvement of the IMS and Abu Dhabi Airports performance.
- 2.4. This procedure describes the processes for monitoring and measurement of quality, occupational health and safety, environmental for continual improvement effectiveness.

3. Scope

- 3.1. This procedure is applicable to all Abu Dhabi Airports activities and processes which could have an effect on the quality, occupational health and safety, environmental protection and aviation safety.
- 3.2. IMS related performance, monitoring and reporting is solely applicable to Abu Dhabi Airports Operations division.

4. Definitions and Abbreviations

Definitions	Description
Key Performance Indicators	Is a measurable value that demonstrate how effectively a company is achieving key business objectives.
Objectives	States what is intended to be accomplished.
Performance	Measurable results of the OSHMS related to the entity's control of its safe and health risks, based on its policy, objectives and targets.
Performance Indicators	Measures to review whether objectives have been met, they include rates, ratios or indices which reflect how well IMS or its elements are operating.
Lagging Performance Indicators	Measures of occurrences, in particular the negative outcomes that the organization is aiming to prevent.

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Leading Performance Indicators	Measures both things that have the potential to become or contribute to a negative outcome in the future and things that contribute to safety.
Target	Detailed performance requirement, quantified where practicable, applicable to the entity or parts thereof, that arises from objectives and that needs to be set and met in order to achieve those objectives.
Abbreviations	Description
DMT	Department of Municipality &Transport
IAQ	Indoor Air Quality
IMS	Integrated Management System
IMSSC	Internal Management System Steering Committee
KPI	Key Performance Indicators
OGSM	Objectives Goal Setting Management
ADPHC	Abu Dhabi Public and Health Center

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5. Procedure Steps	Responsible Party
<pre> graph TD Start([Start]) --> Coord[Coordination with Relevant Departments] DataGathered[Data Gathered] --> Coord Coord --> Comp[Compilation and Analysis] Comp --> Sum[Periodic summary / trend analysis] Sum --> Plan[Develop and implement plan based on KPI and/or target / objective] Plan --> Effect{Plan Effective?} Effect -- No --> Review[Review / Update] Review --> Plan Effect -- Yes --> Comm[Communicate / Implement Plan] Comm --> End([End]) </pre>	▪ Compliance ▪ FM ▪ Administration ▪ Human Resource ▪ Procurement & Logistics ▪ IT
5.1. General The Abu Dhabi Airports shall ensure that results of statistical analysis are interpreted and subsequent initiatives to promote performance improvement and prevention of adverse trends are established and implemented based on the IMS related OGSM. Appropriate qualitative and quantitative measures are to be considered based on identified hazards and risks, commitment to IMS policy and objectives and targets.	

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Two types of statistical measurement techniques are used to validate Abu Dhabi Airports IMS performance namely: - Leading (proactive) Performance indicators - Lagging (reactive) performance indicators 5.1.1. Leading Performance Indicators - Measures the actions undertaken by Abu Dhabi Airports to prevent work related injuries and/or illnesses (appendix 1). 5.1.2. Lagging Performance Indicators - Measure the implementation of IMS program in achieving objectives (appendix 2).							
5.2. Monitoring and measurement 5.2.1. Processes and procedures are verified through internal audits and process monitoring. These measures are used to monitoring quality, occupational health and safety, environmental processes to determine that planned results have been achieved including conformity with IMS objectives and targets. 5.2.2. Improvement recommendations are discussed during management review where process monitoring and review identify that planned results are not being achieved or performance could be improved.				- Compliance - FM - Administration - IT - Human Resource - Procurement & Logistics			
5.3. Data Gathering and Analysis 5.3.1. Appropriate data is determined, collected and analyzed monthly to demonstrate the effectiveness of the IMS processes. 5.3.2. Data generated from monitoring and measurement is analyzed to provide performance information relating to: - Conformity to regulatory and other standard requirements. - Effectiveness of actions taken to address risks and opportunities. - Performance of contractors. - Number of audit and inspection non-conformity and corrective actions implemented. - EHS-related incidents - Sustainability				Compliance			
5.4. Performance Reporting 5.4.1. Appendix 3 details the statistics that are to be reported to responsible stakeholders, and identifies the timeframe within which they are to be disseminated. 5.4.2. Reporting on EHS performance, inclusive of opportunities for improvement to the system takes place in IMSSC meetings.				Compliance			

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5.5. Documentation & Communication

5.5.1. IMS performance is recorded and communicated to all Abu Dhabi Airports departments and external parties, through but not limited to the following means:

- IMS SharePoint
- IMS Steering Committee Meetings
- Safety Action Group Meetings
- Department Meetings
- Monthly reporting
- Quarterly Performance Measure Reporting

- Compliance

6. Monitoring, Evaluation and Review

6.1. This procedure will be reviewed as per ADAC Document Management requirements or when significant changes to regulatory requirements and/or standards are implemented.

6.2. Conditions that might warrant review of this procedure on a more frequent basis would include:

- Organizational needs
- IMS Steering Committee concerns
- Changes in applicable legislation and/or standards.

7. Potential Risks

Risk	Control Measure
No measurement and/or monitoring of IMS performance.	▪ All performance indicators are to be reported and evaluated. ▪ Corrective actions are to be identified and implemented based on the results of performance indicators.

8. Exceptions

This procedure does not include performance monitoring, measurement and report relating to the following activities:

- Aviation related performance monitoring.
- Airport Service Quality

9. Legal Requirements

ISO Standards 9001:2015

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10. Supporting Documentation and Tools

10.1. References

- Abu Dhabi Occupational Safety & Health (ADPHC-SF) Manual
- Abu Dhabi Occupational Safety & Health (ADPHC-SF) Element 7 – Monitoring, Investigation and Reporting, ADPHC– SF
- Abu Dhabi Occupational Safety & Health (ADPHC-SF) Mechanism 6.0 – OSH Performance Monitoring and Reporting
- GCAA – CARs (As Applicable)
- ISO 9001:2015 – Quality Management System Requirements
- ISO 14001:2015 – Environmental Management System
- ISO 45001:2018 – Occupational Health & Safety Management System

10.2. Forms

- Compliance Monthly Report

11. Filing and Distribution

- 11.1. All documents related to IMS are kept in Share Point and employees are informed via email regarding the distribution of core documents such as, IMS Policy, IMS Manual, and IMS Core Procedures and related forms and other department documentation, which will be accessible via IMS Share Point portal. Authorized Departments are responsible for distributing the respective department documentation to concerned parties. Documents are controlled.
- 11.2. Compliance, authorized department members, respective Department Document Controllers, and GMs, will be provided relevant access to all IMS documentation as per respective Share Point workflow.
- 11.3. Records Retention period is for a minimum of five years unless required otherwise by Organizational need, Statutory or Regulatory requirements.

12. Change Log

Version No.	Document Creation, Review, Approval and Change Tracking	Actioned by (Name, Title, Department)	Action Date	Change Effective Date
V1.0	First version published		11/06/2013	
V1.1	Added Forms section 9 Review and Update	AG		
V1.2	Amended to better suit IMS	RA		
V2.0	Change Template and Version No and responsibility as per the current structure.	MS	14/01/2015	15/01/2015
V3.0	Update Template and Version Number	ON	07/09/2016	

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V3.1	Amended Purpose and Scope	AA AN MS GG EU					
	Updated Definition and Abbreviation						
	Update of Procedure Steps						
	Update of Monitoring, Evaluation and Review						
	Update of Potential Risk						
	Update Exceptions						
	Update Supporting Documentation and Tools						
	Update of Change Log						
	Update of Version Number and Date						
	Update of Supporting Documentation and Tools						
V3.2	Update of Version Number and Date	EU		16/05/2019		01/06/2019	
	Update of Procedure Steps						
	Update of Appendix adding the frequency of monitoring						
V3.3	Changed the SOP Owner	MA EU		01/07/2019			
	Update of Definition and Abbreviation						
	Update of Procedure Steps						
	Update of Appendix 1 & 3						
V4.0	Added Legal requirements	MA		1/11/2021			
	Replacing 18001 with 45001:2018 and version number						
	SOP Review						
V4.1	SOP Review and update version date	FA		01/09/2022		01/09/2022	

N.B. This document is UNCONTROLLED unless signed by an authorized person in the appropriate section of this document or viewed in Workflo! on Abu Dhabi Airports Matari-Sharepoint.

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Appendix 1: Positive Performance Measure

Measures the actions performed as part of the IMS designed to measure actions taken to prevent work related injury and/or illness on a monthly basis.

Focus	Performance Indicator	Measure
Training Awareness	& ■ IMS/EHS related training and awareness courses.	■ Number of IMS/EHS related courses conducted per month.
		■ Number of Department / Subsidiary staff that have completed IMS/EHS training courses.
		■ Number of IMS/EHS Induction courses for ADAC New Joiners.
		■ Number of IMS/ESH Induction courses for Contractors.
Risk Management	■ EHS Risk Assessments	■ Number of reviewed and updated Department / Subsidiary RA registers.
		■ Hazards
Inspections	■ EHS Workplace Inspections	■ Number of workplace inspections conducted by Departments / Subsidiaries as per schedule.
		■ Number of workplace inspections conducted by EHS Section as per schedule.
		■ Number of workplace inspection findings rectified within the defined timeframe.
		■ Number of workplace inspection findings rectified within the defined timeframe.
Audits	■ Internal Audits	■ Number of IMS internal audits conducted as per schedule.
		■ Number of internal audit findings rectified within the defined timeframe.
	■ External Audits	■ External audits conducted as per regulatory / standard requirements.
		■ Number of external audit findings rectified within the defined timeframe.
Meetings	■ Management Review	■ Number of management review meetings conducted as per schedule.

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- Number of management review meetings recommendations rectified within the defined timeframe.

Appendix 2: Outcome Performance Indicator

Measures the effectiveness of the implementation of the Integrated Management System on a monthly basis.

Focus	Performance Indicator	Description
Incident Reporting	▪ Near-misses and incidents reported.	▪ The number of occupational safety hazards, near-miss and accidents reported.
Lost Time Injury / Illness	▪ Lost Time Injury Frequency Rate	▪ The frequency detailing the amount of lost time injuries per million hours worked.
	▪ Average time lost rate	▪ The average time away from work per occurrence of injury or illness.
Work Environment	▪ Indoor noise, air quality and illumination	▪ Measurement of IAQ and noise.
Consumption	▪ Utility consumption	▪ Monitoring of energy and water consumption per number of passengers.
	▪ Paper Consumption	▪ Monitoring of paper consumption.
	▪ Fuel Consumption	▪ Monitoring of fuel consumption.
	▪ Bottled – Water Consumption	▪ Monitoring of bottled water consumption
	▪ Waste Recycling	▪ Monitoring of waste recycling.

Appendix 3: Reporting of EHS Performance

The following details the performance indicators that are to be reported to regulatory, ADAC stakeholders and identifies the timeframe for disseminating:

Reporting Mechanism	Reported To	Frequency
Al Adaa – Form E	▪ Department of Municipality (DMT) ▪ ADPHC	Quarterly
Monthly Report	▪ COO Office	Monthly

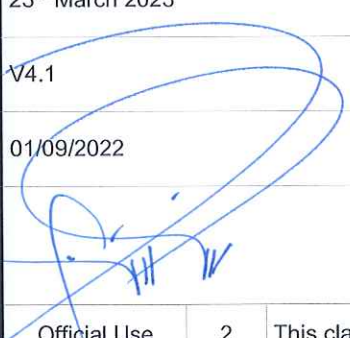
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IMSSC Presentation	▪	IMS Steering Committee	Quarterly
Environment Survey	▪	Statistics Center of Abu Dhabi (SCAD)	Annually
Environment Survey	▪	Environment Agency – Abu Dhabi (EAD)	Annually
Environmental Survey	▪	ACI Asia - Pacific	Annually

STANDARD OPERATING PROCEDURE

Audit & Workplace Inspection

Emergency Services and Compliance

Business Process Area / Functional Area:	Abu Dhabi Airports		
SOP Owner:	EHS & Sustainability		
SOP Ref. No:	ADA/COR/SOP/003-V4.1-01/09/2022		
Implementation Date:	01/11/2021		
Approved By:	Aws Al Khanjari		
Approval Date:	23 rd March 2023		
Version No.:	V4.1		
Version Date:	01/09/2022		
Approver's Signature: (for non-electronic copies)			
Information Classification	Official Use	2	This classification refers to information that is to be used internally by the Abu Dhabi Airports personnel only, and does not fall into the previous three categories. Although unauthorized disclosure of this information is prohibited, in the case that it occurs, it is expected that there will be no serious repercussions to Abu Dhabi Airports, shareholders, employees business partners and /or clients.

A Standard Operating Procedure (SOP) consists of a set of statements describing instructions in an orderly manner for the purpose of achieving a result. SOPs are developed to maximize the efficiency and accuracy of implementation of a policy or operational process.

Template Title:	SOP Template	Template Ref. No.:	TEM/03/SOP/ V4.0/0107201 9	Version No.:	V4.1	Version Date:	01/07/2021
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SOP Title:	Audit & Workplace Inspection Management						
SOP Ref. No.:	ADA/COR/SOP/003	Version No.:	V4.1	Version Date:	01/02/2021	Page:	2/18

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1. Title

Audit & Workplace Inspection Management

2. Purpose

- 2.1. To define and detail processes and methods to ensure consistent, planned and systematic conduct of internal and/or external audits and workplace inspections.
- 2.2. To verify that the implementation of the Abu Dhabi Airports' Integrated Management System continues to be effective and that the activities comply with planned arrangements.
- 2.3. To evaluate whether the system continues to be appropriate for Abu Dhabi Airports for meeting the IMS policy and objectives.
- 2.2. To ensure compliance with applicable regulatory, standards and other requirements.

3. Scope

- 3.1. This procedure applies to all departments, subsidiaries, activities and documents related to the conduct of internal and external audits and workplace inspections.
- 3.2. Applies to Abu Dhabi Airports operated airports, contractors / sub-contractors, service providers, airport tenants, airlines and relevant stakeholders as required.

4. Definitions and Abbreviations

Definitions	Description
Audit	A systematic, independent and documented process for obtaining audit evidence and evaluating it objectively to determine the extent to which the audit criteria are fulfilled.
Audit Criteria	A set of policies, procedures or requirements (used as a reference).
Audit Findings	Results of the evaluation of collected audit evidence against audit criteria
Auditee	Department or Facility being audited. All auditee actions are responsible for the department or facility manager
Auditor/s	A person who is qualified to an international standard and/or has demonstrable auditing experience.
Audit Plan	Description of the activities and arrangements for an audit.
Competent	Having adequate and sufficient training, qualifications and/or experience (or a combination) to be capable of carrying out a task safely and efficiently.

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Corrective Action	- Steps that are taken to remove the causes of an existing non-conformity or undesirable situation. The corrective action process is designed to prevent the recurrence of non-conformities or undesirable situations. - Action to eliminate the cause of a detected non-conformity or other undesirable situation.
Environmental Aspects	Element of an organization's activities or products or services that can interact with the environment.
Environmental Impact	Any change to the environment, whether adverse or beneficial, wholly or partially resulting from an organization's environmental aspects.
Hazard	- Any substance, physical effect, or conditions with a potential to harm people, property or the environment. - Source, situation, or act with a potential for harm in terms of human injury or ill health, or a combination of these.
Non-conformance	- Non-fulfillment of a specified requirement. There is absence in the system elements or part of the system is missing. There was a failure to follow documented systems or procedures. A lapse in the system of procedure or legal compliance. - Any deviation from work standards, practices, procedures, regulations, management system performance etc. that could either directly or indirectly lead to injury or illness, property damage, damage to the workplace environment, or a combination of these.
Non-Conformance Report	A report containing the results of the audit non-conformance, a failure to comply with the requirements of the audit criteria.
Preventive Action	An action taken to eliminate the cause of a potential non-conformity, defect or other undesirable situation.
Third Party Audit	Refer to an annual audit that each entity with an approved OSH MS, in accordance with OSHAD-SF, shall undertake within one year of approval and then in an annual basis thereafter.
Unsafe Work Conditions	An unsafe or unsatisfactory condition existing in a workplace environment that varies from a normal accepted safe condition which has the potential to result in an accident, injury, property or environmental damage, if not corrected immediately and properly.
Unsafe Work Practices	An unsafe act that deviates from a generally recognized way or specified method of doing a job safely which increases the probability for an accident.
Workplace Inspections	Critical examination of work tasks, facilities and equipment during a physical walk-through of an area to determine conformance to applicable requirements, standards and policies.

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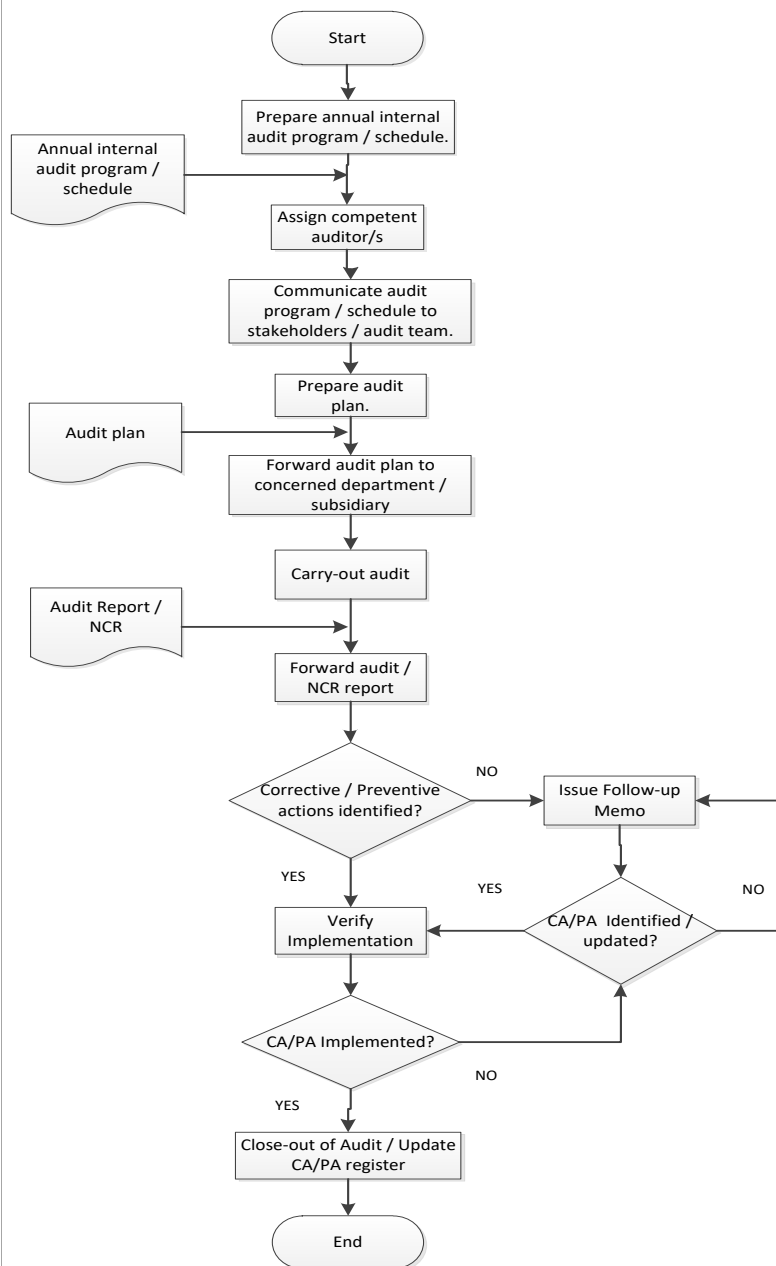
	Three types of workplace inspections: - Scheduled Inspections – deliberate inspections done in regular intervals, such inspections could be of the entire area, facility or a specific type of equipment. May be conducted weekly, monthly, quarterly, semi-annually, annually or other suitable intervals. - Unscheduled – inspections done as a result of incidents, PTW application or as per request.
Abbreviation	Description
ADA	Abu Dhabi Airports
ALARP	As Low As Reasonably Practicable
CA/PA	Corrective Actions / Preventive Actions
DMT	Department Municipality & Transport
EHS	Environment, Health and Safety
ESC	Emergency Services and Compliance
IMS	Integrated Management System
ISO	International Standards Organization
HOD	Head of Department
HOS	Head of Section
MCC	Maintenance Control Center
NCR	Non-Conformance Report
ADPHC	Abu Dhabi Occupational Safety & Health Center
OSHAD - SF	Abu Dhabi Occupational Safety & Health – System Framework
OHSAS	Occupational Health & Safety Assessment Series
PPE	Personal Protective Equipment

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5. Procedure Steps

Responsible Party

Internal Auditing Flowchart



- EHS & Substantiality
- Lead Auditor
- Lead Auditor
- Audit Team
- Lead Auditor
- EHS & Substantiality
- Audit Team

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5.1. General 5.1.1. The Abu Dhabi Airport departments and subsidiaries will be audited against the ADA Integrated Management System, applicable regulatory requirements and other standards. 5.1.2. Management system auditing does not relieve department management from the responsibility of ensuring that adequate safety and hazard controls are in place for all activities for which they are accountable. This includes risk assessments and addressing legal requirements. 5.1.3. Competent staff who are independent of the subject area shall perform internal audits as required.		
5.2. Planned Audit 5.2.1. Establish an internal IMS audit program in which the audits are scheduled for relevant departments / subsidiaries on the basis of risk and importance of the processes and procedures, areas to be audited and results of previous audits. It is however, to ensure that each department or subsidiary will be audited at least once a year. 5.2.2. Identify, select and assign auditor/s to be part of the audit team. 5.2.3. A internal audit notification is forwarded to relevant stakeholders informing them of the audit program. Note: - Unplanned audits may be initiated in the case of changes to the IMS organization, regulations, increased in the number of incidents and/or customer complaints or in order to verify the effectiveness of corrective and/or preventive actions. - Where practicable, audits shall be carried out in accordance with the audit plan in order to verify whether the objectives of the ADA IMS are being achieved. Should serious deficiencies be found or suspected, the auditing of that area shall take precedence over the audit plan and additional audits may be carried out as considered necessary. - The audit team should be selected taking into account the competencies required by the tasks or activities being audited. - For the purpose of objectivity, auditor/s will not be allowed to audit their own department.		EHS & Substantiality
5.3. Notification of Audit 5.3.1. Notify relevant department or subsidiary at least 10 working days prior the audit date to allow those involved to plan accordingly. 5.3.2. Prepare a detailed audit plan based on department / subsidiary structure and activities. Advise members of the audit team. 5.4. Conduct of Audit 5.4.1. Carry-out audit based on the agreed audit plan. Conduct opening meeting and agree on the itinerary. 5.4.2. Ensure that appropriate corrective / preventive action has been taken with regard to all non-conformances identified during previous audits. 5.4.3. Record all relevant observations in appropriate audit form with related document/s attached as basis for the non-conformity. Where practicable, form is to be signed by the auditee before the end of the audit. 5.4.4. Discuss audit findings/deficiencies to ensure that auditee understands the basis of the non-conformances. 5.4.1. In the event that a deficiency is identified which cannot be immediately rectified, the auditee shall be informed that a non-conformance will be issued. 5.4.2. Perform wash-up meeting to review audit findings / observations prior the closing meeting.		- Lead Auditor - Audit Team

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- 5.4.3. Carry-out closing meeting with department representatives enumerating audit findings.

Note:

- Changes to auditor assignments and/or the audit plan are made if necessary to achieve the objectives of the audit.

5.5. Reporting of Audit Findings

- 5.5.1. Review all findings whether they are to be reported as non-conformances or as observations.
- 5.5.2. Consolidate all audit findings for the preparation of the audit report.
- 5.5.3. Prepare and forward audit report to the relevant department within 10 working days of the audit. An agreed time frame for the completion / implementation of the appropriate corrective and/or preventive actions relating to the non-conformances shall be documented on the NCR report.

Note:

- Audit findings shall be supported by an objective evidence.
- The agreed action date should take into account the severity of the non-conformity and the time needed to complete the corrective action.

5.6. Follow-up / Closing of Audit Findings

- 5.6.1. The audit report with the corresponding corrective / preventive actions based on identified audit findings are completed and returned to concerned Lead Auditor based on the non-conformance level.
- 5.6.2. Necessary follow-up activities are determined as corrective actions are submitted for approval.
- 5.6.3. Follow-up activities may be assigned to an auditor as necessary.
- 5.6.4. Follow-up audit findings are recorded in the original non-conformance report and, if satisfactory, the issue is then closed.

Note:

- a. Closure of audit findings will depend on the level of non-conformity as follows:

Level	Closure Timeline
Level 3 / Observation	Within 6 months of receiving the audit report.
Level 2 / Minor	Within 3 months or 60 days (GCAA) of receiving the audit report.
Level 1 / Major	Immediate mitigation up to maximum of 30 days.

- b. Notification on non-closure of audit findings beyond closure timeline or agreed target date shall be done through the following:

Notification	Responsibility	Addressee	Manner
1 st Notice	Snr. Manager Compliance	Department / Subsidiary IMS / EHS Representative	Verbal / E-mail
2 nd Notice	Head of IMS, QA and EHS	Department / Subsidiary Manager	E-mail
3 rd Notice	GM ESC	Department / Subsidiary GM	Memo

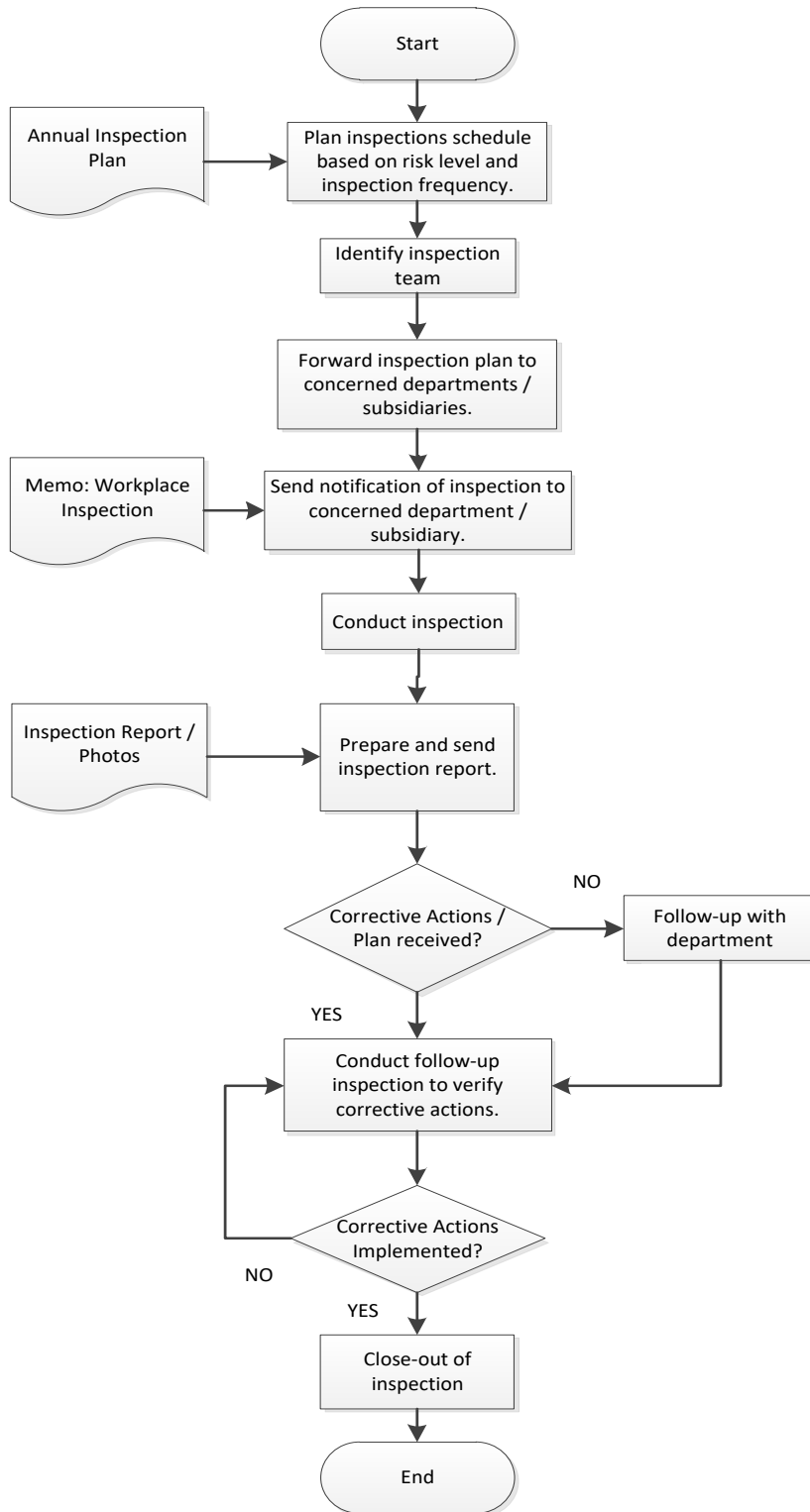
Lead Auditor

Lead Auditor / Auditor

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c. <i>Audit non-conformities are to be communicated during department and management review meetings.</i> d. <i>In the event of the corrective actions is incomplete, a new target date is agreed and the reason for the incomplete actions are noted in the NCR report. This will be reported to the HOD if a persistent problem exists.</i> e. <i>A follow-up audit will be conducted upon elapse of the extended period.</i> f. <i>Outstanding corrective actions will be reported in the Management Review meeting for appropriate action.</i> 5.7. Recording of Audits 5.7.1. Audit non-conformities are to be recorded in appropriate audit form and recorded for monitoring and tracking purposes. 5.8. Communication of Audit Findings 5.8.1. Audit results are communicated to the concerned functional heads for initiating corrective / preventive action without delay. 5.8.2. Audit results / conclusions are communicated to management through the Management Review process. 5.9. Auditor Competency 5.9.1. Assigned auditors must be appropriately trained and experienced. 5.9.2. Auditors must be approved. 5.9.3. OSH professional entity shall be registered as per requirements of OSHAD – SF Mechanism 7.0 – OSH Professional Entity Registration. 5.9.4. OSH Auditor shall be registered as per requirements of OSHAD – SF Mechanism 8.0 – OSH Practitioner Registration. 5.10. Audit Methodology 5.10.1. Conduct of audit should be in accordance with the requirements of ISO 19011:2018. 5.10.2. Third party OSH MS audit should be in accordance with the requirements of OSHAD – SF (Abu Dhabi Occupational Safety & Health – System Framework). 5.11. External / Third Party Audit A systematic, independent and documented process for obtaining audit evidence and evaluating it objectively to determine the extent to which the audit criteria are fulfilled. 5.11.1. Annual or semi-annual audits are conducted depending on the requirements of the audit criteria and/or scope or the regulatory. 5.11.2. Audit plan is forwarded by the third party auditor and communicated to concerned departments. 5.11.3. Audit is carried-out based on the agreed audit schedule and plan. 5.11.4. Non-conformities are communicated to concerned departments once the audit report is received. 5.11.5. An audit register based on the audit report is communicated to departments to ensure closure of non-conformities before the next audit. 5.11.6. 2nd party audits on service providers / contractors are carried-out in coordination with relevant departments or subsidiaries. 5.11.7. 3rd Party external audit report on are submitted to relevant regulator as required.	▪ EHS & Substantiality
Workplace Inspection Flowchart	

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- Department Management
- EHS & Substantiality

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5.12. General

Workplace inspections are planned, systematic appraisals of the workplace to:

- Identify occupational safety and health hazards.
- Identify where workplace environmental aspects / impacts can be minimized.
- Assess and control risk.
- Ensure safe and healthy working environment.
- Minimized environmental risks of maintenance activities.
- Support compliance with applicable EHS regulatory requirements.

EHS issues can often be identified and resolved before any harmful event takes place. Periodic inspections of the workplace also allow discussion with staff on occupational safety, health and environmental issues.

There is no prescriptive method for undertaking an inspection. It is preferable for department/subsidiaries to develop a method that works efficiently and effectively for them.

- The following criteria should be referred to prior commencing any inspection/s:
 - Applicable regulatory requirements
 - Previous audit / inspection reports
 - Risk assessment registers
 - Accident / injury reports
 - Standard operating procedures

Note:

- *Department Management are to ensure that inspections are carried-out in their respective areas to identify and correct workplace hazards that could lead to accidents.*
- *Assigned inspector should competent to undertake the inspection, both in terms of principles of inspections and the tasks/activity/area they are inspecting.*

5.13. Inspection program

- 5.13.1. Establish a workplace inspection program based on department and /or subsidiary risk level or activity, results of previous inspections and number of incidents reported.
- 5.13.2. Identify and assign competent inspectors to carry-out the inspection.
- 5.13.3. A notification will be issued to concerned department / subsidiary informing them of the inspection schedule.

5.14. Frequency

- 5.14.1. Workplace inspection frequency is based on the level of risk associated with the nature of the work environment.
- 5.14.2. Inspections are scheduled at a time that will allow maximum opportunity to view operations and work practices, with minimum interruption of them.
- 5.14.3. Inspections must be done at intervals that will prevent the development of unsafe working conditions and unsafe work practices.

Note:

- *Department management to conduct periodic/regular inspection of their workplace.*
- *EHS Section to conduct annual workplace inspection per area in coordination with the concerned department/s.*

- Department Management
- EHS & Sustainability

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▪ <i>Results of the inspection are communicated to staff and discussed during department meetings.</i>	
5.15. Conduct of Inspection 5.15.1. Periodic / Planned ▪ Schedule periodic inspection of their respective work areas. ▪ Department management shall be contacted prior start of the inspection. ▪ A representative from the department / subsidiary to be inspected will be assigned to accompany the inspector during the course of the inspection will be assigned. However, the inspector must preserve his independence and make his own observations. ▪ The supervisor or person-in-charge shall be consulted prior start of the inspection In the event that a representative is not available. Note: ▪ <i>When necessary to observe workers, the inspector should explain to the worker the reason for the observation and ask his permission to watch him as he works.</i> ▪ <i>Observations and recommendations are to be discussed with the supervisor or person in-charge of the area after the inspection.</i> ▪ <i>Inspectors are to be aware of any hazards they may encounter during the inspection. Inspectors are to utilized appropriate PPE during the inspection.</i> 5.15.2. Unscheduled / Random Inspection ▪ A report will be issued to the concerned department or subsidiary for the hazardous conditions or practices observed during the inspection. ▪ Concerned department or subsidiary will be given a timeframe for correcting the observations based on the hazard observed. 5.15.3. Inspection Checklist ▪ Inspection checklist assist in the inspection process and serve as a guide to ensure that all items are covered during the inspection. It also is used for recording information and triggering questions during the inspection. However, the inspector should be aware that the checklists does not define the scope of the inspection, it simply point out the type of things to look for. ▪ Inspection checklist should never be considered as permanent lists. It should be reviewed and revised as necessary. Note: <i>The inspector may or may not use an inspection checklist during the course of the inspection provided that all hazards are identified and recorded accordingly.</i> 5.15.4. Documentation of Inspection A well written inspection report will establish the location of the condition of action observed. It wil also provide guidelines recommending corrective actions and assign accountability for ensuring corrective actions by certain date. ▪ Recorded observations will be classified with corresponding hazard/risk rating:	▪ Department Management ▪ EHS & Sustainability

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Hazard Rating	Description
Low "C"	Any condition or practice with a probable potential for causing a non-disabling injury or non-disruptive property damage (ie., handling of chemicals without appropriate PPE; use of defective hand tools; damaged ladders; etc.)
Medium "B"	Potential for causing serious injury, illness or property damage (ie. Spillage on walkway, open drawer, etc.)
High "A"	Potential for causing permanent disability, fatality, and/or extreme loss of structure, equipment or material (ie., unguarded equipment)

- Record any items that are not up to standards. Do not eliminate any condition or action because you had it corrected during the inspection. Please note that you are developing a record of what was observed during that inspection. Items observed from previous inspections should be noted as "RECURRING" items.
 - Copies of inspection reports must be forwarded to:
 - HOD / HOS
 - EHS Section
- 5.15.5. Non-Conformities

- Non-conformities within the control of the department manager should be rectified as soon as possible (e.g., housekeeping, loose cables).
- Short term control measures to minimize or eliminate risks must be put in place for non-conformances which could not be rectified immediately.
- MCC should immediately be notified for building / equipment maintenance issues not within control of the department manager. These works may be undertaken by any trade or combination of trades within Facility Management department.
- The responsible supervisor or manager must be informed of hazards posing an immediate danger so that corrective action/s can be taken accordingly after the inspection.
- Information obtained from regular inspections should be reviewed carefully to identify trends and to help monitor the effectiveness of ADA IMS program.
- Non-conformances should be recorded and monitored.

▪ Department Management

Note:

1. Closure of inspection findings will depend on the level of hazard rating.

Level	Closure Timeline
Low Risk "C"	▪ Situation is not an emergency, but the hazard needs to be eliminated without delay.
Medium Risk "B"	▪ Action required today. ▪ Activity can only proceed provided that: ○ Risk level has been reduced to ALARP ○ Risk controls must include those identified in legislation. ○ Risk assessment has been reviewed and approved.

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High Risk "A"

- Immediate action required.
- Task or activity must not proceed
- Steps must be taken to lower the risk level to ALARP using the hierarchy of control.

- In the event of the corrective actions is incomplete, a new target date is agreed and the reason for the incomplete actions are noted in the inspection report. This will be reported to the HOD if a persistent problem exists.
- A follow-up inspection will be conducted upon elapse of the extended period.
- Notification on non-closure of inspection findings beyond closure timeline or agreed target date shall be done through the following:

Notification	Responsibility	Addressee	Manner
1 st Notice	Snr. Manager Compliance	Department / Subsidiary IMS/EHS Representative	Verbal / E-mail
2 nd Notice	Head of IMS, QA and EHS	Department / Subsidiary Manager	E-mail
3 rd Notice	GM ESC	Department / Subsidiary GM	Memo

- Outstanding corrective actions will be discussed in Management Review meeting for appropriate action.

5.15. Review of Inspection

- Information obtained through inspections must be reviewed and decisions taken as soon as possible as to the action required. In some cases immediate action can be taken, in other cases action will be recommended to the next level of supervision, and in other cases review may be required prior to any action being taken. It is important to correct the underlying cause of the problem.
- Review of inspection reports over a period of time will assist the department to identify needs and establish priorities, improve safe work practices, identify areas that require more in-depth analysis and highlight the need for training.
- A timely response is important to validate the activity.
- Justification or reasons for non-closure should be agreed on if no action is done / plan on recommendations provided.

- HOD
- HOS
- EHS & Sustainability

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6. Monitoring, Evaluation and Review

- 6.1. Periodic monitoring and evaluation of corrective and preventive actions based on follow-up audits and workplace inspections conducted.
- 6.2. Evaluation of audits is done by the Head of Aerodrome Certification for SMS and Senior Manager Compliance and EHS for other areas
- 6.3. A review and update of this procedure at every year, as deemed necessary or when significant changes to regulatory requirements are implemented.
- 6.4. Airport tenants (ie. concessionaires, etc.) and airlines (ie. Etihad, etc.), are responsible for the conduct of periodic audits and inspections in their respective areas of responsibility.

7. Potential Risks

Risk	Control Measure
7.1. Non-conduct of scheduled audits and workplace inspections could result in: 7.1.1. non-compliance with applicable legal and other requirements. 7.1.2. penalty from regulatory agency 7.1.3. incidents / accidents 7.2. Recommended corrective actions as a result of audit and workplace inspections not implemented. 7.3. No follow-up / verification on implementation of recommended corrective actions based on agreed timeline. 7.4. Incompetent auditors and inspectors.	▪ Monitoring to ensure that scheduled audits and workplace inspections are carried out as per recommended time frame. ▪ Department managers to ensure that recommended corrective measures are implemented as per agreed time frame. ▪ IMS Section / concerned auditors to ensure implementation of corrective actions by conducting follow-up / verification audits. ▪ Designated auditors and inspectors are provided appropriate training prior conduct of audit / inspections.

8. Exceptions

This procedure does not include the following process:

- 8.1. Fire Safety related audits and inspections.
- 8.2. BCM related audits and inspections.
- 8.3. Finance related audits and inspections.
- 8.4. Airport Service Quality audits and inspections.
- 8.5. Airport tenants and airlines related audits and inspections.

9. Legal Requirements

This section is to specify what Laws, Regulations, standards or guidelines the department deal with in this SOP. If not applicable, to mention N/A in this section.

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10. Supporting Documentation and Tools

10.1 References

- Abu Dhabi Occupational Safety & Health Manual (OSHAD-SF)
- OSHAD – SF Element 8 – Audit and Inspection
- OSHAD-SF Technical Guideline, Audit and Inspection
- OSHAD-SF Mechanism 7.0 – OSH Professional Entity Registration
- OSHAD-SF Mechanism 8.0 – OSH Practitioner Registration
- GCAA CAR PART IX – Aerodrome Regulations
- GCAA CAR PART X – Safety Management System
- ISO 9001: 2015 – Quality Management System
- ISO 14001:2015 – Environmental Management System
- ISO 45001:2018 – Occupational Health & Safety Management System
- ISO 19011:2018 – Guidelines for Auditing Management System

10.2 Forms

- Internal Systems Detailed Audit Plan
- Audit Steps Card
- EHS Workplace Inspection
- EHSMS Internal Audit Checklist
- IMS Audit Attendance
- IMS Audit for Non-Conformance Register
- IMS Audit Report
- IMS Self-Assessment Checklist
- Non-Conformity Report
- Workplace Inspection Report

11. Filing and Distribution

11.1 Department / Subsidiaries shall keep corrective action records for audits and inspection for a period of 5 years.

11.2 Compliance shall keep audit and workplace inspection records for a period of 5 years.

11.3 Master copy of this procedure shall be filed by Compliance department and uploaded to Matari.

12. Change Log

Version No.	Document Creation, Review, Approval and Change Tracking	Actioned by (Name, Title, Department)	Action Date	Change Effective Date
V1.0				
V1.1	Updated to combine SSE and EHS audit methodologies	AG		
V1.2	Editorial changes added approver VP SSE	RA		

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	Added forms section 9			
V1.3	Updated to address links with EHS risk assessments and legal register	AG		
V1.4	Added workplace inspection procedures.	EU		
V1.5	Change the Templates and Ref. No.	MS		
V2.0	Amendment to Cover Page & Version Amendment of Title Amendment of Purpose Amendment of Scope Amendment of Definition & Abbreviation Added Roles & Responsibilities Amendment of Procedure Steps Amendment of Monitoring, Evaluation & Review Amendment of Potential Risk Amendment of Exception Amendment of Support Documents & Support Tools Amendment of Filing & Distribution Amendment of Change Log	ON AA AN MS GG EU	03/08/16	01/01/2017
V2.1	Updated Purpose Updated procedure steps 5.9 & 5.10 Update of Supporting Documentation & Tools	EU	01/08/2017	01/12/2017
V2.2	Changed the title name from Senior Specialist IMS Compliance to Senior Office IMS Compliance Changed ref. OSHAD SF Glossary of Terms V3.0 July 2016 to V3.1 March 2019	MA	26/02/2019	26/02/2019
V2.3	Update of Title Page Amended Header Version and Date Update of Definition and Abbreviation Update of Procedure Steps Update of Exception	EU	14/11/2019	

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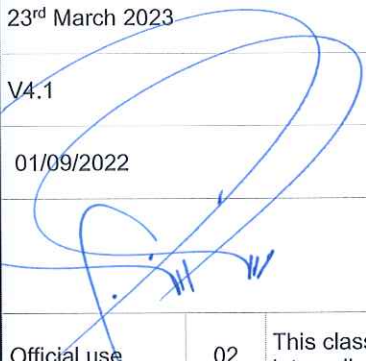
	Update of Supporting Documents & Tools Update of Change Log			
V3.0	Adding Legal Requirements	MA	01/07/2019	
V4.0	Replacing 18001 with 45001:2018 and version number	MA	1/2/2021	
V4.1	SOP Review and change version date	FA	01/09/2022	01/09/2022

N.B. This document is UNCONTROLLED unless signed by an authorized person in the appropriate section of this document or viewed in Workflo! on Abu Dhabi Airports Matari-Sharepoint.

STANDARD OPERATING PROCEDURE

Control of Non Conformances and Corrective and Preventive Action

Integrated Management System

Business Process Area / Functional Area:	Integrated Management System (IMS) Management (MA)		
SOP Owner:	EHS & Sustainability		
SOP Ref. No:	ADA/COR/SOP/009/V4.1-01/09/2022		
Implementation Date:	01/11/2021		
Approved By:	Aws Al Khanjari		
Approval Date:	23 rd March 2023		
Version No.:	V4.1		
Version Date:	01/09/2022		
Approver's Signature: (for non-electronic copies)			
Information Classification	Official use	02	This classification refers to information that is to be used internally by the Abu Dhabi Airports personnel only.

A Standard Operating Procedure (SOP) consists of a set of statements describing instructions in an orderly manner for the purpose of achieving a result. SOPs are developed to maximize the efficiency and accuracy of implementation of a policy or operational process.

Template Title:	SOP Template	Template Ref. No.:	TEM/03/SOP/V4.0107 2019	Version No.:	V4.0	Version Date:	01/07/2019
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1. Title

Control of Non Conformances Corrective and Preventive Action.

2. Purpose

- 2.1. To ensure compliance with DMT, ADPHC, GCAA and other applicable regulatory requirements and standards.
- 2.2. This procedure documents measures taken by Abu Dhabi Airports departments and subsidiaries to rectify identified non conformances and to ensure necessary corrective and/or preventive actions are taken in a timely and effective manner.
- 2.3. This procedure outlines the process for corrective actions initiated as a result of non conformances or non compliances identified during monitoring and measurement activities; internal audits, management reviews and performance reviews against measures and targets of Abu Dhabi Airports Operations department and subsidiaries.
 - To establish and specify systematic steps for corrective action in the resolution of IMS related problems
 - To analyze and resolve IMS related problems
 - To create a permanent solution that prevents recurrence of nonconformance or potential nonconformance
- 2.3. Identify potential areas for improvement.

3. Scope

- 3.1. This procedure applies to non-conformances identified during audits, workplace inspections and incident / accident investigations.
- 3.2. It applies to all staff, contractors and visitors and refers to potentially hazardous processes, materials, equipment and the environment.
- 3.3. This procedure consists of two sub-procedures:
 - Control of Non Conformances: To identify the non conformance and propose a corrective & preventive action plan for implementation.
 - Corrective/Preventive Action: To act on the non conformance corrective & preventive action plan based on a systematic root cause analysis and action proposed for improvement.

4. Definitions and Abbreviations

Definitions	Description
Audit	A systematic, independent and documented process for obtaining audit evidence and evaluating it objectively to determine the extent to which audit criteria are fulfilled.

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Corrective Actions	Steps that are taken to remove the causes of an existing non-conformity or undesirable situation. The corrective action process is designed to prevent the recurrence of nonconformities or undesirable.
Correction	Action to eliminate a detected nonconformity.
Root Cause	The initiating event that begins the chain of events that leads to an incident.
Root Cause Analysis	A structured step by step technique that focuses on finding the real cause of a problem and dealing with it rather than merely dealing with its symptoms.
IMS Audit	A systematic and documented verification process of objectively obtaining and evaluating evidence to determine whether ADA is conforming to planned IMS arrangements.
IMS Management Audit	Part of the organization's management system used to develop and implement its IMS policy and manage its IMS risks. Is a set of interrelated elements used to establish policy and objectives and to achieve those objectives.
Integrated Management System Steering Committee (IMSSC)	A committee that decides on the Integrated Management System priorities and manages the general course of its operation to support Abu Dhabi Airports commitment and ensure compliance to the ISO 9001, ISO 14001 and ISO 45001:2018 certifications and legal requirements.
IMS Internal Auditors	A person who is qualified to an international standard and/or has demonstrable auditing experience OSH audits.
Non-conformance	Is a non-fulfillment of a requirement. Specifically, a nonconformance is any deviation from work standards, practices, procedures, regulations, management system performance etc. that could either directly or indirectly lead to injury or illness, property damage, damage to the workplace environment, or a combination of these.
Preventive Action	A pro-active and involves taking action before an incident occurs, by identifying a hazard and taking steps to prevent any incident which may result from the hazard
Workplace EHS Inspections	Planned, systematic appraisals of physical aspects of the workplace that identify EHS hazards and non-compliance with ADA policies, procedures and practices and applicable legal requirements.
Abbreviations	Description
ADA	Abu Dhabi Airport
CA/PA	Corrective Action / Preventive Action
DMT	Department Municipality of Transport
EAD	Environmental Agency of Abu Dhabi

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EHS	Environment, Health & Safety
ESC	Emergency Services & Compliance
HOD	Head of Department
HOS	Head of Section
FANR	Federal Authority on Nuclear Research
GCAA	General Civil Aviation Authority
IMS	Integrated Management System
IMSSC	Integrated Management System Steering Committee
ISO	International Standards Organization
OHSAS	Occupational Health & Safety Assessment Series
ADPHC	Abu Dhabi Public Health Center
PMP	Performance Management Program
SAG	Safety Action Group
SMS	Safety Management System
SRB	Safety Review Board
SRC	Safety Review Committee

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5. Procedure Steps	Responsible Party
<pre> graph TD Start([Start]) --> Identify[Identify Non Conformity] Inputs[Audits Inspections Incident Investigations Performance Review Surveys] --> Identify Identify --> Document[Documentation and Recording of Non Conformity] Document --> Evaluate[Evaluate Non Conformity / identify Root cause] Evaluate --> Implement[Identify / implement appropriate corrective / preventive actions / plan] FollowUp[Follow-Up Corrective / Preventive Actions / Plan] --> Implement Implement --> Decision{Corrective / Preventive Actions Effective?} Decision -- No --> Evaluate Decision -- Yes --> Closure[Closure / Update CAPA Register] Discuss[Discuss in Management Review] --> Closure Closure --> End([End]) </pre>	▪ HOD ▪ HOS ▪ IMS Representatives ▪ IMS Internal Auditors
5.1. General Where non-conformities are identified through the Abu Dhabi Airports IMS or through monitoring and review shall implement CA/PA to mitigate their impact. CA/PA is the systematic investigation of discrepancies in an attempt to prevent their recurrence or prevent occurrence. Note: Refer to Appendix 1	
5.2. Identification of Actual and Potential Non-conformities 5.2.1. The identification of the non-conformity depends on the origin as explained below: ▪ Nonconformance to Standards (i.e. ISO 9001:2015, ISO 14001:2015, OHSAS, GCAA 45001:2018);	▪ IMS Internal Auditor ▪ IMS Representative ▪ HOD ▪ HOS

5.2.2. Identification of these non conformities is done through internal & external IMS Conformance Audits. 5.2.3. Reporting is done using the Non conformity Audit report. 5.2.4. Non conformance to Measures & Targets: ▪ Corporate Measures & Targets, through the Corporate Balanced Scorecard ▪ Departmental Measures & Targets ▪ Individual targets in PMP 5.2.5. Non conformity detected through Customer Complaints 5.2.6. Non conformance to Rules & Regulations: 5.2.7. Non conformities identified during the assessment & compliance visits of regulatory bodies (ie. OSHAD, DOT, FANR, GCAA, EAD, etc.).	
5.3. Documenting a Non conformity: Actual and potential nonconformities shall be documented and reported. 5.3.1. Actual and potential nonconformities shall be documented and reported using the Non Conformity Report Form. 5.3.2. Nonconformities are recorded in the Department CA/PA Register. 5.3.3. Nonconformities are discussed during the IMS Steering Committee and Department Management meetings.	▪ IMS Representative
5.4. Evaluation of the Non conformity: The evaluation of the non conformity is done by the respective person responsible in order to take the appropriate action. 5.4.1. In case of any difficulties this person will take the support from his line manager. 5.4.2. The non conformity should be agreed with the respective person and in case of any dispute this will be tackled by the Head of the department.	▪ IMS Representative
5.5. Identify actions to overcome the non conformity: Subsequent to identifying a non conformity, a correction must be taken to eliminate the detected non conformity, if required. 5.5.1. The actions taken to overcome the non conformity are decided based on the type, effect of the non conformity and the root cause analysis. 5.5.2. Evaluate the need to take actions to overcome the non conformity to prevent recurrence. 5.5.3. The action could either be corrective and/or preventive. 5.5.4. These actions are recorded and monitored to ensure implementation.	▪ HOD
5.6. Review & Closure of Non conformity: The review and closure of a non conformity is done according to the type of non conformity as explained below. 5.6.1. Non conformity to standards: ▪ The closure of the non conformities identified during internal IMS audits is done either through follow up audits or by remote review of submitted documentary evidence.	▪ HOD

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- The closure of the non conformities raised during the External Audits is verified during the follow up audits. - The closure of non conformities raised during EHS workplace inspections. - The closure of non conformities raised as a result of hazard and incident investigation exercise.		
5.6.2.	Non conformance to Measures & Targets	
5.6.3.	Non conformance to Regulations	
5.6.4.	The closure of the non conformance requires evaluating effectiveness of the Corrective/Preventive actions which is done on case by case basis, however the below methods could be used to evaluate the same: - Impact on Environment, Health & Safety - Impact on Aviation Safety regulations - Impact on Customers. - Impact on procedures - No recurrence of the non conformity	
5.7.	Communication of Corrective and Preventive Actions The status of corrective and preventive actions shall be summarized as part of the management review meetings (ie., IMSSC, SAG, SRB, SRC, etc.) and discussed in department meetings.	HOD

6. Monitoring, Evaluation and Review

- ESC & SMS shall be responsible for monitoring of corrective / preventive action plans and for gathering and analyzing information such as non-conformity reports as a result of internal audits, inspections, external audits and regulatory audits, customers feedback and incident investigations.
- Review and evaluate the status of corrective and preventive action plans shall be done periodically or as deemed necessary by the IMSSC.
- Head of Operation Compliance and Head of Airside Safety and Standards have the responsibility to review and update of this procedure in consultation with concerned departments and subsidiaries.
- The IMS Section will monitor and review the status of all open nonconformances and remind department management of closure as per agreed timeframe.

7. Potential Risks

Risk	Control Measure
7.1. Not implementing corrective and preventative actions planned	% of corrective actions planned and implemented % of preventive actions planned and implemented
7.2. Not closing Non-conformities	% of closed non conformities on time % of open non conformities and age analysis

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8. Exceptions

This procedure does not include the following processes:

- 8.1. Non-conformities of airport tenants and airlines as a result of internal audits, inspections and incident investigations.

9. Legal Requirements

This section is to specify what Laws, Regulations, standards or guidelines the department deal within this SOP. If not applicable, to mention N/A in this section.

10. Supporting Documentation and Tools

10.1 References

- Element 8 – OSHAD SF
- ISO 14001:2015 – Environmental Management Systems
- ISO 45001:2018 – Occupational Health & Safety Management System
- ISO 9001:2015– Quality Management System

10.2 Forms

- IMS Corrective/Preventive Action Register

11. Filing and Distribution

- 11.1 Corrective and preventive action plans are documented and records maintained by concerned Abu Dhabi Airports Departments and Subsidiaries with copies retained at CEHS or IMS internal audits and third party certification audits conducted by DMT, ISO & OHSAS certification bodies. Respective airport Airside Safety and Standards section will maintain records for GCAA audits. Reference based on the table below.

Responsibility	Records	Retention Period
Department/Subsidiaries	Hazards and incident report	5 years
	Minutes of Meeting	5 years
	Records of IMS Audits: ▪ Self Audits ▪ Internal Audits ▪ External Audits (Certification and regulatory Audits)	5 years
	Records of corrective and preventive actions taken and controls used to address system or procedural deficiencies and non-conformances.	5 years
Compliance and EHS	Records of workplace inspections	5 years
	Hazard and Incident Report	5 years
	Policy Documentation	5 years

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	Records of Audits: - Self Audits - Internal Audits - External Audits (Certification and regulatory Audits)	5 years
	Minutes of Meeting	5 years

12. Change Log

Version No.	Document Creation, Review, Approval and Change Tracking	Actioned by (Name, Title, Department)	Action Date	Change Effective Date
V1.0	First version published			
V1.1	Editorial Changes	RA		
V1.2	Addition of Sub-Process	RA		
V2.0	Change SOP Template and version No. Updated responsibility based on the current structure	MS	14/01/2015	15/01/2015
V3.0	- Update SOP Template and Version No. - Updated Purpose - Amended Definition and Abbreviation - Update of Procedure Steps - Update of Supporting Documents & Tools - Updated Filing & Distribution - Amended Change Log - Added Appendix 1	ON AA AN MS GG EU	04/09/2016	
V3.1	- Update of Title Page, version number and version date - Amended DMAT to DOT	EU	28/02/2018	01/03/2018
V3.2	- Update Clause 5 Procedure Steps 5.2.1 - Update Clause 9 Supporting Documents and Tools 9.1 - Update Clause 4. Definitions and Abbreviations - Changed ref. OSHAD SF Glossary of Terms V3.0 July 2016 to V3.1 March 2019	MA	07/04/2019	
V3.3	- Update point 2.1 - Update Definitions and abbreviations - Update Point No. 5.2.1 & 5.2.2 - Change SOP Owner	EU & MA	03/11/2019	
V3.4	Update with Legal Requirements	MA	01/07/2019	
V4.0	ISO 45001:2018 - Occupational health and safety management systems	MA	01/02/2021	
V4.1	SOP Review and update of version	FA	01/09/2022	01/09/2022

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SOP Title:	Control of Non Conformances, Corrective and Preventive Action						
SOP Ref. No.:	ADA/COR/SOP/009	Version No.:	V4.1	Version Date:	01/11/2021	Page:	12/12

Appendix 1

Corrective and Preventive Actions Management Process**1. Identify conformity:**

The non conformities are identified during the IMS Audits, inspections, incidents/accidents investigations, IMS performance review and the Customer satisfaction Surveys

2. Perform root cause analysis:

In order to ensure taking the proper action due to specific non conformity a root cause analysis is done.

3. Identify the appropriate action:**Correction:**

Is the action taken immediately once the non conformity is identified to eliminate the detected non conformity , it is considered as a quick fix of the problem and should be followed with a proper root cause analysis to take a proper corrective/preventive action

Corrective Actions identification:

The corrective actions are identified by the respective person responsible where the non conformity was raised.

If the corrective action requires budget allocation it should be approved by the Management Review Board.

The corrective action taken could be classified either as a major task /action plan or as a project.

Preventive Actions identification:

The need of preventive actions to overcome a potential non conformity is determined by one of the following:

- Trend analysis
- Monitoring
- Risk Assessment
- Evaluation of non conformities occurred in similar circumstances
- Other means

Once the need is identified the respective employee will identify the detailed action needed after receiving the preventive action request.

If the preventive action requires budget allocation it should be approved by the IMSSC.

The corrective action taken could be classified either as a major task /action plan or as a project.

4. Action Implementation:

Each Head of Department is responsible to ensure implementations of the actions allocated to his /her area through facilitation by the respective IMS Representative.

5. Monitor Action Implementation:

Each Head of Department is responsible to ensure action plan implementation and is accountable for its effective implementation.

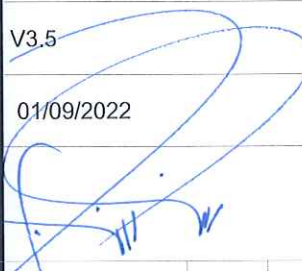
Collecting the update regarding the status of the action implementation is done by the Head of Operations Compliance, Head of Airside Safety and Standards and IMS Representatives.

A consolidated report of all the actions taken is prepared by the Head of Operations Compliance and Head of Airside Safety and Standards to be presented during the management review of IMSSC.

STANDARD OPERATING PROCEDURE

Regulatory and Other Requirements

Emergency Services and Compliance

Business Process Area / Functional Area:	Abu Dhabi Airports		
SOP Owner:	EHS & Sustainability		
SOP Ref. No:	ADA/COR/SOP/001-V3.5-01/09/2022		
Implementation Date:	01/11/2021		
Approved By:	Aws Al Khanjari		
Approval Date:	23 rd March 2023		
Version No.:	V3.5		
Version Date:	01/09/2022		
Approver's Signature: (for non-electronic copies)			
Information Classification	Official Use	2	This classification refers to information that is to be used internally by the Abu Dhabi Airports personnel only, and does not fall into the previous three categories. Although unauthorized disclosure of this information is prohibited, in the case that it occurs, it is expected that there will be no serious repercussions to Abu Dhabi Airports, shareholders, employees, business partners and/or clients.

A Standard Operating Procedure (SOP) consists of a set of statements describing instructions in an orderly manner for the purpose of achieving a result. SOPs are developed to maximize the efficiency and accuracy of implementation of a policy or operational process.

Template Title:	SOP Template	Template Ref. No.:	TEM/03/SOP/ V4.0/0107201 9	Version No.:	V3.5	Version Date:	01/11/2021
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SOP Title:	Regulatory and Other Requirements						
SOP Ref. No.:	ADA/COR/SOP/001	Version No.:	V3.5	Version Date:	01/11/2021	Page:	3/10

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SOP Title:	Regulatory and Other Requirements						
SOP Ref. No.:	ADA/COR/SOP/001	Version No.:	V3.5	Version Date:	01/11/2021	Page:	4/10

1. Title

Regulatory and Other Requirements

2. Purpose

- 2.1. To ensure compliance with applicable regulatory and other requirements by identification and timely update of all relevant statutory, regulatory and other requirements pertaining to aviation, quality, occupational health and safety, and environmental protection applicable to the activities and services at the Abu Dhabi Airports.
- 2.2. To identify the control measures in place to ensure compliance with these requirements.
- 2.3. Access to regulatory and other standard requirements applicable to airport operations and/or activities.

3. Scope

The procedure applies to:

- 3.1. Aviation, quality, occupational health & safety, and environmental protection for Abu Dhabi Airports and its subsidiaries.
- 3.2. All staff and contractors involved in work undertaken by and for the Abu Dhabi Airports.

4. Definitions and Abbreviations

Definitions	Description
Contractor	A person, organization, their employees or a nominated representative engaged to carry out work for the nominated entity in a contract for service arrangement.
Regulatory Requirement	UAE and/or Abu Dhabi Laws, Regulations, Decrees and any requirements relevant to the scope of this SOP. It also refers to any international standards or treaties to which the UAE / Abu Dhabi is a signatory, or which they have agreed in principle to implement as applicable to the Scope of this SOP.
Other Requirements	Includes both IMS requirements and any other requirements to which Abu Dhabi Airports has committed to or voluntarily subscribed.
Abbreviations	Description
DMT	Department of Municipality & Transport
HOD	Head of Department
EHS	Environment, Health and Safety

SOP Title:	Regulatory and Other Requirements						
SOP Ref. No.:	ADA/COR/SOP/001	Version No.:	V3.5	Version Date:	01/11/2021	Page:	5/10

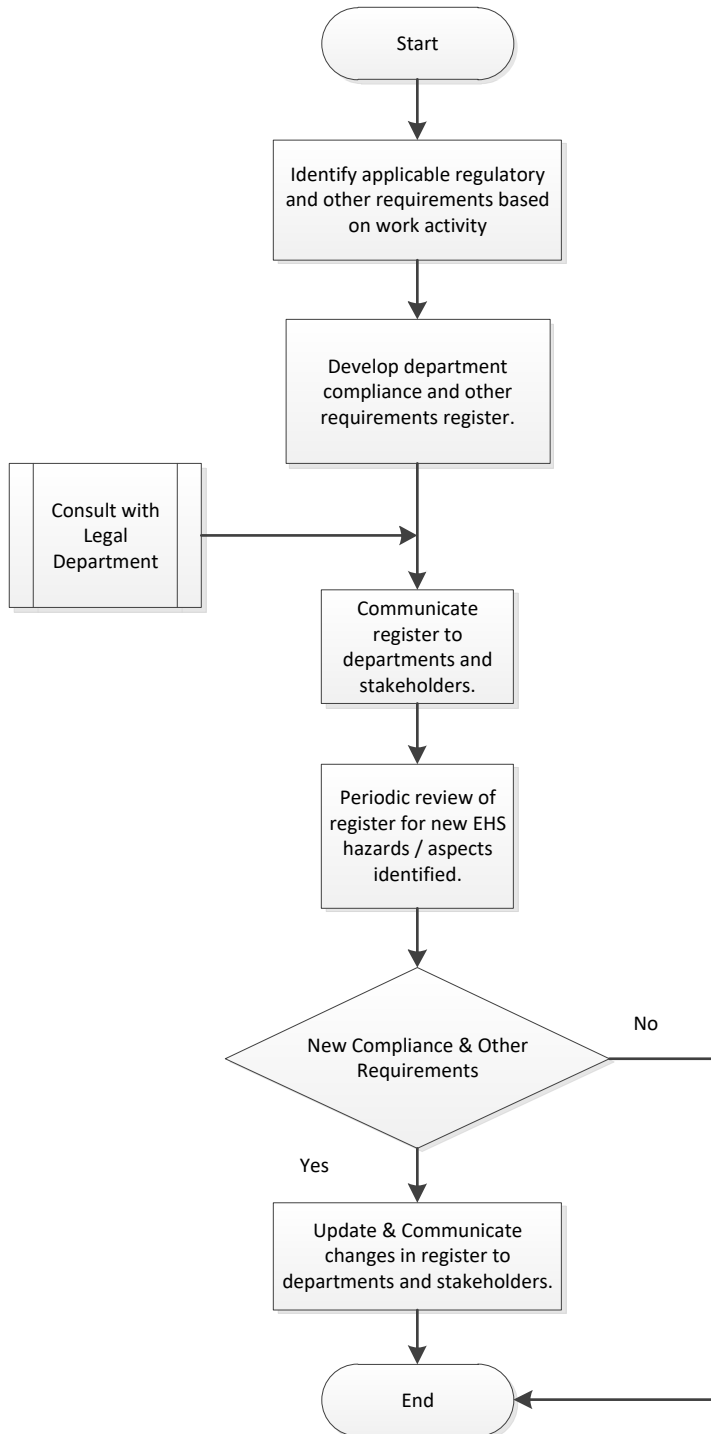
EHSMS	Environment, Health and Safety Management System
IMS	Integrated Management System
ISO	International Organization for Standardization
ISO 9001	Quality Management System
ISO 14001	Environmental Management System
OHSMS	Occupational Health & Safety Management System
ISO 45001:2018	Occupational Health and Safety Management System
ADPHC	Abu Dhabi Public & Health Center

SOP Title:	Regulatory and Other Requirements					
SOP Ref. No.:	ADA/COR/SOP/001	Version No.:	V3.5	Version Date:	01/11/2021	Page: 6/10

5. Procedure Steps

Responsible Party

Identification of Applicable IMS Regulatory Compliance and Other requirements



- HOD
- Compliance
- Contractor

SOP Title:	Regulatory and Other Requirements						
SOP Ref. No.:	ADA/COR/SOP/001	Version No.:	V3.5	Version Date:	01/11/2021	Page:	7/10

5.1. General	
The Abu Dhabi Airports shall follow relevant Federal, Local Laws and Regulations applicable to its activities. Any new regulatory requirements shall be reviewed and communicated.	
5.2. Identification of Regulatory & Other Requirements: 5.2.1. Identify applicable regulatory and other requirements relating to environment, health and safety, in coordination with relevant departments by utilizing the following resources: ▪ Publications ▪ External service providers / websites ▪ Websites of government agencies ▪ Communication with concerned government regulatory bodies ▪ Liaison with stakeholders 5.2.2. Maintain an updated register of applicable IMS regulatory and other requirements. 5.2.3. Communicate regulatory and other requirements register to Department Management.	▪ HOD ▪ Compliance ▪ Contractor
5.3. Identification of Change in Regulatory and Other Requirements: 5.3.1. The register of applicable regulatory and other requirements shall be reviewed and evaluated at least annually or as the need requires and shall be updated whenever changes occurred in any of regulatory or other requirements or documents identified in the register. 5.3.2. Introduction of new legislation, ministerial decrees, changes to existing legislation or new government agendas, notifications and publications received from various agencies shall be reviewed based on company operations. 5.3.3. Obtain and retain most recent issue of applicable Integrated Management System standards on files. 5.3.4. Review and amend relevant documents for compliance, whenever changes introduced in the management system standards. Note: Introduction and changes shall be identified through but not limited to (as applicable): ▪ Ministerial Decrees ▪ Notices received from the regulatory bodies ▪ Announcements in newspaper / magazines ▪ Communication with regulatory bodies ▪ Government websites, etc. ▪ Trade groups / industry associations ▪ Professional bodies, institution, associations, etc. ▪ Certification bodies ▪ Standardization bodies ▪ Public libraries ▪ Customers, vendors, suppliers, etc.	▪ HOD ▪ Compliance ▪ Contractor
5.4. Communication of Changes in Regulatory and Other Requirements 5.4.1. Communicate changes in regulatory and other requirements and any subsequent changes to the relevant procedures and documents to department managers, who shall further communicate the changes to all personnel working for and on behalf of the entity.	▪ HOD

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5.4.2. Changes in regulatory and other requirements are communicated to employees through training programs and/or other suitable means (ie. intranet, notices, bulletins, internal memos, meetings, etc.).	
5.5. Maintenance of Records	
5.5.1. Ensure to maintain or have access to copies of applicable regulatory and other requirements.	▪ HOD ▪ Compliance ▪ Contractor

6. Monitoring, Evaluation and Review

6.1 Department Managers are responsible for the implementation and compliance with applicable IMS regulatory and other requirements relevant to the activities and services of respective departments and shall take necessary corrective actions, whenever needed.
6.2 Compliance with applicable IMS regulatory and other requirements is verified periodically through internal and/or external audits.
6.3 Department Managers are responsible that appropriate actions are initiated to ensure compliance through updating the latest version of the department regulatory and other requirements register.
6.4 Non-compliance raised during audits shall be addressed within the required timeframe as agreed by the auditor and head of department or management representative.
6.5 Regulatory and other requirements register are reviewed as per ADAC Document Management requirements to ensure it remains relevant and appropriate.

7. Potential Risks

Risk	Control Measure
7.1. Non-compliance to regulatory and other requirements could lead to penalties from regulatory bodies.	▪ Periodic monitoring, evaluation and update of applicable IMS regulatory and other requirements.
7.2. Breaches to regulatory and other requirements could lead to exposing workers or the general public to EHS risk.	▪ Communication with concerned departments and stakeholders.
7.3. Could affect the reputation of the entity.	

8. Exceptions

N/A

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9. Legal Requirements

Refer to IMS & Compliance Section legal register

10. Supporting Documentation and Tools

10.1 References

- Abu Dhabi Occupational Safety and Health System Framework (ADPHC SF) Manual
- Abu Dhabi Occupational Safety and Health System Framework (ADPHC SF) Element 9 – Compliance and Management Review
- GCAA – CAR PART X – Safety Management System
- ISO 9001: 2008 Quality Management System
- ISO 14001:2004 Environmental Management System
- ISO 45001:2018 Occupational Health & Safety Management System

10.2 Forms:

- Abu Dhabi Airports Regulatory & Other Requirements Register

11 Filing and Distribution

11.1 This document is published in the workflow on Abu Dhabi Airports net to be accessible to all users.

11.2 It will be reviewed and updated from time to time on business requirement and approval from Operation Compliance.

12 Change Log

Version No.	Document Creation, Review, Approval and Change Tracking	Actioned by (Name, Title, Department)	Action Date	Change Effective Date
V1.0	First version published			
V2.0	Change Template and Version No and responsibility as per the current structure. Revised aerodrome certification to Airside, safety and standards of respective airports	MS	14/01/2015	15/01/2015
V3.0	Updated title and version Added roles and responsibilities. Updated definitions and abbreviations. Restructured flowchart / process steps. Amended Monitoring, Evaluation & Review.	GG EU	27/07/2016	

STANDARD OPERATING PROCEDURE

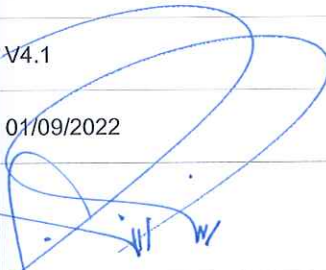
SOP Title:		Regulatory and Other Requirements					
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V3.1	Added details to Potential Risks Added specifics to Exceptions Updated Supporting Documentation & Tools Updated Version & Date Updated Supporting Documentation & Tools		EU	22/11/2017	01/12/2017		
V3.2	Updated Version & Date Updating of Procedures Steps Updating of Monitoring, Evaluation & Review Update of Change Log		EU	11/06/2019	01/07/2019		
V3.3	Amended CORE SOP Owner Update of Version Number and Date Update of Documentation and Tools Update of Change Log Added Legal requirements		MA	01/07/2019			
V3.4	Replacing 18001 with ISO 45001:2018 – and version number		MA	1/11/2021			
V3.5	SOP Review and version update		FA	01/09/2022	01/09/2022		

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STANDARD OPERATING PROCEDURE

Document and Record Management

Emergency Services and Compliance

Business Process Area / Functional Area:	Abu Dhabi Airports
SOP Owner:	EHS & Sustainability
SOP Ref. No:	ADA/COR/SOP/002-V4.1-01/09/2022
Implementation Date:	30/3/2021
Approved By:	Aws Al Khanjari
Approval Date:	23 rd March 2023
Version No.:	V4.1
Version Date:	01/09/2022
Approver's Signature: (for non-electronic copies)	
Information Classification	Official Use 2
This classification refers to information that is to be used internally by the Abu Dhabi Airports personnel only, and does not fall into the previous three categories. Although unauthorized disclosure of this information is prohibited, in the case that it occurs, it is expected that there will be no serious repercussions to Abu Dhabi Airports' shareholders, employees, business partners and/or clients.	

A Standard Operating Procedure (SOP) consists of a set of statements describing instructions in an orderly manner for the purpose of achieving a result. SOPs are developed to maximize the efficiency and accuracy of implementation of a policy or operational process.

Template Title:	SOP Template	Template Ref. No.:	TEM/03/SOP	Version No.:	V4.0	Version Date:	01/07/2019
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1. Title

Document and Record Management

2. Purpose

- 2.1. The purpose of this procedure is to outline the minimum requirements for the Integrated Management System (IMS) Document and Record Management at Abu Dhabi Airports in accordance with applicable regulatory and other requirements.
- 2.2. To describe the methodology for ensuring consistency in the generation and management of documents and records.
- 2.3. Defines the requirements for the development, creation, identification, storage, protection, retrieval, retention and disposal of quality assurance, environmental, occupational health and safety documents and records.
- 2.4. Ensure compliance with applicable regulatory and other standards requirements.

3. Scope

- 3.1. This process applies to quality, environmental, occupational health and safety related documents and records as enumerated but not limited to:
 - Policy Statements
 - Manual
 - CORE Procedures
 - Departmental Portfolios
 - Department Standard Operating Procedures.
 - Forms, Checklists, and Registers
 - Records & Reports
- 3.2. Applicable to Abu Dhabi Airports' Operations Division, support Departments and Subsidiaries.

Note:

- *Controlled documents are business documents that are referenced and numbered by the Department in accordance with the Referencing Guidelines.*
- *Records outside of this scope do not require control but may be controlled at the discretion of department management.*

4. Definitions and Abbreviations

Definition	Description
Authorized Departments	Are departments that have been granted permission by GM ESC, to provide control of its documentation as detailed in the Document Preparation, Records Control & Documentation Change Management SOP. Authority will be provided in the form

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	of a document which details the name of the authorized personnel in the respective Authorized department as well as scope of authority and list of conditions.
Code	Method of naming the document for grouping and traceability.
Competence (competent person)	The ability to perform a particular job in compliance with performance standards; in possession of required skill, knowledge, qualification and/or capacity
Confidential	Documents and/or records containing information of a sensitive or private nature including, but not limited to incident report forms, contractor insurances, training records, workers compensation records including claim forms, medical certificates, return to work records, health monitoring records, performance appraisal, personnel files and security records.
Department Document Controller	Is a competent department representative responsible for uploading and editing the respective department's documentation.
Data	Facts about an object.
Document	Information and supporting medium.
Form	Document used to record data as required by the quality management system.
IMS Manual	Document specifying Abu Dhabi Airports Integrated Management System
Interested Party	Person or organization that can affect, be affected by or perceive itself to be affected by a decision or activity of the entity.
Obsolete Document	A document that is no longer in use due to having a newer version or due to cancellation of that document.
Policy	Intentions and direction of an organization as formally expressed by top management.
Procedure	A documented series of steps to be carried out in a logical order for a defined operation or in a given situation.
Process Owner	Is an individual and/or department who is given the responsibility and authority for managing a specific process.
Record	Document stating results achieved or providing evidence of activities performed.
Regulatory Requirement	Obligatory requirement specified by an authority mandated by a legislative body.
Retention Period	The time period up to which the record shall be kept before it is discarded or destroyed.
Retrieval	The process of recalling information.

STANDARD OPERATING PROCEDURE

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Service Level Agreement	A contract between a service provider (either internal or external) and the end user that defines the level of service expected from the service provider. The objective of the SLA is to provide output define by the end user.
SharePoint	Is a portal used as repository for IMS documentation and records.
Stakeholder	Please see interested party.
Subject Matter Expert	A person who is an authority in a particular area or topic.
Abbreviation	Description
EHS	Environment, Health & Safety
GM	General Manager
HOD	Head of Department
IMS	Integrated Management System
ADPHC	Abu Dhabi Public Health and Center
SLA	Service Level Agreement
SOP	Standard Operating Procedures

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5. Procedure Steps	Responsible Party
<pre> graph TD Start([Start]) --> Dev[Develop / Update of Documents] DCR1[/Document Change Request/] --> Dev Dev --> Comm[Communicate / forward to relevant department for review and/or additional input.] Comm --> AI{Additional Input} AI -- YES --> Inc[Incorporate Changes / Updates] Inc --> Comm AI -- NO --> UFD[Update / Finalize Document] DCR2[/Document Change Request/] --> UFD UFD --> App[Approval of Updated Document] App --> Upload[Upload Updated / Approved Document in the SharePoint] Upload --> Update[Update Document Master List / Communicate Updated Document to Staff] Update --> End([End]) </pre>	▪ Process Owner ▪ Process Owner ▪ Department Document Controller ▪ Relevant Departments ▪ Department Document Controller ▪ HOD ▪ Department Document Controller ▪ IMS Section ▪ Department Document Controller
5.1. General 5.1.1. All IMS documents and records shall comply and be controlled using the Abu Dhabi Airports' Document and Records Management CORE SOP. 5.1.2. All documents and records shall be maintained in an orderly manner that will allow easy access to Abu Dhabi Airports' staff and interested parties with the exception of confidential documents.	

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5.1.3. Obsolete documents are to be immediately removed, this includes electronic and hard copy versions. Users should only utilize the most current and approved version of the document.

5.1.4. Archived documents and records retained for regulatory or system evaluation purposes shall be suitably identified, stored and managed.

Note: Documents and records are accessible to staff, contractors, stakeholders and interested parties based on appropriate access authorization.

5.2. Preparation / Creation

Documents should be developed and amended in line with the process illustrated in Figure 1 below:

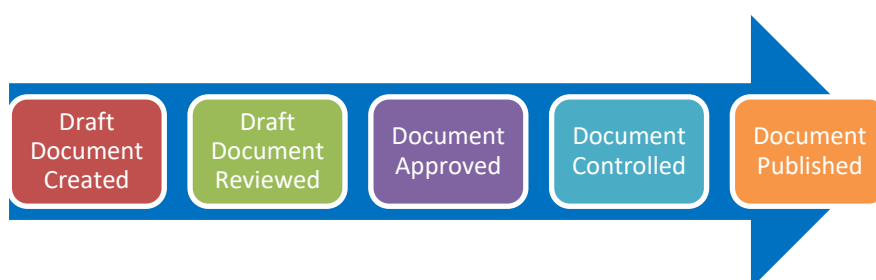


Figure 1

5.2.1. Documents are created by the appropriate subject matter expert.

5.2.2. All internal documents are developed as soft files (MS Word, Excel, PPT, etc.); it is recommended that files of similar type follow the format of other documents in that type.

5.2.3. All documents shall be develop based on IMS document templates, all procedures shall be captured, managed and used in the most appropriate format.

5.2.4. Draft versions must then be forwarded to the appropriate approver/s for review and approval.

5.2.5. Original releases of documents are given a version indicator of "0".

Note: Please refer to Business Documentation Guidelines of the Document and Record Management CORE SOP available in the Matari.

- IMS Representative
- Document Controller
- HOD

5.3. Modification / Revision

Abu Dhabi Airports staff may request modification of a specific procedure or document. Requests are to be made through the relevant department and can be done with the following considerations:

5.3.1. Documents shall be reviewed / evaluated by the original author or another subject matter expert based on revision schedule.

5.3.2. A copy of the draft document can be forwarded to the reveiwer / approver via hardcopy or e-mail.

5.3.3. The reviewer will resolve any updates with the original author to achieve a satisfactory document.

- IMS Representative
- Document Controller
- HOD
- IMS Section

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- 5.3.4. The reviewer will indicate approval of the document by affixing signature.
- 5.3.5. Hardcopies requiring approver signature shall be signed and maintained in respective department or subsidiary.
- 5.3.6. Approved documents shall be forwarded to Department Document Controller for uploading to the department or subsidiary share drive.
- 5.3.7. Document modification should be in accordance with the document change process (Appendix 1).
- 5.3.8. Changes or addition to the document is subject for review and consultation with relevant affected department prior approval of the process owner for authorization and endorsement
- 5.3.9. Changes or amendments shall be recorded on the respective document change log table and the Document Control Register maintained by each department or subsidiary.
- 5.3.10. Any changes requiring regulatory authority review and approval shall be submitted accordingly, and not implemented until such approval is obtained.
- 5.3.11. Amendments proposed by stakeholders are incorporated where relevant and appropriate and the document shall be formatted correctly prior approval, documentation release and implementation.
- 5.3.12. Only authorized personnel may change documents, although any employee can request a change to their Manager by filing a document change form. Wherever possible, the document shall include a change log table within its text. Forms do not require a change log table.
- 5.3.13. Only documents being reviewed or amended shall be provided to relevant parties involved in the review process.
- 5.3.14. Effectiveness of changes will be done through internal auditing, inspections or review.
- 5.3.15. Documents shall be published and available on the SharePoint following approval.
- 5.3.16. No action on the document is necessary if no updating is required. However, the document change log and department document change tracker should show that a review was carried-out with no revision required.

Note: Modification of environmental, occupational health and safety documents shall be course through the EHS Section.

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5.4. Document Hierarchy

- 5.4.1. The arrangement of all documents related to IMS shall be based as per Document Management hierarchy below.

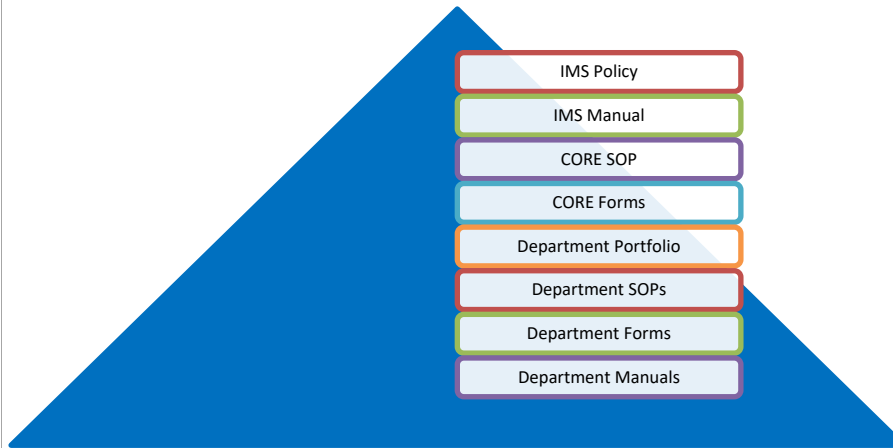


Figure 2

- IMS Representative
- Document Controller
- HOD
- IMS Section

Description of Change:

5.5. Document Template

- 5.5.1. A document template has been developed for use when developing and/or creating processes and forms and is to contain the following:

- Standard title page;
- Header and footer containing document name, reference number, version number, version date and page number;
- Table of Contents;
- Purpose;
- Scope;
- Definition and Abbreviation;
- Procedure Steps;
- Monitoring, Evaluation & Review;
- Potential Risk;
- Exception (if applicable);
- Legal Requirements (if applicable);
- Supporting Documentation and Tools (if applicable)
- Filing and Distribution
- Change Log
- Appendices (if necessary)

- IMS Representative
- Document Controller
- HOD
- IMS Section

5.6. Document Referencing

- 5.6.1. Arrangement of all documents related to quality, environmental, occupational health and safety shall be based as per the IMS Document Management CORE SOP, referencing guidelines.
- 5.6.2. Each function has its own code that is used to show the ownership of the document. (See Appendix 2)

- Document Controller
- IMS Representative
- IMS Section

5.7. Document Approval and Control

- IMS Section
- Department Document Controller

5.7.1. The document approver shall be responsible for the final quality check to ensure completeness, accurateness and fit for purpose of the document. 5.7.2. The approved document shall be forwarded and uploaded to the respective SharePoint folder.	
5.8. Document Release and Implementation Once approved and controlled, where required the document should be published and linked to the relevant SharePoint folder. 5.8.1. Hard copies of previous versions should be replaced and the release of current version communicated to relevant stakeholders. 5.8.2. Documents shall be distributed and communicated to department staff and/or relevant stakeholders. 5.8.3. Implementation of the document management requirements will be verified prior publication and during internal IMS audits. 5.8.4. Controlled hard copies may not be photocopied, unless for the purposes of sending to a recipient who is authorized to receive uncontrolled versions of documents.	▪ Document Controller ▪ IMS Representative ▪ IMS Section
5.9. Document Storage and Retrieval 5.9.1. Department and subsidiaries shall ensure that documents on SharePoint are maintained for controlled versions and electronic records. 5.9.2. Department and subsidiary documents and records are accessible to respective department and subsidiary only. 5.9.3. Hardcopies shall be kept by and will be available for audit and/or inspection upon request. 5.9.4. Updated versions shall be available at the SharePoint, with version history accessible at point of use. 5.9.5. Hardcopies are stored in suitable locations that prevent damage or deterioration. 5.9.6. Archived documents and/or records that are stored off-site or in another location shall be stored in a controlled and environmentally protected from damage or deterioration.	▪ Document Controller ▪ IMS Representative ▪ HOD
5.10. Control of Internal Documents Quality, environmental, occupational health and safety documents will be distributed under two (2) classifications: 5.10.1. CONTROLLED copies will be given a specific reference number and will be updated whenever there are amendments to the document. 5.10.2. Any CONTROLLED copies printed or photocopied are considered UNCONTROLLED. 5.10.3. Downloaded documents from SharePoint are considered UNCONTROLLED.	▪ Document Controller ▪ IMS Representative ▪ HOD ▪ IMS Section

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5.10.4. Departments and Subsidiaries are responsible for the maintenance of their respective documents.		
5.11. Documents of External Origin		
5.11.1. External documents such as standards, regulatory requirements or third party specifications may be maintained without control, provided that the revision of the document on file matches the revision indicated.		- Document Controller - IMS Representative - HOD - IMS Section
5.11.2. External documents are considered uncontrolled documents and should be recorded in the External Document List Form.		
5.12. Confidentiality and Security		
5.12.1. Certain documents and/or records of confidential nature are to be secured against unauthorized access.		- Document Controller - IMS Representative - HOD - IMS Section
5.13. Retention, Maintenance and Disposal		
5.13.1. Documents and records shall be maintain either electronically or in print for evaluation purposes only.		- Document Controller - IMS Representative - HOD - IMS Section
5.13.2. Records shall be maintained for a minimum of five (5) years unless otherwise indicated or defined by interested parties, statutory or regulatory requirements.		
5.13.3. Records pertaining to employees must be retained at least a year beyond the employee's end of service.		
5.13.4. Documents and records that are discarded after retention shall be permanently destroyed.		
5.13.5. Records shall be identified, completed, filed, stored, maintained, managed and disposed of accordingly.		
5.14. Protection		
Departments are to ensure that documents and records are maintained legible, readily identifiable and retrievable.		
5.14.1. Documents and records are subject to periodic backups to ensure protection.		- Document Controller - IMS Representative - HOD - IMS Section
5.14.2. Documents and records stored on individual computers must either be backed up through the servcer, or backed up manually onto the server. The individual users of such data are responsible when data is not back up by the server.		
5.14.3. Entries made by hand on hardcopy forms shall be made in ink.		
5.14.4. Corrections are made by crossing-out the error and affixing initials on the correction/s made (Please see figure 3 below)		
Example: 126 # parts accepted = 424 s.p. 12/12/20		

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Figure 3**5.15. Training or Awareness**

- | | |
|---|---|
| <p>5.15.1. Department and Subsidiary staff shall be provided with instructions on how to access quality, environmental, occupational health and safety documents.</p> <p>5.15.2. Staff shall be familiar and knowledgeable with the Document Management CORE SOP.</p> | <ul style="list-style-type: none"> ▪ Document Controller ▪ IMS Representative ▪ HOD ▪ IMS Section |
|---|---|

6. Monitoring, Evaluation and Review

- 6.1. All CORE SOP's have to be reviewed bi-annual basis except registers documents such (Environment Health and Safety (EHS) risk register, legal registers ...ect.)
- 6.2. The Implementation of this procedure is assessed during the Internal Audit process and is subject to third party audits.
- 6.3. The procedure review is the responsibility of respective Head of Department, in coordination with of relevant departments, stakeholders and/or interested parties.
- 6.4. The procedure implementation and changes capturing document change management and updating is the responsibility of the Process Owner with review from Compliance Department, with the exception of Authorized Departments (Appendix 1).
- 6.5. It is the responsibility of the department to ensure the process is released as per document management and records control procedure for implementation.

7. Potential Risks

Risk	Control Measure
7.1. Use of obsolete documents by staff	▪ Documents are controlled and updated electronically. ▪ Documents are uncontrolled once printed. ▪ IMS audit and staff training.
7.2. Potential mistaken action from using outdated documents	▪ Ensure document management and the deletion or destruction of obsolete documents ▪ Regular management reviews to ensure only current documents are in circulation and/or use

8. Exceptions

- 8.1. Documents that are not identified as controlled documents in the IMS and which are not required to be managed under the document control system are exempt from the requirements of this CORE SOP. Such documents frequently include but are not limited to documents and records that are created and pertain to company financial information, marketing activities and business development activities in as much as they are not required to be maintained under the IMS for compliance to regulatory.

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9. Legal Requirements

This section is to specify what Laws, Regulations, standards or guidelines the department deal with in this SOP. If not applicable, to mention N/A in this section.

10. Supporting Documentation and Tools

10.1. References

- ISO 9001:2015 – Quality Management System
- ISO/TR 10013:2001 – Guidelines for Quality Management System Documentation
- ISO 14001:2015 – Environmental Management System
- ISO 45001:2018 – Occupational Health & Safety Management System
- Abu Dhabi Occupational Safety & Health (ADPHC-SF) Manual
- Abu Dhabi Occupational Safety & Health (ADPHC-SF) Element 9 – Compliance & Management Review
- GCAA – CAR PART X – Safety Management System
- Abu Dhabi Airports IMS Manual
- Abu Dhabi Airports IMS Roles & Responsibilities CORE SOP

10.2. Forms

- Document Change Request form
- Document Master List
- External Document List
- Business Documentation Template:
 - Department Portfolio
 - Manual
 - Policy
 - Service Level Agreement
 - Standard Operating Procedure
 - Policy Statement
 - Work Instructions
 - Forms

11. Filing and Distribution

- 11.1. All documents related to the IMS are kept in SharePoint and the concerned employees are informed by Compliance Department regarding the distribution of high-level documents such as, IMS Policy, IMS Manual, and IMS Core Procedures and related forms and other department documentation, which will be accessible via IMS SharePoint portal. Authorized Departments are responsible for distributing the respective department documentation to concerned parties. Documents are controlled.
- 11.2. Selected Compliance & EHS staff, authorized department members, respective Department Document Controllers, and GMs, will be provided relevant access to all IMS documentation as per respective SharePoint workflows.
- 11.3. Records Retention period is for a minimum of five years unless required otherwise by Organizational need, Statutory or Regulatory requirements.

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12. Change Log

Version No.	Document Creation, Review, Approval and Change Tracking	Actioned by (Name, Title, Department)	Action Date	Change Effective Date
V1.0				
V1.1	Editorial Changes	RA		
V1.2	Retention Period	RA		
V1.3	Added SharePoint application to procedure	RA		
V2.0	Update Ref. and responsibility according to the current structure	MS	14/01/2015	15/01/2015
V3.0	Update of Template and Reference No. Update of Definition & Abbreviation Update of Procedure Steps Update of Monitoring, Evaluation & Review Update of Potential Risk Update of Exceptions Amend supporting documents & Tools Update of Filing & Distribution	OA AA AN MS GG EU	13/07/2016	
V3.1	Update of Reference No. and Date Amended Flow Chart and Procedure Steps Amended Supporting Documents & Tools Update of Monitoring, Evaluation & Review Update of Appendix	EU	23/12/2017	01/01/2018
V3.2	Update of Reference No. and Date Amended Flow Chart and Procedure Steps Amended Supporting Documents & Tools Update of Monitoring, Evaluation & Review Update of Appendix	EU	01/05/2019	01/06/2019
V3.3	Update SOP Owner	EU & MA	01/07/2019	

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	Amended Monitoring, Evaluation and Review Update 9.1 Adding Legal Requirements			
V4.0	Replacing 18001 with ISO 45001:2018 – and version number Updating Monitoring, Evaluation and Review	AA MA	1/11/2021	
V4.1	SOP Review and version date updated	FA	01/09/2022	01/09/2022

N.B. This document is UNCONTROLLED unless signed by an authorized person in the appropriate section of this document or viewed in Workflow! on Abu Dhabi Airports Matari-Sharepoint.

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Appendix 1

Document Change

Procedures Steps

- Current versions with final referencing of department documents will be controlled through SharePoint.
- HOD are responsible to ensure that the latest version of the document/s are accessible to department staff and no obsolete documents are kept.
- Any employee may suggest an introduction or alteration to any document or form by filling out a Document Change Request Form and passing this to the Document Controller then to HOD to decide if the change is to be adopted.
- The Document Change request must be approved by the relevant HOD prior submission to Compliance Department. However, if the SOP involves the responsibility of two different departments then the SOP shall be approved by both GMs/HODs.
- The concerned department / subsidiary will be notified once the change has been approved and made. Description to changes on the document is maintained on SharePoint to view revision history.
- The respective Department will retain hard copies of Document Change records and will be made available in department folders on SharePoint.
- Each department shall maintain a register of documents including changes made and maintain them using the Document Masterlist maintained by the Department Document Controller.
- The process changes incorporated shall be clearly updated in the change log section of the document to track the history of changes, and version control within SharePoint.
- Changes in the documents / records are identified through the following:
 - Indicating the version number of the document in the SharePoint.
 - Indicating changes made in SharePoint description of change.
 - Indicating description of changes in the Document Change Request form.
 - Indicating version and version date in the document masterlist Indicating the changes made in the Change log section available in in each document (process, procedure, manual, work instruction, form, etc). This section shows the page/paragraph, subject of the amendment including reason for change, change and approval, and the date of implementation.
- Minor changes and misprints shall be address in the annual review by respective departments, unless there is sufficient justification for changes to be made with immediate effect.
- The controlled copy of documents are made available on IMS SharePoint and controlled by Department Document Controller. IMS core documents shall be made available on IMS SharePoint by Compliance Department
- The approved controlled documents and forms shall list the ownership, retention period and disposal time.
- The Document Management procedure shall be observed at all times. Obsolete documents are to be discarded or marked uncontrolled if used for referencing purpose.

Appendix 2

Document Guidelines

Contents

- Business Process Referencing
- Master Document List Sample
- IMS Documentation Structure and Document Level Referencing
- Business documentation – information classification
- Department template development

SOP Title:	Document and Record Management						
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- How to insert logo on SOP/Manual/Portfolio Template
- Template for a Register Sample

Business Process Referencing

The following code is followed to reference each document.

Organization	Airport	Division	Department	Section	Document Type	Document Number	Version No.	Version Date
Abbrev.	Abbrev.	Abbrev.	No.	Abbrev.	Abbrev.	No.	V1.0	DDMMYYYY
ADA	ADIA AAIA GAA	Ops	QAEHS	CEHS PS	POL MAN SOP WOR POR WBI FOR REG REP PLN	100 110	01 02 03 04	

Document Types

POL	Policy
MAN	Manual
SOP	Standard Operating Procedures
WOR	Work Instruction
POR	Department Portfolio
WBI	Work Breakdown Instruction
FOR	Form
REG	Register
REP	Report
PLN	Plan
HB	Hand Book
B	Booklet
TOR	Terms of Reference

Example:

Reference Number: ADA/ADIA/OPS/QAEHS/CEHS/SOP/100-V1.0-02072014

Document Name: Opulse SOP

ADA: Organization
ADIA: Abu Dhabi International Airport
OPS: Division
QAEHS: Department
CEHS: Department
V1.0: Version number
02072014: Version date

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Primary Colour Palette

Secondary Colour Palette

Snapshot of Department Document Master List

ADIA-Airside Safety Document Master List SAMPLE - Microsoft Excel

Business Process Level 2 Section	Document Type	Document Reference No.	Document Title	Owner	Approved By	Approval Date	Version No.	Version Date	Notes
Airside Safety Operations	SOP	WSPCZPACHCOPR001	Airside Safety Operations	Head of Airside Operations	Head of Airside Operations	15/08/2018	V1.0	15/08/2018	Obsolete
Airside Safety Department	Department	ADIAQDMOPSAISOPR001V15-0900204	Airside Safety Department Portfolio	Senior Manager Airside Safety	GM ADIA Operations	18/03/2018	V1.0	18/03/2018	Current
Airside Safety Department	Manual		Airside Safety Department	Senior Manager Airside Safety	GM ADIA Operations	24/03/2018	V1.0	24/03/2018	Current
Airside Safety Department	Register	ADIAQDMOPSAISOPR001V15-0900204	Safety Management System Manual	Senior Manager Airside Safety	COO Airports Operations	24/03/2018	V5.0	30/03/2018	Current
Airside Safety Department	SOP	ADIAQDMOPSAISOPR001V15-0900204	Airside Safety Department DHS risk register	Senior Manager Airside Safety	Senior Manager Airside Safety	10th Aug 2018	V1.0	10th Aug 2018	Current
Airside Safety Department	SOP	ADIAQDMOPSAISOPR001V15-0900204	Hazard ID and Risk Management	Senior Manager Airside Safety	Senior Manager Airside Safety	5th Aug 2018	V2.0	5th July 2018	Current
Airside Safety Department	SOP	ADIAQDMOPSAISOPR001V15-0900204	Airside Certification Internal Audit	Senior Manager Airside Safety	Senior Manager Airside Safety	5th Aug 2018	V2.0	5th July 2018	Current
Airside Safety Department	SOP	ADIAQDMOPSAISOPR001V15-0900204	Airside Investigations Procedure	Senior Manager Airside Safety	Senior Manager Airside Safety	5th Aug 2018	V1.0	5th July 2018	Current
Airside Safety Department	SOP	ADIAQDMOPSAISOPR001V15-0900204	Management of Change	Senior Manager Airside Safety	Senior Manager Airside Safety	5th Aug 2018	V4.0	5th July 2018	Current
Airside Safety Department	SOP	ADIAQDMOPSAISOPR001V15-0900204	Work Safety Plans	Senior Manager Airside Safety	Senior Manager Airside Safety	5th Aug 2018	V5.0	5th July 2018	Current
Airside Safety Department	SOP	ADIAQDMOPSAISOPR001V15-0900204	Adverse Weather conditions	Senior Manager Airside Safety	Senior Manager Airside Safety	5th Aug 2018	V1.0	5th July 2018	Current
Airside Safety Department	SOP	ADIAQDMOPSAISOPR001V15-0900204	Airfield Driving Training & Permits	Senior Manager Airside Safety	Senior Manager Airside Safety	5th Aug 2018	V1.0	5th July 2018	Current
Airside Safety Department	SOP	ADIAQDMOPSAISOPR001V15-0900204	Issuing and Controlling of Airfield Vehicle Permit	Senior Manager Airside Safety	Senior Manager Airside Safety	5th Aug 2018	V1.0	5th July 2018	Current
Airside Safety Department	SOP	ADIAQDMOPSAISOPR001V15-0900204	Airside Incident and Accident Reporting	Senior Manager Airside Safety	Senior Manager Airside Safety	5th Aug 2018	V1.0	5th July 2018	Current
Airside Safety Department	SOP	ADIAQDMOPSAISOPR001V15-0900204	Daily Airside Safety Inspections and Reporting	Senior Manager Airside Safety	Senior Manager Airside Safety	5th Aug 2018	V1.0	5th July 2018	Current
Airside Safety Department	SOP	ADIAQDMOPSAISOPR001V15-0900204	Daily Wildlife Inspections and Reporting	Senior Manager Airside Safety	Senior Manager Airside Safety	5th Aug 2018	V2.0	5th July 2018	Current
Airside Safety Department	SOP	ADIAQDMOPSAISOPR001V15-0900204	Management and coordination of Fuel Spillage events	Senior Manager Airside Safety	Senior Manager Airside Safety	5th Aug 2018	V1.0	5th July 2018	Current
Airside Safety Department	SOP	ADIAQDMOPSAISOPR001V15-0900204	Low Visibility Operations	Senior Manager Airside Safety	Senior Manager Airside Safety	5th Aug 2018	V1.0	5th July 2018	Current
Airside Safety Department	Form	ADIAQDMOPSAISOPR001V15-0900204	Daily Wildlife Inspection Form Template	Senior Manager Airside Safety	Senior Manager Airside Safety	5th Aug 2018	V1.0	5th July 2018	Current
Airside Safety Department	Form	ADIAQDMOPSAISOPR001V15-0900204	Daily Safety Inspection Form Template	Senior Manager Airside Safety	Senior Manager Airside Safety	5th Aug 2018	V1.0	5th July 2018	Current
Airside Safety Department	Form	ADIAQDMOPSAISOPR001V15-0900204	Management of Change Form Template	Senior Manager Airside Safety	Senior Manager Airside Safety	5th Aug 2018	V2.0	5th July 2018	Current
Airside Safety Department	Report	ADIAQDMOPSAISOPR001V15-0900204	Investigations Report Template	Senior Manager Airside Safety	Senior Manager Airside Safety	5th Aug 2018	V1.0	5th July 2018	Current
Airside Safety Department	Report	ADIAQDMOPSAISOPR001V15-0900204	Hazard ID Report Template	Senior Manager Airside Safety	Senior Manager Airside Safety	5th Aug 2018	V1.0	5th July 2018	Current
Airside Safety Department	Plan	ADIAQDMOPSAISOPR001V15-0900204	Work Safety Plan Template	Senior Manager Airside Safety	Senior Manager Airside Safety	5th Aug 2018	V1.0	5th July 2018	Current

IMS Documentation Structure and Document Level Referencing

Level 1

IMS Policy 01

Level 2

IMS Manual 02

Level 3

Core SOPs 001-031

Level 4

Core Forms 011-931

Level 5

Department Portfolio 001-099

Department SOPs 100-999

Department Forms 100-999

Department Manuals 1000-9999

Business documentation – information classification

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Information Classification	Classification	Level	Description
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Classification	Level	Description
SECRET	5	This category refers to the most critical business information that has great value for Abu Dhabi Airports and must be used only internally. Unauthorized disclosure of such information can influence the market Abu Dhabi Airports operates in.
STRICTLY CONFIDENTIAL	4	This category refers to the most sensitive business information that has great value for Abu Dhabi Airports and must be used only internally. The unauthorized disclosure of such information can have serious adverse effects on Abu Dhabi Airports , the shareholders, employees, business partners and/or clients. This can result in immediate economic loss or have negative consequences on Abu Dhabi Airports market share. Examples of such information would be information about new products, business secrets, financial results that have not been published etc.
CONFIDENTIAL	3	This category refers to less sensitive business information that has significant value to Abu Dhabi Airports . The unauthorized disclosure of this information can have as an immediate impact the loss of good faith or indirect financial loss. Examples of such information are personnel evaluation reports, short-term strategic plans, internal audit reports, personal data, client data etc.
OFFICIAL USE	2	This classification refers to information that is to be used internally by the Abu Dhabi Airports personnel only, and does not fall into the previous three categories. Although unauthorized disclosure of this information is prohibited, in the case that it occurs, it is expected that there will not be any serious repercussions to Abu Dhabi Airports, shareholders, employees, business partners and/or clients. Examples of such information are internal training material, internal communication documents, corporate policies, procedures etc.
PUBLIC	1	This classification refers to information that will be communicated to the public from authorized employees. By definition, there is no threat by the disclosure of this information and can be freely circulated without any potential impact. Examples of such information are product leaflets, advertisements, press releases etc.

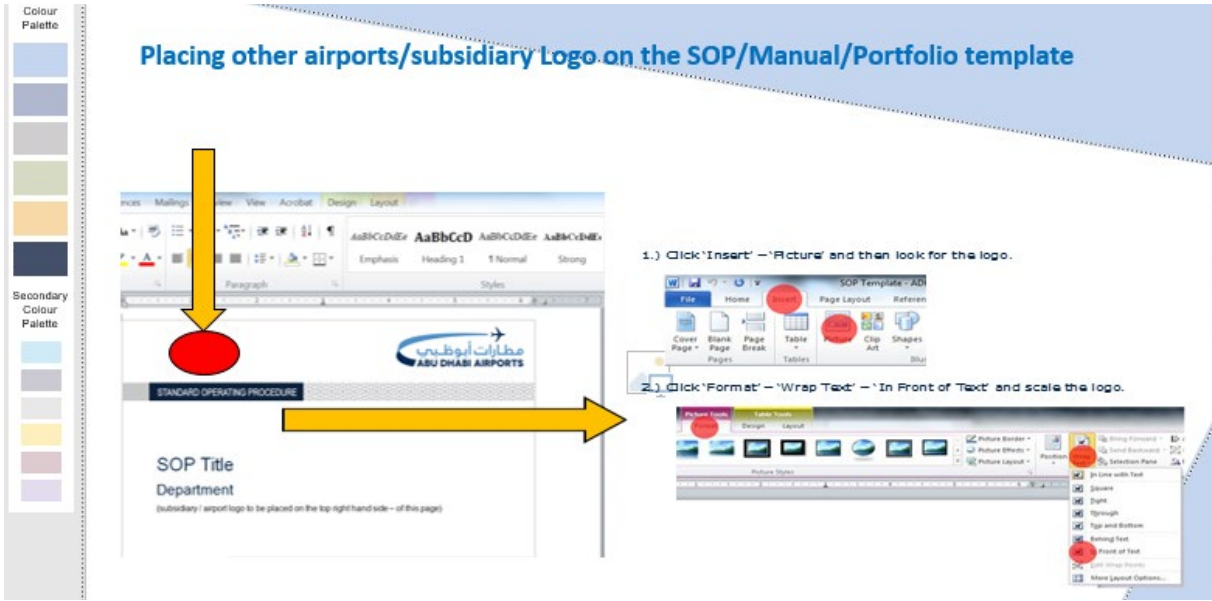
Department Template Development

Form Template Title:	Title		Version No.:	1.0		
Form Template Ref. No.:		Version Date:	DD/MM/YYYY	Page:	Page 1/1	



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Template for a Register Sample

Register Template Title:	Environmental, Health and Safety Risk Assessment Register					Version No.:	V1.0	
Register Template Ref. No.:	ADA/COR/REG/024/V1.0-24082014	Version Date:	24/08/2014	Next Revision Date:	TBA	Page:	Page 1/1	

Environmental, Health and Safety Risk Assessment Register

[illegible]

Approver	
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STANDARD OPERATING PROCEDURE

Management of Change

Emergency Services and Compliance

Business Process Area / Functional Area:	Abu Dhabi Airports		
SOP Owner:	EHS & Sustainability		
SOP Ref. No:	ADA /COR/SOP/006-V3.5-01/09/2022		
Implementation Date:	01/11/2021		
Approved By:	Aws Al Khanjari		
Approval Date:	23 rd March 2023		
Version No.:	V3.5		
Version Date:	01/09/2022		
Approver's Signature: (for non-electronic copies)			
Information Classification	Official use	2	This classification refers to information that is to be used internally by the Abu Dhabi Airports personnel only, and does not fall into the previous three categories. Although unauthorized disclosure of this information is prohibited, in the case that it occurs, it is expected that there will be no serious repercussions to Abu Dhabi Airports, shareholders, employees, business partners and/or clients.

A Standard Operating Procedure (SOP) consists of a set of statements describing instructions in an orderly manner for the purpose of achieving a result. SOPs are developed to maximize the efficiency and accuracy of implementation of a policy or operational process.

Template Title:	SOP Template	Template Ref. No.:	TEM/03/SOP/V4.0/ 01072910	Version No.:	V4.0	Version Date:	01/07/2019
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1. Title

Management of Change

2. Purpose

- 2.1. To ensure compliance with applicable regulatory and standard requirements.
- 2.2. The purpose of this procedure is to assure the integrity of Abu Dhabi Airports IMS is maintained when significant changes in plans, procedures, equipment, or personnel for critical operations as well as non-routine work or new equipment are required.
- 2.3. To ensure that changes receive adequate review and approval.
- 2.4. To identify and control Environmental Health & Safety (EHS) impacts, risks and loss exposures created by modifications to processes, equipment, and permanent or temporary changes at Abu Dhabi Airports.

3. Scope

- 3.1. This procedure applies to work arising from temporary and permanent changes to physical structures/buildings and systems/processes/procedures used to manage EHS risks, equipment, materials or substances both applicable on the landside and airside.
- 3.2. Applies to all activities managed directly by Abu Dhabi Airports and all work activities carried out by ADA employees and contractors.
- 3.3. Applies to all changes as defined in Section 4.0 undertaken on Abu Dhabi Airports premises.

4. Definitions and Abbreviations

Definitions	Description
Change	New or modified physical structure/building, system/process/procedure used to manage EHS risks, equipment, material or substance.
Contractor	A person, organization, their employees or a nominated representative engaged to carry out work for the entity in a contract for service arrangement.
Emergency Change	Immediate actions used to avoid; or control a spontaneous emergency situation.
Management of Change	The process of evaluating a proposed change, implementing controls, providing necessary training and communications, and/or making any necessary changes to the OHS management system to continuously improve its effectiveness.
Management of Change Initiator	Is the person who initially perceives the need for the change and develops, plans and executes the steps necessary to meet the requirements of the Management of Change Procedure.
Management of Change Owner	Department or stakeholder responsible for reviewing, managing and implementing the change.

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Permit to Work	The system that allows central control and ongoing monitoring of higher risk activities to ensure that activities are: - Authorized - Carried out by qualified personnel using appropriate safety precautions - Those activities with potentially hazardous interactions do not take place at the same time.
Temporary Change	Planned for limited duration; such as trial or evaluation or by-pass of a safety system for maintenance.
Abbreviation	Description
DMT	Department of Municipality & Transport
EHS	Environment Health and Safety
FM	Facility Management
FSS	Fire Safety & Standards
HOD	Head of Department
HOS	Head of Section
MOC	Management of Change
MSDS	Material Safety Data Sheet
OHS	Occupational, Health & Safety
ADPHC	Abu Dhabi Public Health Center
PTW	Permit To Work

SOP Title:	Management of Change					
SOP Ref. No.:	ADA /COR/SOP/006	Version No.:	V3.5	Version Date:	01/11//2021	Page: 6/12

5. Procedure Steps	Responsible Party
<pre> graph TD Start([Start]) --> ChangeIdentified[Change Identified Needed] ChangeIdentified --> ManagementForm[Management Of change form] ChangeIdentified --> DetermineType[Determine Change type] ManagementForm --> InitiateDoc[Initiate Documentation] DetermineType --> InitiateDoc InitiateDoc --> RiskAssessment[Risk Assessment Evaluation] RiskAssessment --> ReviewApproval[Review / Approval] ReviewApproval --> Approved{Approved} Approved -- Yes --> ImplementChange[Implement Change] Approved -- No --> AmendPlan[Amend Plan] ImplementChange --> MonitorEffectiveness{Monitor Effectiveness} MonitorEffectiveness -- Yes --> PostCommissioning[Post commissioning , Review] MonitorEffectiveness -- No --> AmendPlan PostCommissioning --> End([End]) </pre>	▪ HOD ▪ HOS ▪ Contractor
5.1. General Permanent or temporary changes to organizations, equipment, facility, standards or procedures, changes associated with laws and regulations, non-routine work or work on or with any new or unknown equipment shall only proceed if: ▪ An EHS risk assessment is undertaken to assess the potential impacts of the change, ▪ A plan that clearly specifies the timescale for the change and any control measures to be implemented from design to operate regarding: ○ Equipment, facilities and process ○ Procedures ○ Personnel competency, accountabilities and responsibilities ○ Documentation	

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○ Communication ○ There is authorization of the plan by a person responsible for conception to completion ○ The situation is reassessed if circumstances change ▪ Whenever a need for change is identified, the change must be evaluated to determine whether a formal change management process must be applied. ▪ A management change procedure should be employed if one of the following criteria is affected: ○ Interested parties requirements (customers, employees) ○ Occupational Safety and Health ○ Environmental protection ○ Regulatory Compliance ○ Personnel Competency ○ Policies and Procedures ○ Asset Modification ▪ An approved MOC shall be submitted as part of the Project Safety Plan with the approved PTW prior implementation. Note: PTW process will be link to the MOC procedure to ensure that no changes to plant and equipment, other than maintenance can progress without the appropriate MOC being undertaken. Kindly adhere to the EHS PTW SOP ADA/ OPS/Assurance/EHS & Sustainability/SOP/V1/ 25112022		
5.2. Identification and Planning of Change 5.2.1. Identify an improvement idea or a solution to a problem is communicated within a department. 5.2.2. Accomplish MOC Form and submit to immediate Supervisor or HOS. 5.2.3. Once the requirement for a change has been determined, the changed is planned in terms of schedule and necessary resources. Note: Please refer to the following procedures: 1. FM Management of Contractor 2. Airside Works Approval Procedure	▪ MOC Initiator ▪ HOD ▪ HOS ▪ Contractor	
5.3. Consultation 5.3.1. Where significant changes are being considered full consultation will take place with staff as needed.	▪ MOC Initiator	
5.4. Review / Evaluate 5.4.1. Review, evaluate and complete the Management of Change Request Form, identifying design flaws, quality, health, safety and environmental risks, consequences of the proposed change, specifics of documentation, communication and training requirements. 5.4.2. The nature / impact of the change will dictate the disciplines required for review. 5.4.3. Based on the review and evaluation the change proposal must contain the following information required in assessing the objective, costs and risks associated with the change: ▪ Description of change ▪ Benefits of applying the change	▪ HOD ▪ HOS ▪ Contractor	

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- Costs and risk of not applying the change - Costs associated with the change - Risk assessment of the change.		
5.4. Approval 5.4.1. The Management of Change documentation must be agreed by appropriate personnel, technical, safety, environmental and economical for final approval. 5.4.2. The reviewers must authorize the change before implementation and/or startup. Authorization will be documented through completion of the Management of Change form. Approval of the proposed change is subject upon the following pre-implementation actions: - All necessary health and safety reviews (ie. Risk assessment) are completed. - Hazards/consequences have been addressed. - Regulatory requirements/approvals have been satisfied. - All affected personnel have been informed of the change and trained as necessary. - The Management of Change Form including authorizations is complete.		- HOD - HOS - EHS & Sustainability Section - FM - Contractor
5.5. Planning and Design It could also include drawings, fabrications, special parts to be ordered, etc. The change shall be designed to applicable regulations, codes and standards. A detailed EHS risks assessment must be completed as one of the first steps of the design process. As the design progresses there may be a need for further assessment and evaluation of change or the impacts resulting from the change. The design should also identify any temporary changes required during the implementation phase and ensure they have been properly assessed. Note: If the supervisor detects a need to modify the implementation of the change, or if new EHS issues arise, he/she is required to notify and seek authorization to proceed from the original authorizers (i.e. those who signed the Management of Change Form).		- HOD - HOS - Contractor
5.5.2 Implement the Change The implementation plan/program must be documented. The plan/program may include purchasing, work planning, contractors, and supervision. The change should be implemented as per approved design. When implementing a change, all actions or concerns identified during the review phase must be addressed. Each implementation should include: - The work process to affect the change - Documentation of the change (drawings, procedures etc.), - Communication to all affected parties, - Any necessary training, and - A pre-start up safety review.		- HOD - HOS - Contractor
5.5.3 Verification / Pre-Start Up Inspection The change must be verified to ensure that it is in accordance with the change note and all relevant requirements. A pre-start up inspection should be carried out to verify that critical OHS procedures have been established and communicated to appropriate		- HOD - HOS - Contractor

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SOP Ref. No.:	ADA /COR/SOP/006	Version No.:	V3.5	Version Date:	01/11//2021	Page:	9/12

employees (ie. safe operating procedures, lock out/tag out procedures, confined space entry procedures, emergency procedures, etc.).		
5.5.4 Close-out the Change When the change has been fully implemented and the implementation verified the management of change procedure is complete. Key final deliverables are: ▪ The completed change to the asset. ▪ Updated information regarding the change including a documented record of the assessment process undertaken. ▪ A record of the lessons learned (to be applied to future designs and change consideration). ▪ Appropriate final logging of the change. ▪ A quality check after the change has been implemented including a follow-up of operational, safety, technical and cost benefit comparison of “planned” to “actual” performance.	▪ HOD ▪ HOS ▪ Contractor	
5.5.5 Documentation Update all relevant documentation such as product specifications, operating procedures, control logic documentation, alarm trips schedules, drawings and manuals, pressure test certificates, cleanliness certificates, training records, etc. Trace and record the different changes with their date of change,	▪ HOD ▪ HOS ▪ Contractor	
5.5.6 Training Ensure that affected employees and contractors are trained on the impact of the change prior to the restart of the changed process.	▪ HOD ▪ HOS ▪ Contractor	
5.5.7 Emergency Management of Change An Emergency MOC is a change that must be performed on a true emergency basis due to any of the following situations: ▪ The process must be changed to correct a deficiency that would cause a hazardous condition that is an immediate threat to the safety and health of the site personnel or the public. ▪ The process must be changed to prevent an immediate environmental release. ▪ The process would be in jeopardy of not providing product to clients, owing to equipment failure or unforeseen design errors. ▪ Emergency Changes must be reviewed and followed up.	▪ HOD ▪ HOS ▪ Contractor	
5.5.8 Temporary Change Proposed change end date will be documented on the Management of Change Form. Notify FSS & EHS Section when the temporary change has been removed and the system is back in its original state. Request and obtain an extension from the authorizer(s). If the temporary change is not removed by the proposed date or if the change is to become permanent, then a permanent change request should be processed and approved.	▪ HOD ▪ HOS ▪ Contractor	
5.5.9 Emergency Change	▪ HOD ▪ HOS	

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5.5.10	An Emergency MOC is a change that must be performed on a true emergency basis because of any of the following situations: - The process must be changed to correct a deficiency that would cause a hazardous condition that is an immediate threat to the safety and health of the site personnel or the public. - The process must be changed to prevent an immediate environmental release. - The process would be in jeopardy of not providing product to clients, owing to equipment failure or unforeseen design errors.	Contractor
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6. Monitoring, Evaluation and Review

- 6.1. This CORE SOP will be reviewed and updated at least annually or as the need arises.
- 6.2. Changes approved should be communicated to responsible agencies/departments to comply with changes approved.

7. Potential Risks

Risk	Control Measure
7.1. None identification of EHS risks.	Department Management to ensure that EHS risks are identified and control measure implemented and monitored.

8. Exceptions

This procedure does not include the following processes:

- 8.1. Aviation related management of change.

9. Legal Requirements

This section is to specify what Laws, Regulations, standards or guidelines the department deal with in this SOP. If not applicable, to mention N/A in this section.

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10. Supporting Documentation and Tools

10.1. References:

- Abu Dhabi Occupational Safety & Health (OSHAD-SF), Element 9 – Compliance & Management Review
- Abu Dhabi Occupational Safety & Health (OSHAD-SF) Manual
- GCAA – CAR PART IX – Aerodrome Regulations
- GCAA – CAR PART X – Safety Management System
- ADA Hazard Identification & Risk Assessment CORE SOP.
- FM Department, Airport Management Centre.
- Airside Works Approval Procedure

10.2. Forms:

- Abu Dhabi Airports Management of Change Form

11. Filing and Distribution

11.1. This document is published in Workflow On Abu Dhabi Airports Matari-Sharepoint. to be accessible to all users.

11.2. It will be updated from time to time based on business requirement and approval from HOD Compliance & EHS.

11.3. Department Management to communicate procedure to department staff and relevant stakeholders.

12. Change Log

Version No.	Document Creation, Review, Approval and Change Tracking	Actioned by (Name, Title, Department)	Action Date	Change Effective Date
V1.0	First version published			
V1.1	Added MOC Abbreviation	RA		
V1.2	Changed SOP Owner and SOP Approver	RA		
V2.0	Change Template and Version No and responsibility as per the current structure.	MS	14/01/2015	15/01/2015
V3.0	Change Template and Version No.	OA	04/09/2016	
	Amendment of Purpose & Scope	AA		
	Update of Definitions and Abbreviations	AN		

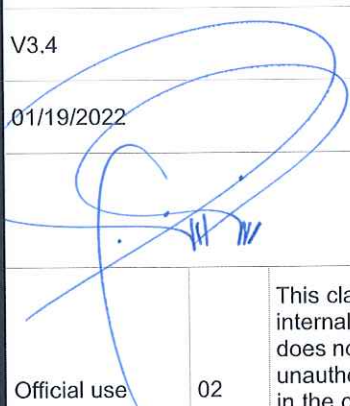
SOP Title:		Management of Change					
SOP Ref. No.:	ADA /COR/SOP/006	Version No.:	V3.5	Version Date:	01/11//2021	Page:	12/12
	Amended Procedure Steps Updated Monitoring, Evaluation and Review Amended Exception Update of Supporting Documents & Tools Amend Filing & Distribution	MS GG EU					
V3.1	Amended Version Number and Date Update of Supporting Documents & Tools Update of Procedure Steps	EU			12/12/2017	15/12/2017	
V3.2	Update abbreviations & reviewed Update of Supporting Documents & Tools	Abdul Aziz MS			26/02/2019	27/02/2019	
V3.3	Amended CORE SOP Owner Update of Version No. and Date Update of Purpose Update of Definition and Abbreviation Update of Procedure Steps Update of Support Documents and Tools Update of Change Log Adding legal requirements	EU MA			01/07/2019		
V3.4	SOP review	MA			01/02/2021		
V3.5	SOP Review and version date updated	FA			01/09/2022	01/09/2022	

N.B. This document is UNCONTROLLED unless signed by an authorized person in the appropriate section of this document or viewed in Workflo! on Abu Dhabi Airports Matari-Sharepoint.

STANDARD OPERATING PROCEDURE

Management Review

Emergency Services and Compliance

Business Process Area / Functional Area:	EHS & Sustainability		
SOP Owner:	EHS & Sustainability		
SOP Ref. No:	ADA/COR/SOP/007-V3.4 -01/09/2022		
Implementation Date:	01/11/2021		
Approved By:	Aws Al Khanjari		
Approval Date:	23 rd March 2023		
Version No.:	V3.4		
Version Date:	01/19/2022		
Approver's Signature: (for non-electronic copies)			
Information Classification	Official use	02	This classification refers to information that is to be used internally by the Abu Dhabi Airports personnel only, and does not fall into the previous three categories. Although unauthorized disclosure of this information is prohibited, in the case that it occurs, it is expected that there will be no serious repercussions to Abu Dhabi Airports, shareholders, employees, business partners and/or clients.

A Standard Operating Procedure (SOP) consists of a set of statements describing instructions in an orderly manner for the purpose of achieving a result. SOPs are developed to maximize the efficiency and accuracy of implementation of a policy or operational process.

Template Title:	SOP Template	Template Ref. No.:	TEM/03/SOP/V4.0/01072019	Version No.:	V4.0	Version Date:	01/07/2019
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All information contained in this document is proprietary to Abu Dhabi Airports and shall not be duplicated in any manner or released in part or full to any unauthorized persons. However, the contents of this document are not confidential and shall be accessible to all Abu Dhabi Airports employees and its subsidiaries.

SOP Title:	Management Review						
SOP Ref. No.:	ADA/COR/SOP/006	Version No.:	V3.4	Version Date:	01/11/2021	Page:	3/11

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1. Title

Management Review.

2. Purpose

- 2.1. To provide Top Management with a periodic review of the effectiveness of the IMS and the whole organization.
- 2.2. To facilitate factual decision making and strategic planning through review of measures and other data to provide control, creation of benefit and added value to Abu Dhabi Airports.
- 2.3. To facilitate proactive communication and feedback to the employees and other interested parties to encourage continual improvement.
- 2.4. The objective of this procedure is to describe the type, frequency and level of management review to ensure continual improvement of Abu Dhabi Airports Integrated Management System (IMS) and to ensure their continued suitability and effectiveness against stated objectives satisfying:
 - The Abu Dhabi Airports OGSM
 - The Abu Dhabi Airports Integrated Management System Policy Statement
 - The Abu Dhabi Airports Occupational Safety & Health Commitment Policy
 - The Abu Dhabi Airports Environmental Policy and Commitment Statement
 - Certification requirements of Standards - ISO 9001, ISO 14001, & ISO 45001:2018
 - Certification requirements of GCAA, OSHAD and other applicable regulatory requirements.

3. Scope

- 3.1. This procedure applies to all IMS-related activities and systems at any site controlled by Abu Dhabi Airports and to the Abu Dhabi Airports Group.

4. Definitions and Abbreviations

Definition	Description
International Organization for Standardization	International Organization for Standardization, responsible for the ISO 9000, ISO 22000, ISO 31000 and other international management standards.
Environment Health and Safety Management System	A set of plans, actions and procedures devised and executed to systematically manage environmental health and safety in the workplace
Integrated Management System	A system that incorporates and integrates the ISO 9001 (Quality), ISO 14001 (Environment) and ISO 45001:2018 (Health & Safety) standards into one interactive management system.

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Quality Management System	A quality management system is a set of interrelated or interacting elements that organizations use to direct and control how quality policies are implemented and quality objectives are achieved.
ISO 9001	International standard of quality management system.
Management	The organization and coordination of activities of an enterprise in accordance with certain policies and in achievement of clearly defined objectives.
Management Review	The overall purpose of a management review is to evaluate the suitability, adequacy, and effectiveness of an organization's management system, and to look for improvement opportunities. Management Reviews are also used to identify and assess opportunities to change an organization's quality policy and quality objectives, to address resource needs, and to look for opportunities to improve its products.
Abbreviation	Description
DOT	Department of Transport
EHSMS	Environmental Health and Safety Management System
ES&C	Emergency Services & Compliance
GCAA	General Civil Aviation Authority
IMS	Integrated Management System
OGSM	Objectives, Goals, Strategies, Measures
OSHAD	Abu Dhabi Occupational Safety and Health Center
QMS	Quality Management System
SMS	Safety Management System

SOP Title:	Management Review					
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5. Procedure Steps	Responsible Party
<pre> graph TD Start([Start]) --> Schedule[Schedule Dates for Management Review Meetings] Schedule --> Notice[Issue meeting notice / invite to MRC members] Notice --> Identify[Identify and request information for agenda] Data[Collected information / data] --> Identify Identify --> Received{Is all data / information received?} Received -- No --> FollowUp[Follow-up] FollowUp --> Identify Received -- Yes --> Prepare[Prepare meeting presentation] Prepare --> Conduct[Conduct management review meeting.] Conduct --> MOM[Prepare MOM] MOM --> Approve[Obtain approval to finalize MOM and circulation to stakeholders.] Approve --> Approved{Approved?} Approved -- No --> Review[Review / update MOM] Review --> Approve Approved -- Yes --> Circulate[Circulate to stakeholders] Circulate --> End([End]) </pre>	▪ Department Management ▪ Division Management ▪ Compliance

5.1 General Top Management conducts planned periodic review of Abu Dhabi Airports IMS to ensure its continuing suitability and effectiveness in satisfying applicable regulatory and other standard requirements. Management review shall be undertaken at key functional levels (but not limited to) within Abu Dhabi Airports: ▪ Senior Management Level ▪ Divisional Level ▪ Departmental Level <i>Note: Please refer to Terms of Reference:</i> ▪ Integrated Management System Steering Committee ▪ Safety Review Board ▪ Safety Review Committee ▪ Apron Safety Committee	
5.2 Senior Management Review To maintain the relevance of the management system and ensure its continual improvement the following need to be ensured: 5.2.1. Review and update of the Abu Dhabi Airports management system based on regulatory requirements. 5.2.2. A report will be prepared describing the outcome of the review and any changes to the management system for its consideration, finalization and endorsement. Revised document will then be forwarded to the Management Committee for approval and adoption by Abu Dhabi Airports. 5.2.3. Changes to the management system will be communicated to all relevant stakeholders and/or interested parties	▪ Senior Management
5.3 Divisional Management 5.3.1. Division to review and revise respective management procedures applicable to their activities. 5.3.2. A report will be prepared describing the outcome of the review and discussed during the Divisional Committee meeting. 5.3.3. Any unresolved issues at the divisional review will be escalated to the Abu Dhabi Airports IMS Management Review Committee meeting for decision.	▪ Division Management
5.4. Departmental Review 5.4.1. The committee to review and revise respective management procedures applicable to their activities. 5.4.2. A report will be prepared describing the outcome of the review and discussed during the Department Committee meeting. 5.4.3. Any unresolved issues at the departmental review will be escalated to the regular Airport Operational Divisional management meeting. If	▪ Department Management

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SOP Ref. No.:	ADA/COR/SOP/006	Version No.:	V3.4	Version Date:	01/11/2021	Page:	8/11

matters remain unresolved, it then gets escalated to IMS Divisional Management Review.		
5.5. Review Input Internal and external issues shall be discussed and their potential effect on the strategic direction of the organization. The review input shall consider the following items as a minimum: - Status of actions from previous management reviews; - Changes in external and internal issues that are relevant to the Integrated Management system and that could impact the organization; - The needs and expectations of interested parties; - Compliance with regulatory and other standard requirements; - Risks and opportunities - Aviation, OHS and environmental risk - Information on the performance and effectiveness of the IMS; - The extent to which IMS policies, objectives and targets have been met; - Customer satisfaction and feedback, relevant communications with interested parties; - Status of corrective actions, non-conformities and improvement programs; - Results of internal and external audits; - Statistics, results of monitoring and measurements; - Performance of external service provider; - Adequacy of resources; - Recommendations for continual improvement;		- Compliance - Department IMS representative
5.6. Review Output 5.6.1. All minutes, including assigned actions, produced from meetings / Management Review Meetings are documented and distributed to all present. Minutes are also to be made available through the use of the communication channels highlighted in the Internal & External Communications CORE SOP. 5.6.2. A summary list of outputs from the Management Review meeting is communicated to internal staff through the utilisation of the organisation's intranet system, email and notice boards as appropriate and may include one or more of the following: - Update to Policy - Improvement of the effectiveness of the management system and its processes - Changes to Objectives and Targets ensuring the requirements of enforcing authorities are being addressed; - Reduction in hazards and EHS risks - Changes to procedures and instruction - Changes to process, improvement of product related to customer requirements, resource needs - Investments in new technology - Development of additional competence		- Divisional Management - Department Management - IMSSC

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6. Monitoring, Evaluation and Review

- 6.1. Management and department reviews shall be documented and records maintained for a period of three years.
- 6.2. Necessary information is collected ahead of time to allow management to effectively perform the review.
- 6.3. The management review process can be measured by assessing the effectiveness of key decisions / outputs which are intended to improve the business.
- 6.4. This procedure shall be reviewed and updated annually.

7. Potential Risks

Risk	Control Measure
7.1. Significant issues not discussed in the management review meetings. 7.2. Relevant decisions made and agreed on management review meetings are not communicated to staff.	▪ Identify significant issues in MOM template. ▪ Terms of Reference should include responsibilities of attendees in the management review.

8. Exceptions

Not Applicable.

9. Legal Requirements

This section is to specify what Laws, Regulations, standards or guidelines the department deal with in this SOP. If not applicable, to mention N/A in this section.

10. Supporting Documentation and Tools

10.1 References

- Abu Dhabi Occupational Safety & Health (OSHAD-SF) Manual
- Abu Dhabi Occupational Safety & Health (OSHAD-SF) Element 9.0- Compliance and Management Review
- GCAA – CAR PART IX – Aerodrome Regulations
- GCAA – CAR PART X – Safety Management System
- IMS Steering Committee, Terms of Reference

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- ISO 14001:2015 – Environmental Management System
- ISO 45001:2018 – Occupational Health & Safety Management System
- ISO 9001 2015 - Quality Management System

10.2 Forms

- Meeting Agenda Presentation
- Minutes of Meeting Presentation

11. Filing and Distribution

11.1 The master copy of this procedure is filed by the Compliance section

12. Change Log

Version No.	Document Creation, Review, Approval and Change Tracking	Actioned by (Name, Title, Department)	Action Date	Change Effective Date
V1.0				
V1.1	Update Procedure and 9.1.3 removed reference Emergency Management Added Forms	RA		
V2.0	Change Template and Version No and responsibility as per the current structure.	MS	14/01/2015	15/01/2015
V3.0	Update of Title Template and Version Number Update of Purpose and Scope Amended Definitions and Abbreviations Update of Procedure Steps Update of Monitoring, Evaluation and Review Update of Potential Risks Update of Exceptions Update of Supporting Documentations and Tools Update of Change Log	ON AA AN MS GG EU	04/09/2016	01/12/2016
V3.1	Update of Version Number & Date	EU	03/10/2017	01/12/2017

SOP Title:	Management Review						
SOP Ref. No.:	ADA/COR/SOP/006	Version No.:	V3.4	Version Date:	01/11/2021	Page:	11/11
	Update of Supporting Documentation & Tools						
V3.2	Update abbreviations & reviewed Update of Supporting Documentation & Tools	Abdul Aziz MS		26/02/2019			
V3.3	Amended CORE SOP Owner Updated Change Log Adding legal requiremnets	EU		01/07/2019			
V3.4	SOP Review and version date updated	FA		01/09/2022	01/09/2022		

N.B. This document is UNCONTROLLED unless signed by an authorized person in the appropriate section of this document or viewed in Workflo! on Abu Dhabi Airports Matari-Sharepoint.

First Aid at Work

Business Process Area / Functional Area:	Abu Dhabi Airports						
SOP Owner:	Sustainability & EHS						
SOP Ref. No:	ADA/COR/SOP/026/V5 – 04/09/2023						
Implementation Date:	15/09/2023						
Approved By:	SVP Operations Assurance						
Approval Date:							
Version No.:	V5.0						
Version Date:	04/09/2023						
Approver's Signature: (for non-electronic copies)	<i>Awa Al Khayari</i>						
Information Classification	Official use	02	This classification refers to information that is to be used internally by the Abu Dhabi Airports personnel only				
A Standard Operating Procedure (SOP) consists of a set of statements describing instructions in an orderly manner for the purpose of achieving a result. SOPs are developed to maximize the efficiency and accuracy of implementation of a policy or operational process.							
Template Title:	SOP Template	Template Ref. No.:	TEM/03/SOP/V5.0/20112022	Version No.:	V5.0	Version Date:	4/09/2023

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1. Title

First Aid at Work

2. Purpose

- 2.1. To comply with DMT, OSHAD and other applicable regulatory requirements and standards.
- 2.2. That all injuries are reported to the concerned department for preventive action and to ensure the delivery of appropriate response to all medical emergencies.
- 2.3. To aid promote recovery, and to prevent further harm or injury.
- 2.4. To highlight the responsibilities of designated first aiders and in case of untrained personnel, describe the correct course of action in the event that someone becomes injured or ill.

3. Scope

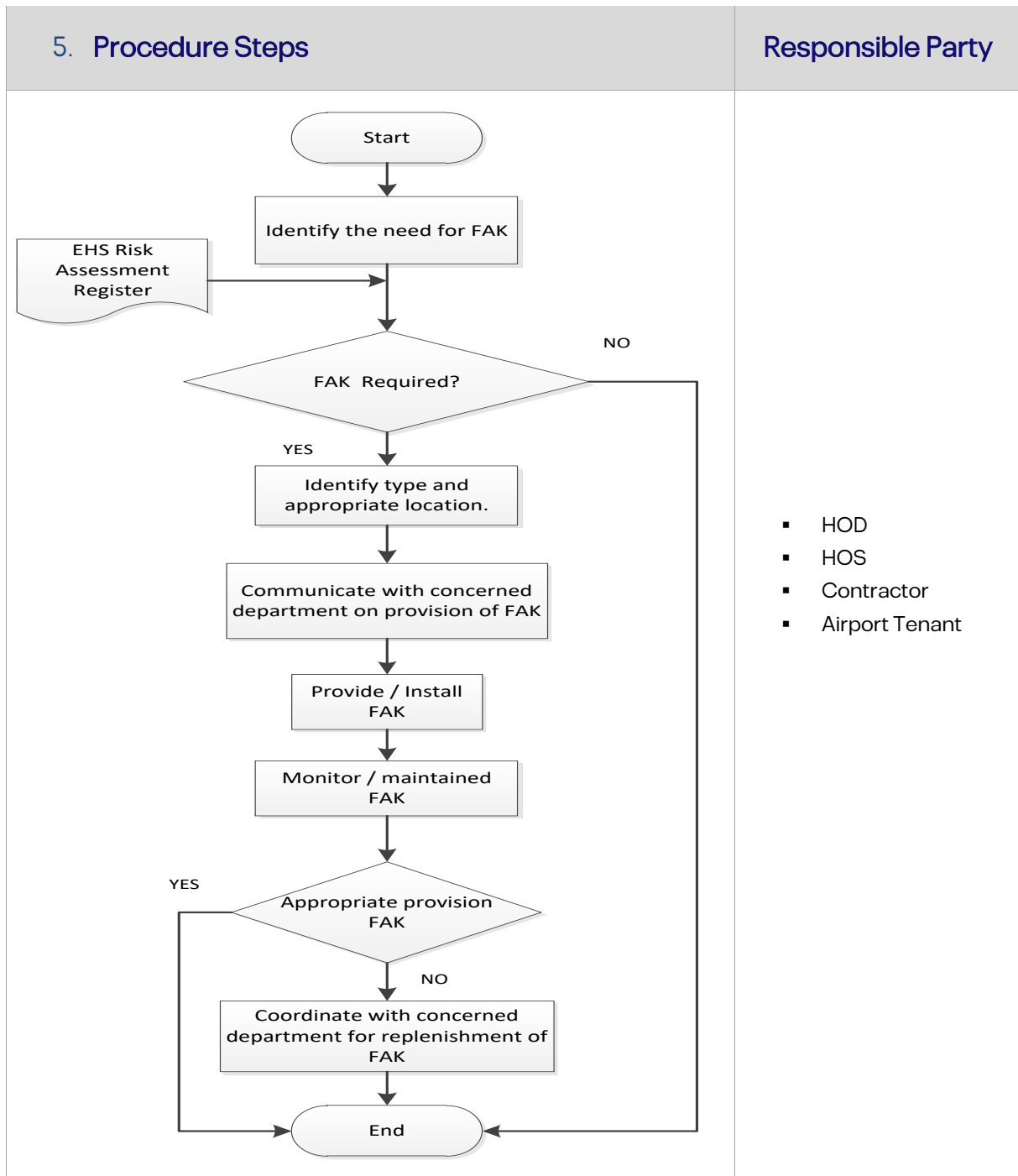
- 3.1. This document applies to the provision of First Aid kits at passenger terminals, ancillary building or areas controlled by Abu Dhabi Airports and its subsidiaries.

4. Definitions and Abbreviations

Definitions	Description
Accident	Undesired event giving rise to death, ill-health, injury, damage or other loss (ref. ISO 45001:2018).
Airport Tenant	Any person, other than an aircraft operator that has an agreement with the airport operator to conduct business at Abu Dhabi Airports premises.
Contractor	A person, organization, their employees or a nominated representative engaged to carry out work for the nominated entity in a contract for service arrangement (ref. OSHAD – SF Glossary of Terms).
Emergency Service	External (or internal) personnel who are highly trained in emergency response techniques to a level at which they can prolong life and control emergency situations.

First Aid	An immediate assistance given to a person suffering from a sudden illness or injury in the workplace, with care provided to preserve life, prevent the condition from worsening, and/or promote recovery. Such care may be considered "first aid" even though provided by a health-care professional (ref. OSHAD – SF Glossary of Terms)
First Aid Injury	Is a minor work-related injury or illness that calls for only simple "First Aid" treatment and does not call for follow-up treatment by a health-care professional. First aid injuries do not result in lost time from work or work restrictions (ref. OSHAD – SF Glossary of Terms)
First Aider	A person that has been trained in first aid to perform first aid in case of an emergency (ref. OSHAD – SF Glossary of Terms)
High Risk Areas	An area where employees / general public may be exposed to hazards that could result in serious injury or illness that would require immediate medical treatment (ie. workshops, apron, aircraft stands, dangerous goods storage, confined space, vehicle parking, generator / chiller rooms, construction areas, etc.)
Low Risk Areas	An area where employees / general public are not exposed to hazards that could result in serious injury or illness that would require immediate medical treatment such as those associated with hazardous materials, dangerous goods, confined spaces and hazardous manual handling (ie. offices, retail shops, restaurants, passenger lounge, check-in counters, immigration counters)
Abbreviations	Description
AED	Automated External Defibrillator
CoP	Code of Practice
DMT	Department of the Municipality & Transport
EHS	Environment, Health and Safety
FAK	First Aid Kit/s
HOD	Head of Department

HOS	Head of Section
OHSAS	Occupational Health and Safety Assessment Series
ADPHC	Abu Dhabi Public Health Center



5.1. General 5.1.1. The Abu Dhabi Airports gives importance to the immediate care of injured staff / general public by providing appropriate number of FAK. 5.1.2. Appropriate number of competent first aiders are assigned per shift per area of responsibility, proportionate to the work activity. 5.1.3. FAK must be in a readily accessible location provided with adequate signage and located close to areas where there is a higher risk of injury or illness (ie. workshops). 5.1.4. FAK's should provide basic materials for injuries requiring first aid only (ie. cuts, scratches, minor burns, eye injuries, muscular sprains, broken bones, etc.). 5.1.5. Medications including analgesics such as paracetamol and aspirin must not be included in the first aid kits. Staff requiring prescribed medications should carry their own medication for their personal use as necessary or consult the Airport Clinic. 5.1.6. The number of FAK's required is determined by a risk assessment. 5.1.7. The need for additional first aiders is to be considered depending on the number of staff or presence of general public (ie. passengers / visitors).	
5.2. Risk Assessment 5.2.1. The type of FAK and the number of first aiders should be based on the outcome of the risk assessment process. 5.2.2. Risk assessment process should be in accordance with the IMS CORE SOP on Hazard Identification / Reporting and Risk Assessment	▪ HOD ▪ HOS ▪ Contractor
5.3. Nomination / Appointment & Qualification of First Aiders 5.3.1. A nominated / appointed staff should: • Have the capacity to deal with injuries or illnesses • Be able to relate well with staff and the general public • Readily available when required • Have good communication skills both written and oral • Be committed to undertake refresher training 5.3.2. Competence: • Completed the first aid training course. • Attended the first aid refresher training course as required. 5.3.3. Number	▪ HOD ▪ HOS ▪ Contractor ▪ Airport Tenant

The number of first aiders shall be in accordance with the needs of the organization and the minimum regulatory requirements: • At least one first aider per work area per shift with less than 50 employees. • At least one first aider per 50 employees/staff per worksite per shift with more than 50 employees	
5.4. Documentation and Recording: 5.4.1. Report all first aid treatment (however trivial) using the incident reporting and investigation form through EHSReporting@adairports.ae 5.4.2. Report summary of medical treatment cases of passengers and staff to EHS Section on a monthly basis.	▪ Designated First Aider
5.5. Location and Quantity of FAK 5.5.1. The contents of the first aid kit will need to vary depending on the nature of the hazards in the area as indicated by the risk assessment. 5.5.1.1. High Risk: • One FAK for up to 25 Person • Two FAK for up to 50 Person • One additional FAK for every additional 50 Person 5.5.1.2. Low Risk : • one FAK for 10 – 50 Person • one additional FAK for every additional 50 Person up to 200 • one additional FAK for every 100 Person above 200 5.5.2. Monthly inventory of FAK to ensure appropriate re-stocking of FAK supplies. 5.5.3. Coordinate with EHS Section for replenishment of FAK. 5.5.4. Staff withdrawing from FAK should fill-up the first-aid material register	▪ HOD ▪ HOS ▪ Designated First Aider ▪ Contractor ▪ Airport Tenant
5.6. Training and Employee Awareness 5.6.1. Assigned first aiders shall attend the appropriate training courses as required. 5.6.2. Maintain current first aid training certificate/s.	▪ HOD ▪ HOS ▪ Contractor ▪ Airport Tenant

5.6.3. Information and instructions on the location of FAK, AED, names and contact details of assigned first aiders should be provided during new joiners induction training.

6. Monitoring, Evaluation and Review

- 6.1. Compliance with the requirements of this procedure is verified periodically through internal and/or external audits or workplace inspections.
- 6.2. Department Managers are responsible for the implementation and compliance of the requirements of this procedure.
- 6.3. Terminal Managers are to ensure that FAK's are properly posted in terminals and in good order.
- 6.4. EHS Section is responsible for the periodic review and update of this procedure in consultation with relevant departments.
- 6.5. Contractors, airport tenants and airlines are to ensure monitoring of respective FAK's.

7. Potential Risks

Risk	Control Measure
7.1. Non-compliance to this procedure could lead to non-conformance to internal and external audits. 7.2. Non monitoring or reporting of first aid treatment cases could result in the increase of serious injuries / illnesses. 7.3. Assigned first aiders not attending the required courses..	▪ Communicate updated procedure to concerned departments and stakeholders. ▪ Proper reporting, investigation and monitoring of first aid injury cases. ▪ Appropriate training for designated first aiders. ▪ Periodic monitoring of FAK's.

8. Exceptions

8.1. This procedure does not include AED's. Contractor, airport tenants and airlines operational control documents.

9. Legal Requirments

This section is to specify what Laws, Regulations, standards or guidelines the department deal with in this SOP.

- ADPHC
- DMT.

10. Supporting Documentation and Tools

10.1. Supporting Documentation:

- 10.1.1. OSHAD-SF, Code of Practice 4.0 – First Aid & Medical Emergency Treatment.
- 10.1.2. OSHAD-SF – Glossary of Terms.
- 10.1.3. ISO 45001:2018 – Occupational Health & Safety Management System

10.2. Form:

- 10.2.1. First Aid Kit Contents Withdrawal Register
- 10.2.2. First Aid Kit Contents Inventory Register
 - 10.2.2.1. High Risk
 - 10.2.2.2. Low – Medium Risk

11. Filling and Distribution

11.1. Department Management is responsible for keeping, at a minimum the following:

- Training of assigned department first aiders
- Contact details of designated first aiders
- First aid statistics involving department personnel / visitors

11.2. EHS Section is responsible for keeping, at a minimum the following:

- First aid statistics involving all departments / contractors / airport tenants / general public.
- Incident Report & Investigation form reported

11.3. Records are to be kept for retention period of 5 years.

12. Change Log

Version No.	Document Creation, Review, Approval and Change Tracking	Actioned by (Name, Title, Department)	Action Date	Change Effective Date
V1.0	First version published			
V1.1	Review and Update	AG		
V2.0	Change Template and Version No and responsibility as per the current structure	MS	14/01/2015	15/01/2015
V3.0	Change Title Ammended Purpose & Scope Ammended Definition & Abbreviation Added Roles & Responsibilities Ammended Procedure Steps Ammended Monitoring, Evaluation & Review Ammended Potential Risk Ammended Supporting Documents & Tools Ammeded Filing & Distribution Updated Change Log	ON AA AN MS GG EU	15/03/2016	
V3.1	Updated Title Page, Version No. and Version Date Amended DMAT to DOT	EU	28/02/2018	01/03/2018
V3.2	Updated Version No. and Version Date Ammended Definition & Abbreviation Update Clause 5.5 – 5.5.1 Ammended Supporting Documents & Tools	AB MA	28/02/2019	

V3.2	Changed SOP Owner Added Legal Requirements	MA	01/07/2019	
V3.3	Replacing 18001 with 45001:2018 and version number	MA	01/02/2021	
V4.	Replacing the DOT with DMT Replacing the OSHAD with ADPHC	AO	02/11/2021	
V5.	Rebranding & Updated Title Page, Version No. and Version Date Changed SOP Owner	MB	04/09/2023	15/09/2023

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مطارات أبوظبي
ABU DHABI AIRPORTS

Appendix 1: List of items: FAK: Low – Medium Risk Environment

No.	Description	Quantity
1	Standard FAK box	1
2	Wall bracket for FAK (green)	1
3	SJA Rescue Pocket Mask	1
4	Nitrile P/F Gloves, Large Pairs	10
5	Washproof plasters, assorted sizes, pack of 100	1
6	No. 16 Eye Pad	6
7	No. 7 small dressing	2
8	HSE medium dressing 12 x 12 cm	6
9	Triangular bandage non woven non-sterile disposable; 90 x 90 x 130 cm	3
10	Crepe bandage; 10cm x 4.5 m	1
11	Crepe bandage; 7.5 cm x 4.5 m	2
12	Conform bandage; 5cm x 4.5 m	1
13	Sterile 10 x 10 cm Gauze swabs pk 5	1
14	Eye wash phials - Single	5
15	KOOLPAX Mini - Single	1
16	Tuff kut scissors green w-be821	1
17	Microporous Tape 1.25 cm x 10 m	1
18	Splinter Removers green plastic	5
19	Clinell Universal Sanitising Wipes Pk of 200	1
20	Biohazard bag - Singles	2
21	Safety Pins (pack of 6)	6
22	Cleansing Wipes Pk of 10 SJSF	1
23	Bioguard Surgical Hand Gel / Skin Disinfectant Spray	1
24	Burnshield Burn Blott sachet, 3.5 ml - single	1
25	Burn Spray 50 ml	1
26	Burnshield dressing 10 x 10cm	1
27	First Aid In an Emergency Booklet – 2014 single	1
28	Conform bandage 7.5cm x 4.5cm	1

Appendix 2: List of Items FAK : High Risk Environment



مطارات أبوظبي
ABU DHABI AIRPORTS

No.	Description	Quantity
1	SJA Rescue Pocket Mask	1
2	Nitrile P/F Gloves, Large Pairs	12
3	Washproof plasters, assorted sizes, pack of 100	1
4	No. 16 eye pad	8
5	No. 7 Small dressing	2
6	HSE medium dressing 12 x 12 cm	6
7	HSE large dressing 18 x 18 cm	2
8	Traingular bandage non woven non-sterile disposable: 90 x 90 x 130cm	2
9	Traingular bandage calico sterile reusable 90 x 90 x 127 cm	2
10	Crepe bandage 10cm x 4.5 m	1
11	Crepe bandage 7.5 cm x 4.5 m	2
12	Conform bandage 5 cm x 4.5 m	1
13	Sterile 10 x 10cm gauze swabs pk 5	1
14	Saline Ampule – 10ml, pk5	1
15	KOOLPAK Mini - Single	1
16	Tuff kut scissors green w-be821	1
17	Microporous Tape 1.25 cm x 10m	1
18	Splinter removers green, plastic	5
19	Biohazard bag - singles	2
20	Safety Pins (pack of 6)	1
21	Cleansing wipes single	30
22	Burnshield Burn Blott sachet, 3.5 ml - single	1
23	Burn spray; 50 ml	1
24	Burnshield dressing 10 x 10 cm	1
25	Non adherent absorbent dressing 5.5. cm	1
26	Disposable heat retaining blanket, adult 210 x 160 cm	1
27	Bioguard Surgical Hand Gel / skin disinfectant spray	1
28	First Aid in an Emergency Booket – 2014 single	1
29	Conform bandage 7.5 cm x 4.5 cm	1

Operational Control Integrated Management System

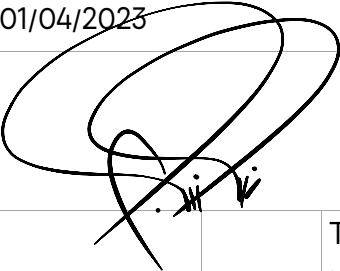
Business Process Area / Functional Area:	Environment, Health and Safety (EHS)						
SOP Owner:	Environment, Health and Safety (EHS)						
SOP Ref. No:	ADA/COR/SOP/015/V3.4-01/09/2022						
Implementation Date:	05/05/2023						
Approved By:	SVP Operations Assurance						
Approval Date:	03/05/2023						
Version No.:	V4.0						
Version Date:	01/04/2023						
Approver's Signature: (for non-electronic copies)							
Information Classification	Official use	02	This classification refers to information that is to be used internally by the Abu Dhabi Airports personnel only				
A Standard Operating Procedure (SOP) consists of a set of statements describing instructions in an orderly manner for the purpose of achieving a result. SOPs are developed to maximize the efficiency and accuracy of implementation of a policy or operational process.							
Template Title:	SOP Template	Template Ref. No.:	TEM/03/SOP/V5.0/2012022	Version No.:	V5.0	Version Date:	20/11/2022

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1. Title

Operational Control.

2. Purpose

- 2.1. To ensure compliance with DMT, ADPHC and other applicable regulatory requirements and standards.
- 2.2. The purpose of this procedure is to establish practices related to the development and implementation of operational controls associated with identified environmental aspects and occupational safety and health risks in line with Abu Dhabi Airports IMS Policy.

3. Scope

- 3.1. This procedure applies to all Abu Dhabi Airports operation and activities that are associated with the identified significant environmental aspects and occupational safety and health risks.
- 3.2. Applies to all Abu Dhabi Airports operations and facilities.

4. Definitions and Abbreviations

Definitions	Description
Contractor	A person, organization, their employees or a nominated representative engaged to carry out work for the nominated entity in a contract for service arrangement (ref. ADPHC SF Glossary of Terms V3.1 March 2019).
Operational Control	Procedures/controls necessary for performing any task / activity in a safe manner, while ensuring no injury, harm or damage is sustained by human beings, asset and the environment.
Abbreviations	Description
ADA	Abu Dhabi Airports
DMT	Department of Municipality & Transport

EHS	Environment, Health and Safety
HOD	Head of Department
ADPHC	Abu Dhabi Public and Health Center

5. Procedure Steps	Responsible Party
 <pre> graph TD Start([Start]) --> Identify[Identify EHS impacts and risk] Identify --> Assess[Carry-out risk assessments] Assess --> Implement[Identify and implement risk control measures] Implement --> Controls{Operational Controls in place} Controls -- No --> Implement Controls -- Yes --> Monitor[Monitor effectiveness operational control] Monitor --> Effective{Effective} Effective -- No --> Implement Effective -- Yes --> End([End]) </pre>	▪ HOD ▪ Contractor
5.1. General 5.1.1. Activities related to significant aspects / risk and other activities will be identified.	

5.1.2. Activities will be assessed for the need of EHS related operating procedures to document the process. 5.1.3. EHS operating procedures will be established to provide for proper management and control.	
5.2. Identification and Planning 5.2.1. Process and activities for operational control documentation needs are to be identified based on the results of applicable EHS risk assessments. 5.2.2. Operating controls and parameters needed to control activities related to EHS aspects and hazards are to be identified. 5.2.3. Planning should be carried-out for activities and services to ensure that aspects and hazards do not deviate from applicable EHS operating procedures.	▪ HOD ▪ Contractor
5.3. Documentation 5.3.1. Work instructions for selected activities are to be documented. It should be written in sufficient detail to provide the necessary level of instructions to ensure the desired results. 5.3.2. Consideration may be given to the level of competency of the person who is implementing the instructions. 5.3.3. Particular attention will be given to the potential or actual consequences of certain information not being provided.	▪ HOD ▪ Contractor
5.4. Communication 5.3.4. Operational control requirements are to be communicated to department and subsidiary staff through the organization intranet, memos, e-mail, training, or internal communications. 5.3.5. Contractors / sub-contractors and suppliers need to be aware of the Abu Dhabi Airports operations control requirements. 5.4.1. Updated and/or changes of operating procedures are to be communicated to relevant stakeholders.	▪ EHS ▪ HOD ▪ Contractor
5.5. Training 5.5.1. All employees need to be informed of their responsibilities related to this operational procedure.	▪ HOD ▪ Contractor

- 5.5.2. Employees must be trained in operating procedures relative to their tasks.
- 5.5.3. Training must be documented and records kept.

6. Monitoring, Evaluation and Review

- 6.1. Operational control will be measured and monitored in conjunction with compliance audits and workplace inspections, incident investigation and EHS performance measure.
- 6.2. EHS Section shall review the operating procedures to determine whether the documents meet EHS standards and operational control requirements.
- 6.3. Changes to operating procedures will be in accordance with the Abu Dhabi Airports CORE SOP for Document Management.
- 6.4. This procedure will be reviewed and updated as per ADAC Document Management requirements or if there are any significant changes to regulatory requirements.
- 6.5. Contractors, airport tenants and airlines are responsible for monitoring, evaluation and review of respective operational control procedures in their area of responsibility.

7. Potential Risks

Risk	Control Measure
7.1. Non identification of operating control procedures related to significant environmental aspects and occupational safety and health risks could lead to accidents.	Departments / subsidiaries to identify hazards based on respective work activities and carry-out risk assessment exercise in consultation with relevant stakeholders.
7.2. Non communication of changes to operational controls to relevant stakeholders.	- Develop operating procedures based on department significant EHS risks as identified in the risk assessment register. - Communicate changes through meetings, training, and internal memos.

8. Exceptions

This procedure does not include the following processes:

- 8.1. Aviation related operational control documents.
- 8.2. Fire safety related operational control documents.

8.3. Contractor, airport tenants and airlines operational control documents.

9. Legal Requirments

This section is to specify what Laws, Regulations, standards or guidelines the department deal with in this SOP. If not applicable, to mention N/A in this section.

10. Supporting Documentation and Tools

References:

- Abu Dhabi Occupational Safety & Health (ADPHC – SF) – Element 9.0 - V3.1, March 2017
- ISO 14001 – Environmental Management System; Item 4.4.6 Operational Control
- ISO 45001:2018 – Occupational Safety and Health Management System; Item 4.4.6 Operational Control

11. Filling and Distribution

- 11.1. EHS Section shall maintain document and update when there are changes / modifications to activities or operations.
- 11.2. Copies of approved operational control documents should be kept with concerned stakeholders and uploaded to Matari in respective department or subsidiary folder.
- 11.3. Master copy of this procedure is to be filed with the IMS Section and uploaded to the Matari.

12. Change Log

Version No.	Document Creation, Review, Approval and Change Tracking	Actioned by (Name, Title, Department)	Action Date	Change Effective Date
V1.0	First version published			
V1.1	Editorial Change	RA		

V2.0	Change Template and Version No. Change in responsibility as per the current structure	MS	14/01/2015	15/01/2015
V3.0	Changes in Template and Version Number Amended Purpose Amended Scope Incorporated Roles and Responsibilities Update of Definition Update of Procedure Steps Amended Monitoring Evaluation & Review Amended Potential Risk Added Exceptions Updated Supporting Document & Tools Updated Filing & Distribution Updated Change Log	GG EU	09/08/2016	
V3.1	Updated Version Number Amended Monitoring Evaluation & Review Updated Supporting Document & Tools	EU	11/12/2017	15/12/2017
V3.2	Update abbreviations & reviewed	Abdul Aziz MS	14/05/2019	
V3.2	Changed SOP Owner Added Legal requirements	MA	01/07/2019	
V3.3	Replacing 18001 with 45001:2018 and version number SOP Review	MA	01/11/2021	

V3.4	SOP Review and version date updated	FA	01/09/2022	01/09/2022
V4.0	SOP Reviewed and updated	MB	01/04/2023	05/05/2023

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