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General Inspection Guide			
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1 INTRODUCTION

- 1.1 Compliance inspection and permissioning are key processes that support the majority of ONR's operational regulatory activity across all of our purposes.
- 1.2 ONR requires Inspectors to conduct compliance inspection in accordance with ONR guidance, policy and with an enabling approach (see ref 8.10) which satisfies the provisions of the Regulators Code (see ref 8.3).
- 1.3 The purpose and principles of enforcement, as set out in the ONR Enforcement Policy Statement (see ref 8.4), should be at the forefront of an Inspector's mind when undertaking all stages of compliance inspection.

2 PURPOSE AND SCOPE

- 2.1 This guide provides the foundation for compliance inspection activities undertaken by ONR Inspectors across all of ONR's purposes.
- 2.2 The scope of this guide covers the stages of the inspection process to prepare and deliver the individual planned interventions, as set out in the Integrated Intervention Strategy (IIS) plans, including other unplanned/ reactive activity relating to compliance inspection.
- 2.3 The production of the annual IIS plan and its associated governance arrangements are covered in ONR Guide GD-59 (ref 8.2) and should be read in conjunction with this guide.
- 2.4 It is important to draw a distinction across the spectrum of enforcement activity and ONR's associated processes. This guide covers the fundamentals of compliance inspection and should be read in conjunction with other guidance supporting the enforcement and investigation processes (see refs 8.11 and 8.12.)
- 2.5 This guide is intended to help ONR meet the basic requirements of the International Atomic Energy Agency (IAEA) General Safety Requirements and the Regulatory Framework for Safety, GSR Part 1, Requirement 18, staffing and competence of the regulatory body, Requirement 29: Graded approach to inspections of facilities and activities, (see ref 8.1), and the information in the IAEA-TECDOC-1867 - IAEA Handbook for Regulatory Inspectors of Nuclear Power Plants, (see ref 8.8).
- 2.6 This guidance sets out the compliance inspection process as a number of distinct stages, which generally align to IAEA guidance for Regulatory Inspectors of Nuclear Power Plants, as above.
- 2.7 Hence, the terminology used in this guidance predominantly associates with nuclear safety inspection at nuclear installations. The terminology should be substituted for the relevant term when applied across ONR's different purposes (see definitions in section 9.).
- 2.8 The guidance in this document applies generally for all inspection activity across ONR's purposes. Specific guidance relating to different types of inspection is found in GD-59 – Appendix 1.
- 2.9** The alignment of this guide to other guidance is illustrated in diagram 1 below. Where potential inconsistencies exist between this guide and other related or supporting guidance, the relevant Professional Lead(s) should be consulted.

ALIGNMENT WITH OTHER INSPECTION GUIDANCE

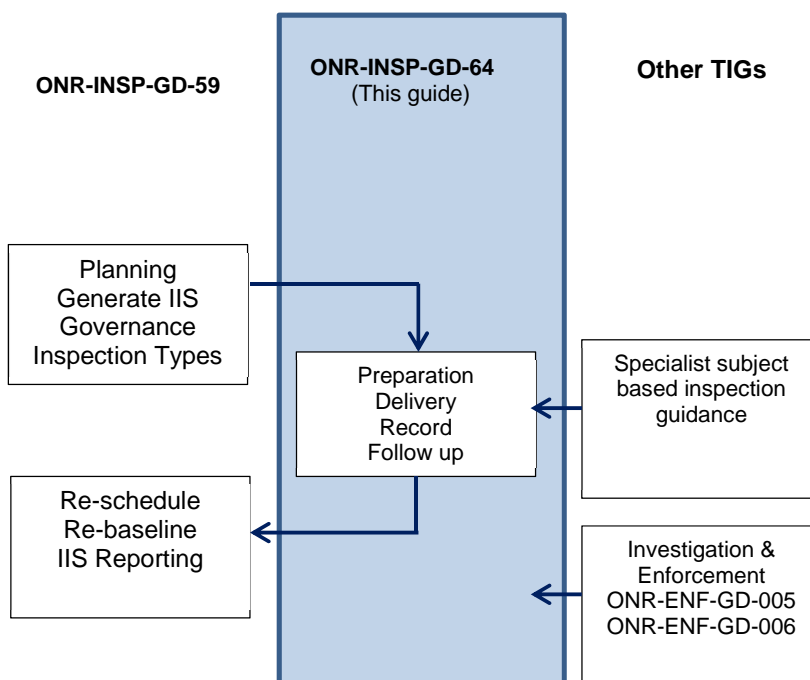


Diagram 1 – Alignment with other guidance

3 PLANNING

- 3.1 Each Operational Division has regulatory strategies for the inspection of licensees/duty holders. Major installations and facilities usually have a specific intervention strategy/ plan which is supported by an annual Integrated Intervention Strategy (IIS). The IIS outlines a programme of planned (proposed) inspections, which may be complemented by unplanned 'reactive' interventions, arising due to emergent issues and incidents etc.
- 3.2 Each site inspection should be on the IIS plan; if necessary, the IIS plan should be modified and re-baselined throughout the year to include different or additional inspections. For more detail on planning and IIS plans, see ONR Guide GD-59, ref 8.2.
- 3.3 Inspection is a means to seek assurance that licensee/duty holder's day-to-day operations are being undertaken in compliance with specific relevant statutory or applicable provisions. This requires a sampling approach to be taken throughout all of the inspection stages, informed by risk and with the underlying premise that the duty holder is responsible for controlling the hazards and risk associated with its undertakings (see ref 8.4).
- 3.4 In the interests of regulatory efficiency, opportunities should be considered for joint working, or taking account of separate inspections with:
- Other ONR operational functions;
 - the Defence Nuclear Safety Regulator (DNSR), for defence sites;

- the Environment Agencies (where joint regulatory or enforcing authority interests apply);
 - other regulators or government departments such as the Health & Safety Executive (HSE), on topics such as asbestos, construction, or COMAH policy;
 - the licensee's or duty holder's internal challenge function, with other government departments, or relevant regulators.
- 3.5 If joint inspections are to be undertaken, Inspectors should ensure that the other regulatory bodies involved are consulted throughout the stages of this guide. Where an agency agreement / MoU exists the Inspector should ensure this is followed and any working arrangements are understood (see Ref 8.15).

4 PREPARATION

- 4.1 The stages in this guidance primarily relate to preparation and delivery of the planned interventions, as set out on the annual IIS plan. Suitable time and attention should always be given to preparation for planned inspections. This typically should start between 1 and 2 months ahead of the inspection date.
- 4.2 Unplanned 'reactive' inspections typically arise due to emergent issues, events and regulatory intelligence. In these instances, the time available for preparation may be limited. As a minimum it is expected that the Inspector leading the intervention will inform and preferably consult with the Nominated Site Inspector (NSI - see ref 8.2) or relevant Delivery Lead (DL). For more information on planned versus reactive inspections see ref 8.2, Appendix 1O.
- 4.3 Preparation for planned 'unannounced' inspections should be similar to that for announced interventions. However, care should be exercised to avoid providing such detail to the licensee/duty holder, which may compromise the effectiveness of the inspection. The aim of an unannounced inspection is to observe conditions on site that are as representative, as can be, of the normal level of control achieved by the licensee/duty holder. Further information on announced versus unannounced inspections is given in ref 8.2, Appendix 1P.
- 4.4 The nominal duration spent 'on site' to inspect the arrangements supporting a typical site licence condition is considered to be around half a day, based on existing custom and practice. However, the duration on-site varies considerably depending on the type of inspection, with a planned Theme or System Based Inspection (SBI) potentially taking several days on site (see Appendix 10, section 19 and ref 8.2 – Appendix 1).
- 4.5 A preparation time of half a day for a planned compliance inspection (i.e. one that will be awarded an inspection rating) is, in general, considered as the minimum time for the site inspection activity element. This should allow sufficient evidence to be gathered in order to objectively evaluate a rating and support the Inspectors judgement.
- 4.6 The preparation stage should determine a suitable date and time for the inspection. There are a number of factors to be considered when finding a suitable inspection date and an element of flexibility should be included here. Typical factors include resource availability (both regulatory and duty holder), plant status, site location (geographical) and other activities that may influence timing. The Lead Inspector should ensure these factors are communicated as necessary to determine a suitable date.

- 4.7 The planning stage and production of the annual IIS plan should have included consideration of the factors above, including specialist resource allocation requirements, the timing of other planned inspections and coordinating plans across purposes so ONR acts as one, wherever practicable.
- 4.8 These considerations may need to be reviewed again during the preparation stage to account for any changes such as de-conflicting resource constraints on licensees/duty holders and ONR Specialist Inspectors' resource etc.
- 4.9 The detailed intervention scope should be determined during the preparation stage. There are a number of factors to consider when developing the scope. These should include reviewing areas such as operating experience, inspection and enforcement history for site/duty holder in relation to the inspection topic of interest. Information including previous intervention records, regulatory issues and incidents (INF1) should be considered to determine if there are any relevant matters for the planned inspection.
- 4.10 Reviewing existing compliance information in advance of arriving on site significantly improves the efficiency and effectiveness of the inspection. A review of the safety case, security plan, transport plan, accountancy and control plan or other compliance arrangements etc. should form part of preparation stage where applicable.
- 4.11 This information should be requested by the Inspector in good time before the site inspection date. This should come from the licensee or duty holder, since up-to-date information is unlikely to be held by ONR. The Lead Inspector should keep the NSI informed of the interactions as necessary.
- 4.12 Key information to extract from the compliance arrangements and plans etc. should include an understanding of claims made on plant and equipment, processes and people relevant to the inspection to be undertaken.
- 4.13 Inspectors should also consider consulting with the divisional and corporate regulatory intelligence function to inform the inspection scope (see Regulatory Intelligence Reviews on HOW2).
- 4.14 Other potential sources of information to be considered in the preparation stage are the Licensee/ duty holder's own internal regulatory challenge or assurance function intelligence (see section 12, Appendix 3 – Guidance for interaction with internal challenge function).
- 4.15 There may be additional information, which is not readily available from the information sources above. Preparation for an inspection should include a discussion or communication with the NSI in order to establish any relevant regulatory context for the inspection scope.
- 4.16 The current regulatory intervention strategy for the site/duty holder (including any on-going enforcement activity) is an important factor to consider when preparing inspection scope. Care should be taken to avoid the potential for an inspection to inadvertently undermine on-going enforcement, investigation or other regulatory activity/ strategy.
- 4.17 In addition to compliance documentation, there may also be specific records at the site that are relevant to the inspection. Again, it may be more efficient to obtain this information during the preparation stage, to read and digest it, and to develop a set of questions to be addressed during the inspection.

- 4.18 There are two important factors to consider when preparing an inspection scope and requesting documentation in advance of an inspection. Firstly, whilst it is good practice to have a well-defined scope prepared for an inspection, a balance needs to be struck on how rigidly this is applied during the conduct of the inspection.
- 4.19 As noted earlier, ONR conducts inspections on a sampling basis and Inspectors form their judgements on the assurance taken from the evidence sampled. The range of situations an Inspector may encounter on the day of the inspection may require them to seek assurance from further or alternate sources of evidence, which was not envisaged during scope preparation stage. The inspection scope should allow for some level of flexibility to accommodate this approach.
- 4.20 Secondly, the Inspector should carefully consider what documentation is obtained and how it is subsequently managed. As a general rule (for inspection preparation purposes) most of the Licensee/ duty holder's documentation that is managed and retained by their statutory obligations (e.g. LC 6, 25) does not also need to be retained by ONR (i.e. on CM9). The Inspector should also take due cognisance of the requirements of FOIA 2000 and infosec (see 5.7 below) when managing documentation.
- 4.21 ONR provides guidance for most inspection topics under the Technical Inspection Guides (TIGs). Where relevant, Inspectors should also consider guidance published by other regulators (such as the Health and Safety Executive (HSE) and the environment agencies), industry or international bodies, such as the IAEA.
- 4.22 Preparation for an inspection should include a review of relevant guidance and selection of those aspects that the Inspector considers to be relevant to the licensee/duty holder's operations and the planned inspection to be made. Inspectors should use relevant guidance, in conjunction with their knowledge and experience of relevant good practice, to develop an understanding of the compliance standards that are expected.
- 4.23 The scope of the inspection should be defined and articulated through the preparation stage and it is good practice to develop an appropriate question set (noting the balance in para 4.18 above). Inspectors should ensure that others supporting them understand the guidance relevant to the intervention scope.
- 4.24 A scope for the inspection should be developed by the lead Inspector and shared with the site coordinator or duty holder contact. Early issue of the proposed scope allows the licensee/duty holder to ensure the appropriate resources are available and plant, facilities and equipment are accessible and in a suitable condition for inspection. For this purpose, the licensee/duty holder may suggest changes to the proposed scope.
- 4.25 For planned/ announced inspections, it is good practice to furnish the licensee/duty holder with information of the scope of the inspection and any specialist Inspector disciplines supporting it. This allows the licensee/duty holder the opportunity to present a more representative demonstration of compliance. A balance needs to be struck here and the Inspector should use their knowledge and experience to judge how representative the level of compliance is, noting the purpose of our unannounced visits is to test this aspect.
- 4.26 The Inspector should exercise discretion and an enabling approach when finalising the scope of the inspection. The scope should be guided by maintaining the wider interests of safety/ security whilst ensuring an effective inspection can be completed. It is good practice to "agree" on the inspection agenda with the associated

Licensee/duty holder contacts before the delivery stage (Note: the licensee typically uses the scope to determine the schedule of activities, which normally is labelled as the agenda).

- 4.27 A proportionate approach should be taken for inspections of small to medium enterprises (SMEs) in the non-nuclear sector (e.g. those with limited involvement in the transport of radioactive material and modest compliance arrangements). In such cases, advanced provision of a minimal scope, listing the documentation to be made available during the inspection, should suffice.
- 4.28 Inspectors should review the basic stages of inspection, as outlined in Appendix 1 and adequately prepare before visiting site. The checklist below is considered to be the minimal level of preparation:
- Prior engagement with the licensee/duty holder (including site access);
 - Pre-job briefings for ONR intervention team and where applicable communication with Nominated Site Inspector;
 - Familiarisation of the inspection team with relevant aspects of the compliance arrangements etc;
 - Arrangements made for personal safety on site (e.g. PPE and dosimetry etc); and
 - Official notebook, warrant and any other equipment/ information as required (e.g. actions to take in the event of incident occurring during inspection).

5 DELIVERY

Personal Safety and Security

- 5.1 ONR Inspectors must be, and be seen to be, exemplars in the areas of personal safety and security. It is a mandatory training requirement for Inspectors to undertake the N19 - ONR Personal Safety in Inspection training to raise awareness of circumstances, which may put staff at risk of injury or harm during site visits and ONR arrangements for managing such risks.
- 5.2 Inspection activity should not expose individuals to unacceptable levels of risk. This is applicable to the ONR Inspectors and the licensee/ duty holder staff involved. HSWA places a duty of care by ONR to its staff as well as to oneself and to others. ONR Inspectors should adhere to ONR Health and Safety policy (Ref 8.17) and also be cognisant of the site's/ duty holder's own local rules and policies.
- 5.3 Dynamic and point of work risk assessment should be used as appropriate to manage risk during inspection activity. It is good practice to keep a record of where this has been considered and the risks posed by the working environment. A simple point of work risk assessment (PoWRA) checklist is given in section 11, Appendix 2. Licensee/duty holders may also have their own processes, which could complimentary.
- 5.4 In addition to PoWRA, the relevant legislative requirements, relevant good practice and standards should be applied at all times. This includes use of Personal Protective Equipment (PPE/ RPE) and practices when dealing with hazards such as electrical equipment, confined spaces, asbestos, legionella, working at height and workplace transport etc.

- 5.5 ONR Inspectors should enquire about and follow procedures and arrangements made by the licensee/duty holder for the purposes of safety. In particular, Inspectors should follow radiological protection local rules such as barrier entry/exit procedures etc. (See Ref 8.18 and 8.19 for further information for ONR staff visiting duty holder sites with radiological hazards).
- 5.6 In exceptional cases where it is judged that the licensee/duty holder's own risk management controls are not sufficient for our inspection activity purposes, a suitable risk assessment and control measures should be agreed with the relevant Superintending Inspector in advance of the inspection (this may include additional measures such as in Ref. 8.20).
- 5.7 ONR Inspectors should adhere to ONR's Information Security Policy (ref 8.21). Inspectors should also ensure that they are familiar with and follow the licensee's or duty holder's procedures for information and physical security and comply with procedures for entry to and exit from the site.
- 5.8 The necessary authorisations for taking laptops, mobile phones, cameras and other equipment on site should be obtained when required. Any difficulties encountered that may compromise ONR's functions should first be resolved with the site and/or escalated through the relevant Superintending Inspector before considering the exercise of Inspector's warranted powers.
- 5.9 Inspectors should ensure that they are aware of and follow procedures for the control of the licensee/duty holder's information. Documents and records should only be requested and retained in ONR's information systems where necessary for the purposes of ONR's regulatory business (also see 5.34).

General Facility Surveillance and Plant Walk-Downs

- 5.10 Nominated Site Inspectors visiting nuclear licensed sites should consider setting aside time, typically half a day, on each visit for general site or plant walk-downs and interaction with site staff and support contractors etc. The aim is to gain an overall impression of the prevailing site safety culture and the site material condition. Custom and practice at nuclear safety inspections have considered observing aspects such as:
 - Work or shift handovers;
 - Control room operations;
 - Routine meetings e.g. incident screening, operational focus;
 - Controlled area boundary integrity;
 - Conditions of fire barriers;
 - Defect and leak management;
 - Talking to workers, managers and supervisors to gain their perspective;
 - Foreign material exclusion practices;
 - General housekeeping e.g. use of lay-down areas;
 - Management presence or visibility;

- Material condition of structures, system and components;
 - Emergency preparedness and response related facilities/ equipment;
 - General site safety/security culture;
- 5.11 It is important however that all Inspectors understand and acknowledge the extent and limit of their own competence and knowledge. Inspectors should only provide advice intra vires of their appointment and make regulatory judgements on areas where they are suitably qualified to do so. Inspectors should seek the advice and counsel of other specialist or purpose Inspectors where necessary.

Values and Behaviours

- 5.12 The manner in which ONR conducts its inspections is an important factor in how we are able to influence improvements to safety, security and safeguards. Our behaviours set the tone and underpin how we deliver our vision and mission. Inspectors should embrace ONR values in their relationships with each other, our stakeholders and the public. Inspectors should also consider clarity in communicating inter-culturally (see ref. 8.22 for further detail).
- 5.13 Inspectors should act in a professional manner with due cognisance to the regulator's code (ref 8.3), ONR's Enforcement Policy Statement (see ref 8.45.17) and enabling principles (see ref 8.10).
- 5.14 It is a training requirement for new Inspectors to undertake the N6 – Effective Regulation to develop the underlying knowledge, understanding, skills and behaviours of ONR Inspectors to enable them to carry out their role effectively and support ONR in meeting its obligations and mission as an effective independent regulator.
- 5.15 In responding to any potential non-compliance that they identify, Inspectors should clearly explain what the non-compliant item or activity is, the advice being given, actions required or decisions taken, and the reasons for these. Inspectors should provide an opportunity for dialogue in relation to the advice, requirements or decisions, with a view to ensuring that they are acting in a way that is proportionate and consistent.
- 5.16 The paragraph above does not apply where the Inspector can demonstrate that immediate enforcement action is required to prevent or respond to a serious breach (e.g. ROSPI) or where providing such an opportunity would be likely to defeat the purpose of the proposed enforcement action.
- 5.17 ONR's Enforcement Policy Statement (ref 8.4) sets out how ONR will undertake its regulatory business. These principles of enforcement apply to Inspectors behaviours:
- Be proportionate when applying ONR guidance, when determining relevant good practice and when making regulatory decisions.
 - Target the most significant risks and hazards for the greatest attention.
 - Be consistent and prepared to explain your actions to the licensee or duty holder.

- Be transparent when explaining your expectations for compliance and distinguish between relevant good practice (the legal standard) and best practice. Offer advice to enable compliance.
 - Be prepared to account for your regulatory actions and judgements to ONR management, the licensee or duty holder and other stakeholders.
- 5.18 The values and behaviours described in the Regulatory Nuclear Interface Protocol (RNIP) process (see 8.5) should be in evidence at all times. Inspectors should be:
- Responsive, well-informed and innovative.
 - Balanced and proportionate.
 - Consistent and transparent.
 - Respond to the licensee or duty holder in a timely manner.
- 5.19 Use of the RNIP form is optional, with Inspectors advised to include a statement in the Intervention Record to record and justify the decision to use/not use the form.
- 5.20 The expectations of the Regulators Code (ref 8.3) should also be evident.
- We should carry out our activities in a way which supports those that we regulate to comply and grow.
 - We should provide simple and straightforward ways to engage with those we regulate and hear their views.
 - We should base our regulatory activities on risk.
 - We should share information about compliance and risk.
 - We should ensure that our approach to our regulatory activities is transparent.

Team Working

- 5.21 Inspections are conducted by individual ONR Inspectors and teams. These teams may include staff from other agencies, such as other regulators. They may occasionally also include staff from non-statutory organisations acting in an advisory capacity or members of the licensee internal assurance function. During the preparation stage, the lead ONR Inspector should set out clear expectations on regulatory duties and primacy.
- 5.22 Whilst the team may wish to act together during aspects of the inspection for the sake of efficiency etc. it may be appropriate to provide separate feedback at the closing meeting (see section 5.46). It is also good practice to agree details in advance for inspection recording, such as team contribution for the production of the Intervention Record.
- 5.23 In all above cases, ONR is expected to complete its own Intervention Record in accordance with process and to maintain independence.
- 5.24 A good practice guide for working with the duty holder's internal challenge function is available at Appendix 3. Working with the duty holder's internal challenge function to promote self-regulation is encouraged. However, not all inspections should be

completed in this manner as it could be seen to undermine the independence of ONR.

- 5.25 See NS-TAST-GD-080 (ref 8.6.) for further information on the Challenge Culture, Independent Challenge Capability (including an Internal Regulation function), and the provision of Nuclear Safety Advice.

Opening Meeting

- 5.26 Inspection typically follows a structure consisting of an opening meeting, discussion and review of compliance arrangements, plant/ equipment inspection, resolution of outstanding queries, information requests, evaluation of compliance rating, reporting of findings and close out meeting.
- 5.27 The opening meeting should be with an appropriate level of duty holder representative (often senior management). It is good practice for the Inspector to provide some legislative context for the inspection and clarify any matters regarding its purpose. This meeting also provides opportunity to review the scope and content of the inspection and incorporate any necessary changes to the agenda.
- 5.28 It is good practice to identify a representative from the licensee/ duty holder who will act as the central point of contact throughout the inspection. They would be expected to capture and action any requests such as queries raised, information/ document requests, or other areas for follow up identified during the course of the inspection.

Inspection

- 5.29 Inspections are primarily undertaken to judge compliance with relevant legislation and provisions etc. They are also used to benchmark standards and identify best practices, influence improvements and inform regulatory strategies.
- 5.30 The direction of the inspection and the expectations for compliance should be guided by the inspection scope, which is based upon the relevant legislation requirements, guidance and supported by the question sets developed during the preparation stage.
- 5.31 An effective approach to adopt during the inspection is to use a balance of open and closed questions, to gain assurance of the licensee's / duty holder's comprehension of the subject matter (e.g. Tell me, Explain, Describe). However care should be taken not to "lead" the licensee to towards particular responses or be allowed to stray too far away from the matter in question.
- 5.32 Throughout the inspection delivery stage, the Inspector should be evaluating compliance and also be cognisant of the EMM.
- 5.33 Notes should be taken during the inspection to form an accurate account for the purposes of producing an Intervention Record. It is important to consider that any records produced by Inspectors for the purposes of undertaking regulatory functions may be considered official and Inspectors should refer to the notebook guidance in section 14 , Appendix 5. Inspectors should carry an official notebook when undertaking compliance inspections (note further guidance on conducting investigation is given in ref 8.12).
- 5.34 Copies of records and documents provided by the licensee or duty holder in support of the inspection, such as job cards, work instructions, procedures etc. should only

be retained by ONR for the period necessary to complete and document the inspection.

Communication

- 5.35 It is good practice to discuss issues and findings with the duty holder throughout the course of the inspection. Discussion should focus on identifying SMART forward actions for resolution. Actions should preferably be formed ahead of the close out meeting to avoid surprises and lengthy debate or dispute. Guidance on regulatory issues managements is given in ref 8.13 and ONR Academy training B5.
- 5.36 If the inspection spans over the course of a number days it is good practice to have a 'wash up' meeting at the end of each day to identify and communicate any potential matters requiring action.

Evaluation of Compliance

- 5.37 At the end of the inspection, the Inspector/ team should take some time away from the licensee/ dutyholder to review inspection findings and evaluate compliance intervention rating and ONR response.
- 5.38 The Inspector should use ONR inspection rating system (section 18, Appendix 9.) guidance to support the evaluation based on their judgement and supported by the sample of evidence reviewed at the time of the inspection (i.e. "on the day").
- 5.39 The Inspector should refer to the EMM (ref. 8.11) where relevant including the formation of any associated regulatory issues.
- 5.40 The Inspector should normally have sufficient evidence to support the objective evaluation of an intervention rating. However, in certain circumstances the Inspector may judge it appropriate to award a 'provisional' rating.
- 5.41 For instance, the Inspector may judge the sample of evidence is not fully representative or further information needs to be considered. This situation can occur in circumstances where there are time limitations at site or the Inspector is not able to interact with the relevant person or gather the evidence requested. The Inspector should use their judgement in these circumstances.
- 5.42 However, this situation should be the exception and should not be taken as an opportunity for the duty holder to unduly influence the inspection evaluation retrospectively. The Inspector should take all practicable endeavours to conclude the inspection, establishing findings and ONR's response at the end of the inspection.
- 5.43 Where further information and documents are supplied by the licensee or duty holder prior to leaving the site, or shortly afterwards and this changes the 'provisional' rating then this should be recorded in the IR.
- 5.44 The ONR inspection rating guide is calibrated to provide an objective measure of compliance based upon a planned inspection (which included a suitable preparation stage). As such, it is not generally appropriate to assign a rating against reactive activity or inspections of a limited nature i.e. a small sample of evidence. There are some exceptions to this such as where substantive work has been done to identify an underlying compliance gap or the gap is categorical. In these circumstances a justification should be recorded in the IR.

Closing Meeting

- 5.45 The inspection should typically conclude with a closing meeting, again with an appropriate representative of the licensee/duty holder organisation (this should ideally include someone with the authority to act in response to any regulatory action needed).
- 5.46 The Inspector should provide 'hot' feedback of the inspection findings and the evaluated inspection rating, noting whether this is provisional. If the inspection has been performed collaboratively with other regulators or the Licensee internal challenge function, the Inspector should take care to ensure ONR's independence is maintained and our statutory enforcement obligations are met.
- 5.47 It is good practice to provide feedback as a balanced account of the inspection. If possible, positive feedback should be given in addition to identifying any potential compliance gaps.
- 5.48 The feedback should be clear on the ONR response to the inspection including the expected action (as detailed in the ONR Inspection Rating Guide, section 18).
- 5.49 As noted in the communications section, points of detail should be resolved ahead of the close out meeting to avoid lengthy debate or dispute at the close out meeting.
- 5.50 It is also good practice to seek feedback from the duty holder/ Licensee regarding the performance of the inspection. Constructive feedback may assist the effectiveness of intervention practices, and any significant observations should be communicated to ONR's Regulatory Oversight (RO) function for consideration (see also para 7.2-7.3).

6 RECORD

- 6.1 The inspection should be captured on the appropriate record template, which sets out the structure and provides general guidance on the tone and content (e.g. ref 8.14). It is good practice to start considering the outline content of the record during the preparation stage as this will assist production of the final record.
- 6.2 An IR must be produced for all compliance inspections given a rating with the exception of prospective licensees, prior to Nuclear Site Licence (NSL) application and grant, where the rating may be recorded within a Contact Record (CR) and not subject to publication prior to NSL.
- 6.3 Where an inspection does not result in a rating e.g. regulatory exchanges or information gathering exercises, the write up should be captured in a CR. Similarly to an IR the CR should contain sufficient detail to underpin any potential compliance gap or regulatory issue identified within the record.
- 6.4 The write up should be a succinct 'record' of the inspection, with sufficient detail to underpin the evaluated inspection rating. The record is not intended to act as an Inspectors' notebook nor an aide memoire for matters not pertaining to the inspection. If there are matters of a complex nature or require further consideration the Inspector should consider recording these in a suitable separate (supporting) note or report.
- 6.5 The record should be balanced and capture the salient points which underpin the Inspector's judgement on the inspection rating. As well as potential compliance gaps and regulatory issues the record should capture any areas of best practice. The

record should also identify any specific relevant good practice that has been used for assessing compliance during the inspection (e.g. relevant TIGs, ACOPs etc).

- 6.6 IR executive summaries are routinely published where they do not contain sensitive nuclear information. It should be the practice to share full reports with the licensee or duty holder unless exceptional circumstances dictate otherwise. The Inspector should consider the requirements of Freedom of Information and Environmental Information legislation and security classification and marking policy when producing records.
- 6.7 Further guidance on administrative recording of intervention outcomes is provided in Appendix 11 and training for effective writing and communication skills, with duty holders given in tutorial T103.

7 FOLLOW UP

- 7.1 In general, the follow up of inspection findings is managed through the regulatory issue management process (see ref 8.13) and Divisional governance arrangements including feeding back into the planning process and associated intervention strategies.
- 7.2 However, for ONR to be an efficient and effective regulator it must be a learning organisation. Inspectors should be cognisant of the key activities in ONR that contribute to learning and in particular reflect on inspection findings and activity to support ONR's regulatory intelligence, Review Learn Improve (RLI) and regulatory oversight processes.
- 7.3 This could include discussion of the inspection with colleagues who have experience in similar matters or a review of the guidance used during the inspection, including relevant TIGs, Approved Codes of Practice (ACOPs) and ONR guides including this guide.
- 7.4 It is also important that the CNI office is kept informed of the potential for significant enforcement action, investigation and other noteworthy matters that are beyond the Divisional strategy and may for instance impact corporate plans and strategy etc.

Additional Factors

- 7.5 This section provides guidance on some additional factors that Inspectors should consider when conducting inspections.
- 7.6 Distractions that may present themselves during the course of a planned inspection should be avoided unless the Inspector judges these to indicate a significant concern. Such matters may be drawn to the Inspector's attention by the licensee or duty holder, or may be matters that the Inspector identifies during the course of an inspection. If practicable these matters should be recorded for follow-up separately from the planned inspection.
- 7.7 Where a significant concern is apparent, such as an activity giving rise to a Risk of Serious Personal Injury (ROSPI), Matter of Evident Concern (MEC), or Matter of Potential Major Concern (MPMC), the Inspector should act accordingly.
- 7.8 Depending on the circumstances, this may include withdrawing from the area of activity and bringing it to the immediate attention of licensee or duty holder to act to remedy it.

- 7.9 The Licensee or duty holder would usually be expected to respond to initial (enforcement) advice from an Inspector and the requirement to take formal action, through the issuing of a Prohibition Notice, is uncommon.
- 7.10 The Inspector should seek advice on the matter of concern from a specialist ONR Inspector such as Conventional Health and Safety (CHS) team. If, following advice from the CHS team, it is necessary for formal enforcement action to be taken, then the Inspector should contact their Superintending Inspector, or the Nominated Site Inspector.
- 7.11 However, if it is not practicable to obtain this advice and it is the Inspector's opinion that action is necessary without delay, the Inspector should act within their competence and exercise relevant powers of appointment for the situation. For non-nuclear facilities, Inspectors should be aware of the limit and scope of ONR's enforcement authority and may need to refer such matters to other regulators (e.g. HSE).
- 7.12 Inspectors' should act with caution and seek advice when considering the issuing of prohibition notices to any matters other than dealing with straightforward conventional health and safety concerns. Nuclear installations are complex and there may be nuclear and/or radiological safety implications related to prohibiting the operation or activity of concern.
- 7.13 Documentary or other evidence may also emerge during an inspection that indicates a potential significant contravention of legislative requirements. In certain circumstances, this has the potential to meet the investigation selection criteria and trigger the investigation process (ref 8.12).
- 7.14 The Inspector should use their judgement and seek advice from other specialist ONR Inspectors including the Investigation Review Group (IRG) where necessary. If there is a reasonable potential for an investigation and there is a connection between the potential contravention and inspection activity, then the inspection should be brought to a close. The duty holder should be informed of the potential for investigation.
- 7.15 If the Inspector judges it is necessary to secure any evidence at the time of the inspection, then advice should be sought from the IRG on the handling of evidence and use of formal powers.
- 7.16 Whenever an Inspector uses formal powers (under HSWA or TEA13) during the inspection, this MUST be stated to the licensee or duty holder and recorded in the Inspector's official notebook with sufficient information to explain why and which power was used, complete with a start and finish time for the inspection (see Appendix 5).
- 7.17 It is good practice for Inspectors to have copies of relevant templates and forms (including notices) to support any potential enforcement that may arise from the planned inspection activity at site. However, Inspectors should ensure that the current version is used on the day (this may require copies to be requested from the office). The issue of notices etc. under powers must also be recorded in the official notebook as above.
- 7.18 Inspectors may be asked for advice on compliance during the course of an inspection. There is a clear expectation (in the Regulators Code 2014, see ref 9.3) that such advice will be given. Unless there are definite legislative requirements, Inspectors should avoid giving advice of a prescriptive nature. Inspectors should be

clear to the Licensee or duty holder where this advice is given, what the legislative basis is (i.e. RSP, AP or RGP etc) and record this in the Inspector's official notebook.

- 7.19 Complaints, concerns and whistle blowing raised by the licensee or duty holder, employees or members of the public, should be dealt with by following the guidance in section 15, Appendix 6. Where these matters relate to engagement with safety representatives, guidance in section 17, Appendix 8 should also be followed.
- 7.20 There is a potential for an incident to occur when an Inspector is on site. The following guidance provides some general advice on how Inspectors may initially act in response; however, judgement will need to be exercised depending on the specific circumstances of the incident.
- 7.21 Inspectors should initially follow the site emergency arrangements, which may include taking shelter, evacuation, lock down, muster and roll call etc.
- 7.22 Depending on the circumstances and the Inspector's judgment, they should then attempt to contact the site incident controller to ascertain the facts surrounding the incident.
- 7.23 If the incident meets the criteria for notification (or is likely to raise significant media interest), the Inspector should make contact with ONR headquarters to inform them of their presence on-site (see ref 8.23).
- 7.24 If safe and appropriate to do so, the Inspector should attend the site emergency control centre to monitor and record decisions and activities undertaken by the response staff.
- 7.25 The Inspector should prepare to provide regular briefings to the RCIS regarding activities, plant status, information and matters of interest that may be relevant to the RCIS response.
- 7.26 During the incident response phase, the Inspector should be cautious of taking any action that might unduly interfere with or distract from the site's command and control function and procedures, as set out in the approved onsite emergency plan.
- 7.27 Further guidance may be found in ref: ONR-EP-GD-026, Deployed Site Inspector (CM9 2018/56955).

8 REFERENCES

- 8.1 IAEA GSR Part 1 (Rev.1). Government, Legal and Regulatory Framework for Safety. General Safety Requirements Part 1.
- 8.2 ONR-INSP-GD-059 – Guidance for Intervention Planning and Reporting
- 8.3 Department for Business Innovation and Skills – Better Regulation Delivery Office - Regulators Code 2014
- 8.4 ONR’s Enforcement Policy Statement
- 8.5 ONR’s Regulatory Nuclear Interface Protocol - <http://www.onr.org.uk/rnip/index.htm>
- 8.6 NS-TAST-GD-080 - Challenge Culture, Independent Challenge Capability (including an Internal Regulation function), and the provision of Nuclear Safety Advice
- 8.7 ONR generic risk assessments for transport inspection of industrial, medical, academic and research sectors – CM9 ref. 2016/254756 and 2016/254986
- 8.8 IAEA-TECDOC-1867 - IAEA handbook for Regulatory Inspectors of Nuclear Power Plants
- 8.9 ONR-IPS-IN-001 – Procedures under IRR 17 for ONR staff visiting duty holder sites with radiological hazards, CM9 ref. 2018/240211.
- 8.10 Holding Industry to account and influencing improvements in nuclear safety and security – Enabling Regulations in practice – published by ONR in January 2018
- 8.11 ONR-ENF-GD-006 - Enforcement Management Model
- 8.12 ONR-ENF-GD-005 - Process for Conducting Investigations
- 8.13 ONR-RI-GD-003 – Management of Regulatory Issues
- 8.14 ONR-DOC-TEMP-006 Revision 11 - Intervention Record Template - Document Number 324
- 8.15 <http://www.onr.org.uk/agency-agreements-mou.htm>
- 8.16 HSE guidance - Health and safety representatives - <http://www.hse.gov.uk/involvement/hsrepresentatives.htm>
- 8.17 <http://onr/staffhandbook/yourhealthsafety/visiting-staff/index.htm>
- 8.18 <http://onr/staffhandbook/yourhealthsafety/health/ionisingradiation/guidance.htm>
- 8.19 <http://onr/staffhandbook/yourhealthsafety/safety/respiratory.htm>
- 8.20 ONR-GEN-GD-025 - Inspector Guidance on the Regulation of COVID-19 Risk Control Measures
- 8.21 ONR-ISEC-POL-016 - ONR Information Security Policy
- 8.22 ONR-ENF-GD-025-Communicating inter-culturally during investigations - Document Number 1646
- 8.23 ONR-EP-IN-002 - ONR Emergency Response Instruction

9 DEFINITIONS

- 9.1 Licensee may be substituted by 'Duty Holder' or 'Operator'
- 9.2 Licence/Licence Instrument may be substituted by 'Certificate of Approval'
- 9.3 Nuclear may be substituted by 'Non-nuclear Radioactive Material'
- 9.4 Safety Assessment Principles (SAPs), Security Assessment Principles (SyAPs), ONR Guidance for Nuclear Material Accountancy, Control and Safeguards, TIGs and Technical Assessment Guides (TAGs) may be interchangeable with 'Appropriate Procedures and Guidance'
- 9.5 Site may be substituted by "Facility" or 'Duty Holder' or 'Operator'
- 9.6 Safety case may be substituted by 'security plan' or 'management arrangements' or 'accountancy and control plan'

10 APPENDIX 1 – THE BASICS

Stage	Key elements
Planning (GD-59)	Corporate planning and strategy Divisional strategies and plans Inspection resource planning including specialism allocations Annual IIS plan preparation
Preparation (GD-64)	Inspection date and notification Inspection scope Question set and associated legislation, guidance, RGP etc Inspection scope and agenda Personal Protective Equipment (and risk assessment) Official Notebook, forms, notices and templates etc Warrant
	Dosimetry requirements (not in this guide) Site Access requirements (not in this guide) Travel and accommodation requirements (not in this guide)
Delivery	Personal Safety and Security Point of work risk assessments Radiological protection procedures (e.g. local rules) Values and behaviours (<i>and throughout</i>) Team Working Enforcement Policy Statement Enabling regulation Opening Meeting Communication (<i>and throughout</i>)
Evaluation	Inspection ratings guidance ONR response and EMM Regulatory issues and actions
Feedback	Closing Meeting Communication
Record	Intervention Records & Contact Records (FOI/EIR) ONR process metrics (14/21 days)
Follow up	Regulatory issues Divisional interventions strategies/ plans TIGs & Guides feedback (<i>areas where TIGs can be improved</i>) Planning and baselining (GD59)
Additional factors	Risk of Serious Personal Injury (ROSPI) Use of formal powers Complaints, concerns and whistle blowing Emergency incident on site

11 APPENDIX 2 – POINT OF WORK RISK ASSESSMENT CHECKLIST

BEFORE YOU START CONDUCTING A PLANT INSPECTION

	Check
Are you in a suitable physical and mental condition to undertake the activity?	
Are you familiar with the plant/area to be visited and risk involved?	
Is the risk suitably controlled and is it necessary to visit the plant/area to conduct the inspection?	
Have you had a suitable safety briefing from the licensee/duty holder?	
Are you aware of the relevant local rules for radiological protection?	
Do you need to take precautions for Foreign Material Exclusion (FME)?	
Are you aware of what work activity (if any) is being undertaken in the area?	
Are you aware of and wearing the appropriate PPE?	
Are you aware of the relevant visual and audible emergency warnings in the area?	
Are you clear about what action to take in an emergency, particularly egress routes and the location of assembly points?	
Do you have an appropriate licensee/duty holder escort?	
Have any special requirements/notifications for access been made (e.g. security)?	
If escorting ONR colleagues, are you clear about your responsibilities?	

IDENTIFY POTENTIAL HAZARDS

	Check		Check
Slips and trips		Noise and vibration	
Working at height		Fire or explosion	
Falling objects and projectiles		Confined space	
Chemical/harmful substances		Dust or fumes	
Ionising/non-ionising radiation and laser		Adverse weather	
Loose radioactive contamination		Poor lighting	
Electrocution		Temperature (high/low)	
Moving vehicles/objects		Risk to plant operation	
Criticality zones		Asbestos	

IDENTIFY CONTROL MEASURES

(List/discuss/consider the control measures you will take. See also ONR/HRM/010.)

Hazard	Control measures

12 APPENDIX 3 - GUIDANCE FOR INTERACTION WITH INTERNAL CHALLENGE FUNCTION

- 12.1 TAG-80 (ref 8.6) sets out ONR's expectations for the way in which duty holders design and manage their organisations to provide and promote effective nuclear safety advice and independent challenge. The guidance extends to cover the totality of a duty holder's organisation and includes the way in which advice and independent challenge is provided whether on or off the licensed site. The guidance is also relevant to organisations and individuals providing goods and services to a duty holder, whether as agency staff or contractors, including key supply chain organisations.
- 12.2 ONR recognises that duty holders will develop different approaches to delivering effective nuclear safety advice and independent challenge however each duty holder should be able to demonstrate how it has satisfied itself that its approach is appropriate.
- 12.3 ONR Inspectors should act in a way that supports and strengthens licensee/duty holders' self-regulatory processes rather than provides a substitute for them. The lists below set out a general set of guidelines for interaction with Licensee or duty holders internal challenge function, for purpose of this guide herein referred to as "the internal regulator".

DO:

- maintain a regular dialogue with the internal regulator outside of normal interventions, so that both parties are aware of each other's activities
- use the internal regulator to support your interventions, and encourage their participation
- use the internal regulator to gather factual information during your interventions, and provide you with advice
- encourage the internal regulator to undertake pre-inspections, and share the findings openly
- give appropriate credit to the internal regulator where they determine effective findings as part of their internal processes
- support the profile and 'independence' of the internal regulator in the licensee/duty holder's organisation, and support their actions where appropriate
- maintain ONR's independence as the statutory regulator, whilst working alongside the internal regulator
- use internal regulator feedback to inform your intervention planning
- involve the internal regulator in your annual planning process, and consider accounting for their interventions in determining your inspection coverage

DON'T:

- use the internal regulator to make regulatory judgements on your interventions (or give this impression); such judgements are reserved to ONR

- allow the internal regulator to divert your inspection into areas of 'interest' to them, but not to you
- allow the internal regulator to advocate on behalf of the organisation in front of those being inspected
- criticise the internal regulator by association for finding shortfalls in the licensee/duty holder organisation
- undermine the internal regulator function in the licensee/duty holder's organisation
- expose the internal regulator to areas outside of their competence

13 APPENDIX 4 – ENABLING REGULATION IN PRACTICE

- 13.1 Refer to 'Holding Industry to account and influencing improvements in nuclear safety and security – Enabling Regulations in practice' – published by ONR in January 2018:

<http://www.onr.org.uk/documents/2018/guide-to-enabling-regulation-in-practice.pdf>

- 13.2 Note that the enabling regulation approach should also be applied to ONR's regulation of safeguards.

14 APPENDIX 5 – OFFICIAL NOTEBOOKS

- 14.1 Official notebooks should be used to record details of regulatory activity and intervention, which may be needed to uphold enforcement action (including decisions to take no action). This includes activity to support investigation and prosecution i.e. taking legal proceedings (e.g. in a court of law) noting that there are also a number of specific forms that should be used to record details relating to investigation (see ref. 8.12).
- 14.2 The correct use of notebooks, as outlined below, is important for compliance with the Criminal Procedures and Investigations Act 1996; the Criminal Justice and Licensing (Scotland) Act 2010; the Criminal Procedure (Scotland) Act 1995 and the Criminal Procedure (Scotland) Act 2016.
- 14.3 Examples of when official notebooks should be used may include;
- When conducting investigation activities (noting other forms are also required to be used).
 - When the Inspector considers or issues any form of notice under their powers i.e.: Prohibition Notices (PN) or Improvement Notices (IN).
 - If the Inspector uses any of their (HSWA/ TEA13) powers during the inspection. This **MUST** be declared to the licensee/duty holder and also recorded in the official notebook with sufficient information to explain why and which power has been used.
 - When Inspectors provide advice on compliance during the course of the inspection.
 - When undertaking activity on site and it is apparent a record is required that may later be called upon to support enforcement action (i.e. prosecution) such as carrying out initial investigation.
- 14.4 Inspectors may use official notebooks to record all regulatory activities. If this is the case then they should manage them accordingly and as set out in this guide.

Use of Official Notebooks

- 14.5 Complete the front cover with full given name and commenced/ completed dates (dd/mm/yyyy). It is also good practice to reference the previous and next notebook serial numbers if applicable (e.g. spanning activity over multiple notebooks).

Record:

- Licensee/duty holder name and details
- Date, start and end times associated with the entry
- Factual information relevant to the matter:
 - people spoken to, and their position/status
 - regulatory action taken (or not taken) with supporting reasons
 - observations made
 - advice given
 - Inspector's powers used
 - legal requirements which may have been breached
 - measurements, sketches and photographs taken

- details of documents seen or copied
 - Relevant information to support investigations (noting other forms are also required to be used):
 - details of interviews
 - collection of physical evidence
- 14.6 Ensure acceptable quality by:
- Writing clearly and permanently, preferably in black ink
 - No gaps
 - No blank lines
 - No over-writing
 - If a simple error is made e.g. spelling mistake in a name, then a clearly made correction may be appropriate however, caution should be taken concerning altering a record, which could later be challenged in a legal context.
 - No pages removed
 - No unrelated material (e.g. shopping list)
 - No separate sheets of paper
- 14.7 ONR Inspectors are issued with official notebooks to ensure that they are able to enact their statutory powers in accordance with ONR process and relevant administrative acts. It is the responsibility of the Inspector to ensure that they have an official notebook in their possession should it be needed (e.g. when visiting licensee's premises to undertake inspection). Inspectors should note that notebooks might be scrutinised by supervisors, or lawyers and court officials if used in evidence.
- 14.8 Official notebooks remain the property of ONR and Inspectors are responsible for storing them safely/ securely until the information they contain is no longer required. Notebooks used in investigations should be kept until minimum of six months following a conviction or until an appeal has been heard (non-custodial sentence).
- 14.9 It is acceptable to use more than one notebook concurrently. A consistent approach should be followed and it is recommended that if moving from using one notebook to another a contemporaneous record is made to cross reference records and notebooks (i.e. serial number).
- 14.10 Notebooks used in legal proceedings must be recorded in accordance with investigation process (see ONR guidance on handling evidence – ONR-GEN-GD-010).

15 APPENDIX 6 – CONCERNS, WHISTLEBLOWING AND, COMPLAINTS ABOUT ONR

- 15.1 Processes are in place for dealing with concerns, whistleblowing (protected disclosures), or complaints. These are outlined on ONR's website <http://www.onr.org.uk/complaints-concerns-whistleblowing.htm> and the process owner is the ONR Policy Team.
- 15.2 Inspectors may encounter these matters through a number of different channels such as verbally, letters and emails or through ONR and HSE general contact enquires route. The process for dealing with each of the matters is different and it is important that the Inspector establishes the nature of the subject so that it is dealt with through the correct process. If the Inspector is in any doubt they should contact ONR policy team and seek further advice.

Concerns

Definition

- 15.3 A concern would usually be raised as a result of someone being involved in or witnessing an incident, or becoming aware of an issue that has or could affect nuclear safety or security and has the potential to cause, or actually has led to harm to the public. It can sometimes be difficult to decide what constitutes a concern. Concerns should not be confused with a personal grievance or complaint that does not have the potential to cause harm to the general public. Concerns can be raised by anyone and relate to a potential wrongdoing in a workplace in relation to a matter that ONR regulates (nuclear safety, nuclear security, radioactive materials transport, safeguards or health and safety on a nuclear site).

Whistleblowing (Protected Disclosures)

Definition

- 15.4 ONR is a 'prescribed person' under the Public Interest Disclosure Act 1998' for the purpose of receiving "protected disclosures" (whistleblowing) from the nuclear industry and is responsible for investigating any information received.
- 15.5 Whistleblowing is a term used when a worker (ex/employee, independent contractor, agency worker or trainee) passes on information concerning wrongdoing typically, although not necessarily, in the workplace.
- 15.6 Whistleblowers are protected by law. The wrongdoing disclosed must be in the public interest. This means it must affect others e.g. the general public and show that one or more of the following may have occurred, is occurring or is likely to occur:
- A criminal offence (this may include, for example, types of financial impropriety such as fraud);
 - a breach of a legal obligation;
 - a miscarriage of justice;
 - danger to the health or safety of any individual;
 - damage to the environment; or

- the deliberate covering up of wrongdoing
- 15.7 Personal grievances (e.g. bullying, harassment, discrimination) aren't covered by whistleblowing law, unless the particular case is in the public interest.
- 15.8 In some cases of whistleblowing, ONR will not be the responsible authority. ONR will help the whistle blower in identifying the correct authority.

Complaints

Definition

- 15.9 Complaints originate from outside ONR and are about any aspect of ONR's work where it is perceived that ONR may not have done its job properly.
- 15.10 ONR's complaints process is about ONR or the services it provides. It is not for making complaints about the companies ONR regulates. These should be reported as a concern.

Action by Inspectors

- 15.11 Initial action in response to a concern or whistleblowing raised verbally:
- Try to gather sufficient information to establish whether the matter is a valid potential concern or whistleblowing matter
 - If in the opinion of the Inspector it is not then explain why and advise the party that they still have the option to raise the matter via contacting ONR enquires or through the reporting portal on the ONR website if they are not satisfied
 - If the matter is considered to be a valid concern or whistleblowing, record information relevant to the concern:
 - Requirements for protected disclosure if applicable
 - Name, contact details and relationship of the person to the concern (e.g. employee, member of public, contractor)
 - Details of the activity of concern - what, who, where, when and how etc
 - Has the matter already been reported and if so what action taken? e.g. to the licensee/duty holder, any other authorities and agencies etc
 - Any other relevant information (e.g. is there any physical evidence to support the concern such as photographs or documentation)?
 - Advise the party of the proposed initial action and provide details of ONR's concerns/ whistleblowing policy/ process and how they can find further information through the ONR enquires/ website.
 - If it is appropriate provide details of how the Inspector may be contacted
 - If the matter is potential whistleblowing contact ONR policy team
 - If the matter has potential for media attention, also contact ONR communications team
- 15.12 Action in response to a concern or whistleblowing raised through other channels should follow similar steps above however will depend on the nature of the communication. Inspector's should contact ONR policy team and seek further advice if necessary.
- 15.13 Initial action in response to a complaint raised verbally:

- Try to gather sufficient information to establish whether the matter can be appropriately resolved by the Inspector
 - If the matter cannot be resolved advise the party that ONR has a process for dealing with complaints via contacting ONR enquires or through the reporting portal on the ONR website if they are not satisfied.
 - Record information relevant to the complaint in the Inspectors official notebook.
 - Provide details of the person making the complaint to ONR enquiries, including their contact details and the nature of the complaint. This action should be taken irrespective of whether the complaint has been satisfactorily resolved or not.
- 15.14 Action in response to a complaint raised through other channels should follow similar steps above however will depend on the nature of the communication. Inspector's should contact ONR enquiries and seek further advice if necessary.
- 15.15 Note that the Concerns, Whistleblowing and, Complaints processes are applicable to employers, employees and members of the public. However, there is also specific legislation relating to safety representatives, which the Inspector should be cognisant of when dealing with these matters. Further information is provided below in section 17, Appendix 8.

16 APPENDIX 7 – DELETED

- 16.1 This appendix previously provided guidance on Regulatory philosophy. This has been replaced with the enabling regulation in practice, as referenced in Appendix 4 above.

17 APPENDIX 8 – INTERACTIONS WITH SAFETY REPRESENTATIVES

Safety Representatives Status

- 17.1 Health and Safety representatives' functions are given by law under the Safety Representatives and Safety Committees Regulations 1977. Health and Safety Representatives are appointed by trade unions to represent a group or groups of workers of a class for which the union has negotiating rights. However, this does not act as a limitation to representatives when raising general matters affecting the health and safety of employees as a whole. Fundamentally the role of a health and safety representatives covers three areas:
- Representation of employees to the employer in matters of health and safety.
 - Inspection of the workplace.
 - Inspection of documentation both for the purpose of health and safety.
- 17.2 They also will need to be given sufficient information and knowledge, by their employer, to enable them to play an informed part in promoting health and safety at work.
- 17.3 Safety representatives' have a legal right to:
- Represent employees in discussions with the employer on health, safety or welfare and in discussions with HSE or other enforcing authorities
 - Investigate hazards and dangerous occurrences
 - Investigate complaints; carry out inspections of the workplace and inspect relevant documents
 - Attend safety committees
 - Be paid for time spent carrying out their functions, and to undergo training.
- 17.4 Guidance given to safety representatives states the procedure to follow when there is a breach in the law relating to safety. Firstly the safety representative will raise the issue with a senior representative or union official. "However, if a serious problem remains, and after discussion with their union, a health and safety representative may consider contacting the ONR".
- 17.5 Guidance also states "In all cases where there is a serious risk to life or limb which cannot be prevented by notifying your employer, safety representatives should contact their union and the ONR immediately".

ONR Inspector Status

- 17.6 Under section 28(8) of the Health and Safety at Work Act 1974 and Schedule 8, Part 4 of the Energy Act 2013 Inspectors have a legal duty to communicate with employees (or their representatives), to keep them adequately informed about matters affecting their health, safety or welfare.
- 17.7 It is good practice to have a positive working relationship with site safety representatives; this may take the form of regular meetings or having well-established channels of communication between Inspectors and safety representatives (preferably without site management present) to enable safety representatives to openly raise matters without fear of reprisal. Benefits of this working relationship include accessing insight into site safety culture, working practices and site awareness of risk.

- 17.8 In relation to potential concerns, whistleblowing and complaints raised with the Inspector by safety representatives the same processes may apply as described in Appendix 15. However due to the functions given to safety representatives under law, the expectation is that these processes would only be invoked following the matter of concern firstly being taken through the channels available to safety representatives (as given above).

Guidance for Inspectors

- 17.9 Meetings with safety representatives (without management present) should normally be conducted in confidence and any matters divulged which are considered to be of a protected disclosure nature should be treated appropriately. The Inspectors should make clear to the safety representative what they intend to do with the disclosure they receive. This also applies where the Inspector intends to take no action.
- 17.10 The Inspector has a duty (under 28(8) of HSWA) to communicate with the safety representative and should keep them informed of the development of actions arising from the disclosure.
- 17.11 Inspectors should be wary of being drawn on matters not directly relating to safety (e.g. pay negotiations or personal grievances).
- 17.12 Further guidance on Health and Safety Representatives is given in Ref 8.16

18 APPENDIX 9 – INSPECTION RATINGS GUIDE

To use this guide, Inspectors should identify applicable indicators from the list based on their inspection findings. Then select an appropriate rating which is the best fit, overall. The majority of licensees and duty holders should be operating predominantly with a rating of Green.

Indicative Inspection Findings	Rating	ONR Response
<ul style="list-style-type: none"> • Relevant good practice generally met, or minor shortfalls identified, when compared with appropriate benchmarks. • Legal duties complied with, although there may be minor contraventions of specific administrative requirements. • No significant shortfalls identified in the delivery of safety, safeguards or security functions. • Relatively minor, if any, deficiencies in compliance arrangements. • Minor failure to implement, compliance arrangements. • Only limited opportunities exist to fully reduce risks to ALARP or enhance security measures. • There may be some examples of best practice which have been observed and recorded. 	Green	<p>No Formal Action</p> <ul style="list-style-type: none"> • Provide feedback at the closeout meeting on the rating and key points from the inspection to be recorded in the IR or other record. • If appropriate, provide advice on how to address any identified areas for improvement. • Expect the licensee/duty holder to address any identified improvements and manage resolution via their internal management controls. • Make a Level 4 Regulatory Issues Database entry for minor compliance shortfalls, if necessary, to monitor licensee/duty holder progress. • Record any examples of best practice in the IR and acknowledge these to the licensee/duty holder. • Record advice given regarding continuous improvement and best practice.
<ul style="list-style-type: none"> • Significant shortfall against an identified relevant good practice when compared with appropriate benchmarks. • Specific legal requirements not met, but without prejudice to overall nuclear safety, safeguards or security objectives. • Inconsistent standards for managing risks to workers; with some key relevant statutory provisions not met. • Specific significant weaknesses identified in delivery/implementation of safety case requirements. • Significant or systematic failure to implement or meet compliance arrangements. • Failure to maintain approved security arrangements, but with principal barriers remaining intact. • Deficient arrangements for compliance with legal requirements. • Systematic failure to comply with administrative legal requirements. 	Amber	<p>Seek Improvement</p> <ul style="list-style-type: none"> • Provide feedback at the closeout meeting on the rating and key points from the inspection to be recorded in the IR or other record. • Identify and discuss any significant shortfalls with the licensee/duty holder, at an appropriate level. • Review the shortfall(s) against the ONR Enforcement Management Model, ONR-ENF-GD-006. • Make one or more Regulatory Issues Database entries at Level 3 or above to log the enforcement communication and to track progress. • Follow-up and close out the Regulatory Issue when complete.
<ul style="list-style-type: none"> • Absence or failure of one or more principal barriers claimed in the safety case. • Major failure to maintain arrangements in the approved security plan. • Shortfalls in safety or security requirements resulting in significant avoidable risks to the public or workers, generally with at least one contravention that gives rise to a discernible risk gap under the EMM. • Major non-compliance with defined or established standards necessary to ensure safety, safeguards or security. • Failure to deliver improvements previously identified in ONR enforcement communications. • Persistent failure to meet administrative legal requirements, multiple warnings having been given 	Red	<p>Demand Improvement</p> <ul style="list-style-type: none"> • Provide feedback at the closeout meeting on the rating and key points from the inspection to be recorded in the IR or other record. • Raise the identified shortfall(s) with the relevant licensee/duty holder leadership and note the potential for enforcement action. • Draw the matter to the attention of the relevant Delivery Lead. • Review the shortfall(s) against the ONR Enforcement Management Model, ONR-ENF-GD-006. • Make one or more Regulatory Issues Database entries at Level 1 or 2 to log the enforcement communication and to track progress. • Consider if a holding to account, or similar meeting, with the licensee/duty holder is appropriate. • Plan and execute a follow-up inspection. • Close out the Regulatory Issue when complete.

19 APPENDIX 10 - INDICATIVE PROGRAMME FOR SYSTEM BASED INSPECTIONS (SBI)

Point in Time	Activities Expected
X – 8 Weeks	ONR to confirm actual date of the SBI and details of the system to be inspected.
X – 4 Weeks	ONR hold pre inspection scoping meeting with ONR specialists
X – 3 Weeks	ONR proposed technical input to the SBI plan for the intervention (D1)
X – 2 Weeks	ONR distribute the SBI plan for review and agreement
X	Date of Inspection

D1 TECHNICAL INPUT TO THE ONR SBI PLAN

This will comprise consideration of the following:

- Identification of the key technical areas that merit inspection (determination of inspection scope)
- Identification of the safety functions
- Safety case claims relating to system performance (LC 23, 27 and 28) and identification of relevant Operating Rules, Safety Mechanisms, Devices and Circuits, EIMT schedules etc.
- Safety case claims relating to availability and reliability (LC 23, 27 and 28 related) and identification of relevant Operating Rules, Safety Mechanisms, Devices and Circuits, EIMT schedules etc.
- Safety case claims on Operator Actions (LC 10 and 24 related) and identification of training requirements and Operating Instructions
- Identification of the barriers required to contain radioactive material and radioactive waste (LC34 related).
- Areas of plant to be subject to physical plant inspection.

20 APPENDIX 11 - INTERVENTION RECORDS – ADMINISTRATIVE RECORDING OF INTERVENTION OUTCOMES

General

- 20.1 IRs are used to record the outcomes of an intervention. They are generated by the Inspector leading the inspection – if a team, or by the Inspector who undertook the inspection.
- 20.2 The record is used to capture key information arising during the inspection and to record the arrangements, facilities and equipment inspected and how they were sampled.
- 20.3 The intervention outcomes in terms of compliance ratings and SBI judgements are identified on the record and captured by the Division Delivery Support (DDS) onto the annual facility Integrated Intervention System database plan to allow feedback and intelligence to be captured and reviewed as part of the planning and re-baselining processes. Guidance on the rating system can be found on HOW2 in the section on Planning and Conducting Interventions (as a link from the Guidance Button).
- 20.4 It is expected that all IRs are completed within 14 working days (in line with the guidance on HOW2). A KPI is in place to monitor performance. A target of 95% is set for all records of regulatory activities completed to timescales.
- 20.5 The record of the arrangements sampled, the ratings and the judgements are used to ensure over time that a comprehensive picture is built for the facility and licensee/duty holder. This allows the Divisions to target resources to higher priority (poorer performing) facilities and aspects or themes of facility or licensee performance.
- 20.6 The Executive Summary of most IRs is published on the ONR website as part of ONR's openness and transparency agenda. The full IR is also potentially disclosable under FOI/EIR and should be written as such. In all cases, although the IR can be read by a wide audience, the focus is on recording outcomes on the topics sampled to ensure that the facility or their supply chain performance is monitored.

System Based Inspections (SBI)

- 20.7 The DDS in each of ONR's Divisions are responsible for recording the inspection rating recorded during each inspection. The CNI Office Regulatory Performance Team (RPT) is responsible for exporting the relevant data to track the relevant KPI.
- 20.8 To ensure that system/structure inspections are correctly reported to the CNI Office, there is a need for Inspectors to ensure that inspections are correctly reported within the IRs. The requirements for recording these interventions are outlined in the following examples to indicate acceptable and unacceptable entries; however, as a minimum the licensed nuclear site, the identified site Inspector, the relevant system and the month reported in the IR (not a Contact Record) should all be consistent with the relevant Intervention Plan.

EXAMPLE 1: ACCEPTABLE SBI (Table A)

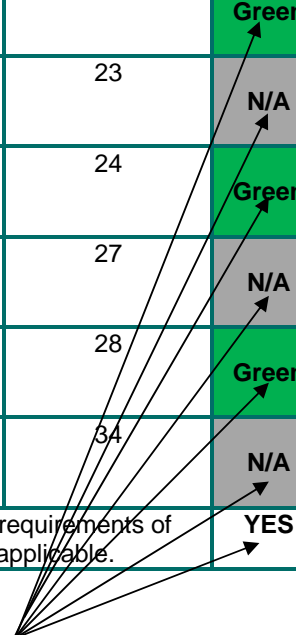
20.9 Example (1): In recording the outcome of the system inspection the following input would be acceptable.

- All entries have been made in the rating column, i.e. even though a licence condition has not been inspected the box has been identified as being not applicable (n/a)
- An overall judgement that the system/structure meets the requirements of the safety case has been made (yes or no).

How Ratings would look on the Front of the IR

(A) SYSTEM / STRUCTURES BASED INSPECTION RATINGS					
Complete this section only where a System / Structures Based Inspection takes place. If Licence Condition not applicable, enter "n/a"					
Record Section	System / Structures Based Inspection Details	Plan Name	Licence Condition (LC)	Rating	P/RUP *
Paragraph Number e.g. 2.2	Provide details of System Inspected e.g. Pressure Vessel Cooling Water System	Insert Site Plan Name e.g. Wylfa	10	Green	P
Paragraph Number e.g. 2.2	Provide details of System Inspected e.g. Pressure Vessel Cooling Water System	Wylfa	23	N/A	P
Paragraph Number e.g. 2.2	Provide details of System Inspected e.g. Pressure Vessel Cooling Water System	Wylfa	24	Green	P
Paragraph Number e.g. 2.2	Provide details of System Inspected e.g. Pressure Vessel Cooling Water System	Wylfa	27	N/A	P
Paragraph Number e.g. 2.2	Provide details of System Inspected e.g. Pressure Vessel Cooling Water System	Wylfa	28	Green	P
Paragraph Number e.g. 2.2	Provide details of System Inspected e.g. Pressure Vessel Cooling Water System	Wylfa	34	N/A	P
Overall judgement that the System / Structure adequately fulfils the requirements of the safety case. Please delete "Yes" or "No" in the box provided as applicable.				YES	NO

Correct



EXAMPLE 2: UNACCEPTABLE SBI (Table A)

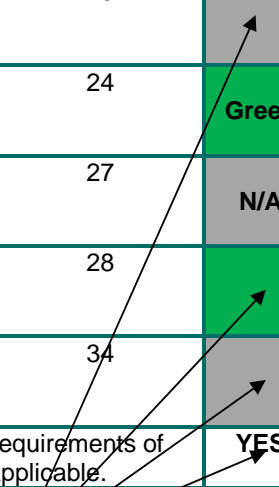
20.10 Example (2): In recording the outcome of the system inspection the following input would be unacceptable.

- All entries have not been made in the rating column,
- An overall judgement that the system/structure meets the requirements of the safety case has not been made (yes or no). It is essential that the Inspector completes this overall judgement box since failure to complete this will result in the safety inspection being recorded as not being done.

How Ratings would look on the Front of the IR

(A) SYSTEM / STRUCTURES BASED INSPECTION RATINGS					
Complete this section only where a System / Structures Based Inspection takes place. If Licence Condition not applicable, enter "n/a"					
Record Section	System / Structures Based Inspection Details	Plan Name	Licence Condition (LC)	Rating	P/RUP *
Paragraph Number e.g. 2.2	Provide details of System Inspected e.g.: Pressure Vessel Cooling Water System	Insert Site Plan Name e.g. Wylfa	10	Green	P
Paragraph Number e.g. 2.2	Provide details of System Inspected e.g.: Pressure Vessel Cooling Water System	Wylfa	23		P
Paragraph Number e.g. 2.2	Provide details of System Inspected e.g.: Pressure Vessel Cooling Water System	Wylfa	24	Green	P
Paragraph Number e.g. 2.2	Provide details of System Inspected e.g.: Pressure Vessel Cooling Water System	Wylfa	27	N/A	P
Paragraph Number e.g. 2.2	Provide details of System Inspected e.g.: Pressure Vessel Cooling Water System	Wylfa	28		P
Paragraph Number e.g. 2.2	Provide details of System Inspected e.g.: Pressure Vessel Cooling Water System	Wylfa	34		P
Overall judgement that the System / Structure adequately fulfils the requirements of the safety case. Please delete "Yes" or "No" in the box provided as applicable.				YES	NO

Wrong



EXAMPLE 3: ACCEPTABLE ENTRIES (Table A)

20.11 Example (3): In recording the outcome of the system inspection the following inputs would be acceptable:

SYSTEM/STRUCTURE INSPECTIONS		RATING	RATING	RATING
10	TRAINING	GREEN	AMBER	GREEN
23	OPERATING RULES	GREEN	GREEN	N/A
24	OPERATING INSTRUCTIONS	GREEN	N/A	N/A
27	SAFETY MECHANISMS, DEVICES AND CIRCUITS	GREEN	GREEN	RED
28	EXAM, INSP, MAINT & TESTING	GREEN	GREEN	GREEN
34	LEAKAGE & ESCAPE OF RADIOACTIVE MATERIAL AND RADWASTE SAFETY CASE JUDGEMENT (YES/NO)	GREEN YES	N/A NO	N/A NO
		↑	↑	↑
		RIGHT	RIGHT	RIGHT

EXAMPLE 4: UNACCEPTABLE ENTRIES (Table A)

20.12 Example (4): In recording the outcome of the system inspection the following inputs would be unacceptable:

SYSTEM/STRUCTURE INSPECTIONS		RATING	RATING	RATING
10	TRAINING	GREEN	AMBER	GREEN
23	OPERATING RULES	GREEN	GREEN	N/A
24	OPERATING INSTRUCTIONS	GREEN		N/A
27	SAFETY MECHANISMS, DEVICES AND CIRCUITS	GREEN		
28	EXAM, INSP, MAINT & TESTING	GREEN		
34	LEAKAGE & ESCAPE OF RADIOACTIVE MATERIAL AND RADWASTE SAFETY CASE JUDGEMENT (YES/NO)	GREEN YES	N/A NO	
		↑	↑	↑
		WRONG	WRONG	WRONG

Security Inspections

20.13 To ensure that security inspections are correctly recorded there is a need for Inspectors to ensure that IR ratings are submitted to DDS. DDS are responsible for maintaining the IIS database and reporting to the ONR RPT to allow the necessary checks on data and KPIs to be carried out.

Recording Interventions and Other Site Interactions

20.14 Routine compliance inspections should be recorded in the standard IR template as follows:

- Record Section – Self Explanatory
 - Brief description of the relevant law e.g. NIA, NISR, SAFEGUARDS

- Intervention Details – Brief description of intervention e.g. Licence Compliance Inspection (including arrangements and/or implementation of arrangements)
- Brief description of relevant ONR guidance e.g. TIG, TAG, Guidance notes.
- Plan Name – Plan name as per the agreed site/facility lists
- Licence / Series / IIS Code – Self-explanatory for LCs, IIS codes are to be recorded for non LC inspections, on the plan these would be 100 series.
- CNS will use the 300 series for their inspections.
- RMT will use the 400 series inspections.
- CHS will use the 500 series of inspections.
- Safeguards will use the 600 series of inspections.
- Ratings - The text supporting the rating should provide sufficient evidence to justify the rating.
- P or RUP – See detailed definitions on planned and reactive unplanned inspections contained within this guidance (section 12).

20.15 Example 5 below shows a completed intervention ratings table illustrating some of the likely combinations which could be recorded.

EXAMPLE 5: INTERVENTION RATINGS (TABLE B)

INTERVENTION RATINGS					
Complete this section only where applicable, e.g. for a LC compliance inspection or assessment where the duty holder's arrangements are being rated. If not applicable, enter "n/a".					
Record Section	Intervention Details	Plan Name	Licence Condition / Series / IIS Code	Rating	P or RUP
2.1	Planned inspection	Heysham 1	LC7	Green	P
2.2	Planned inspection	Heysham 1	LC14	Green	P
2.3	Annual Review of Safety	Heysham 1	107	n/a	P

THEMED INSPECTIONS

20.16 As for SBIs and standard LC compliance inspections, DDS in each of ONR's Divisions are responsible for recording the inspection rating recorded during each inspection.

EXAMPLE 6: ACCEPTABLE THEMED INSPECTION (TABLE B)

20.17 Example (6): In recording the outcome of the themed compliance inspection the following input would be acceptable.

- All entries have been made in the rating column, i.e. even though a licence condition has not been inspected the box has been identified as being not applicable (n/a)
- The relevant LCs rated appropriately grouped

INTERVENTION RATINGS

Complete this section only where applicable, e.g. for a LC compliance inspection or assessment where the duty holder's arrangements are being rated. If not applicable, enter "n/a".

Record Section	Intervention Details	Plan Name	Licence Condition / Series / IIS Code	Rating	P or RUP
2.1	Planned LC compliance inspection	Heysham 1	LC7	Green	P
2.2	Planned Theme 1 inspection	Heysham 1	LC23	Green	P
			LC24	Green	
			LC25	Green	
			LC26	Green	
			LC27	Green	
2.3	Annual Review of Safety	Heysham 1	107	n/a	P

RATINGS AMBER OR RED

20.18 If an inspection results in a rating of Amber or Red it is expected that the Inspector will record one or more Regulatory Issues at Level 3 or above to address the shortfall within the IR and on the Issues database. The remedial work required from the licensee would be expected to be proportional to the shortfall observed and consistent with the Division's regulatory strategy and EMM. Guidance on the potential ONR response is detailed in the ONR Inspection Rating Guide for consideration by the Inspector. The expectation is that for an Amber rating, ONR will seek improvement and for a Red, ONR will demand improvement.

RATINGS GREEN

20.19 If an inspection results in a rating of Green, the Inspector may still identify topics for further improvement and offer guidance to the duty holder. If the Inspector and the duty holder agree that the actions should be followed up by the duty holder then this should be done utilising their own corrective action tracking system/ processes. For matters that the Inspector judges should be tracked by ONR (e.g. a minor potential shortfall in compliance), then a Level 4 issue should be raised in the Issues Database.

USE OF IRS COVERING MULTIPLE VISITS

20.20 Generally a single IR should cover no more than a single visit to site (which may be spread out over several days). Any exemptions will need to be agreed by the relevant Delivery Lead.