# NATIONAL HEAVY VEHICLE ACCREDITATION SCHEME (NHVAS)

# Fatigue Management Audit Matrix

## Name of NHVAS Operator:

## Name of Auditor: Where was the audit conducted:

## Audit Date: Accreditation Number:

## Audit Matrix ID Name/ No. :

## NHVAS Manual Version Number and Date of Issue:

# Introduction

## Using the Matrix

The Audit Matrix is designed to provide auditors with a clearer understanding of the systems expected of heavy vehicle operators to meet each of the Standards in the Fatigue Management module. It outlines the scope of each criterion in the Standards and explains the intent behind each. It also provides examples of the type of evidence that auditors may examine to indicate that the operator has the required system in place.

|  |  |
| --- | --- |
| Explanation of Terms in Audit Matrix | |
| **Scope** | A description of the intent behind the criterion, to provide further direction to assist with interpretation of the criterion |
| **Possible Evidence** | Examples of possible sources of evidence that may indicate conformance with the criterion |
| **Notes** | Further assistance to guide auditors in the interpretation of the criterion and the evidence to be sought |

This list of evidence is not exhaustive. Operators do not need to have everything on the list in place and may have other means by which the Criterion can be addressed.

The Matrix also provides space for the Auditor to explain:

* How the operator does (or does not) meet each criterion,
* The evidence sighted by the auditor to support that conclusion, and
* The audit Result of the audit for that criterion, using the following compliance codes:

*NAP:* Not Applicable

*NA:* Not Assessed at this Audit

*V:* Conformance Verified

*NC:* Non-conformance

*SFI:* Suggestion for Improvement

When conducting an audit on an organisation of substantial size the auditor should consider using an audit team.

# Standard 1: Scheduling and Rostering

| Criteria 1.1 | Schedules and rosters are documented | |
| --- | --- | --- |
| **Scope** | Verify that schedules and rosters are documented, are planned and comply with the approved operating limits. | **How Does Operator’s System Meet /Not Meet the Criterion – Auditor to complete.** |
| **Possible Evidence** |  | **Evidence Sighted By Auditor:** |
| **Notes** | Owner/Operator – smaller operators may not have scheduling and rostering documents as drivers are aware of their times. | **Audit Result (Code):** |

| Criteria 1.2 | Schedules and rosters are monitored and regularly reviewed | |
| --- | --- | --- |
| **Scope** | Review the documented policies and procedures for monitoring and reviewing of schedules and rosters. | **How Does Operator’s System Meet /Not Meet the Criterion – Auditor to complete.** |
| **Possible Evidence** | * approved documents checking date and version * fuel dockets * satellite data * diary/schedule comparison * phone records | **Evidence Sighted By Auditor:** |
| **Notes** |  | **Audit Result (Code):** |

| Criteria 1.3 | Action is taken to minimise fatigue risks when altering schedules and rosters | |
| --- | --- | --- |
| **Scope** | Review policies and procedures and determine if operator has an altering trip schedule procedure. | **How Does Operator’s System Meet /Not Meet the Criterion – Auditor to complete.** |
| **Possible Evidence** | * Policy and procedure manual | **Evidence Sighted By Auditor:** |
| **Notes** | A single documented policy and procedure for criteria 1.3 & 1.4 is acceptable. | **Audit Result (Code):** |

| Criteria 1.4 | Drivers are given the flexibility to alter trip schedules within legislative limits | |
| --- | --- | --- |
| **Scope** | Review policies and procedures and determine if operator has provided for drivers to alter trip schedules procedure.  What is a driver required to do when altering a trip schedule? | **How Does Operator’s System Meet /Not Meet the Criterion – Auditor to complete.** |
| **Possible Evidence** | * Policy and procedure manual | **Evidence Sighted By Auditor:** |
| **Notes** | A single documented policy and procedure for criteria 1.3 & 1.4 is acceptable. | **Audit Result (Code):** |

| Criteria 1.5 | Guidelines are in place for the use of relief/casual drivers where required | |
| --- | --- | --- |
| **Scope** | Review policies and procedures for a contingency plan e.g. what happens when a driver reports unfit for duty? | **How Does Operator’s System Meet /Not Meet the Criterion – Auditor to complete.** |
| **Possible Evidence** | * Policy and procedure manual | **Evidence Sighted By Auditor:** |
| **Notes** |  | **Audit Result (Code):** |

| Criteria 1.6 | The increased fatigue risk for a driver returning from leave is considered in scheduling and rostering of the driver | |
| --- | --- | --- |
| **Scope** | Review scheduling policies and procedures to ensure that leave is taken into account when scheduling/rostering. | **How Does Operator’s System Meet /Not Meet the Criterion – Auditor to complete.** |
| **Possible Evidence** |  | **Evidence Sighted By Auditor:** |
| **Notes** | This may not be applicable to an Owner/Operator. | **Audit Result (Code):** |

| Criteria 1.7 | Drivers are to have input into schedules where practicable to ensure trip plans are reasonable | |
| --- | --- | --- |
| **Scope** | Review policies and procedures and determine if operator has provided for drivers to have input into schedules. | **How Does Operator’s System Meet /Not Meet the Criterion – Auditor to complete.** |
| **Possible Evidence** | Ascertain whether drivers have input into schedules, this may be achieved by;   * toolbox meetings * discussions with drivers | **Evidence Sighted By Auditor:** |
| **Notes** |  | **Audit Result (Code):** |

| Criteria 1.8 | On an occasion when a driver is permitted to exceed normal approved operating limits (AFM only), they are managed with the appropriate counter measures. | |
| --- | --- | --- |
| **Scope** | Confirm that the decision-making processes for exceeding limits are followed and appropriate counter measures are used. | **How Does Operator’s System Meet /Not Meet the Criterion – Auditor to complete.** |
| **Possible Evidence** |  | **Evidence Sighted By Auditor:** |
| **Notes** | This criterion is only relevant for AFM | **Audit Result (Code):** |

| Criteria 1.9 | Schedulers provide sufficient advance pre-trip notification to ensure drivers can comply with legislation | |
| --- | --- | --- |
| **Scope** | Are rosters/schedules being prepared in advance to allow drivers to comply with legislation? | **How Does Operator’s System Meet /Not Meet the Criterion – Auditor to complete.** |
| **Possible Evidence** |  | **Evidence Sighted By Auditor:** |
| **Notes** |  | **Audit Result (Code):** |

| Criteria 1.10 | Schedules and rosters are planned to be reasonable and achievable under Legislative operating limits | |
| --- | --- | --- |
| **Scope** | Verify that schedules and rosters are not planned or extend beyond legislative operating limits. | **How Does Operator’s System Meet /Not Meet the Criterion – Auditor to complete.** |
| **Possible Evidence** |  | **Evidence Sighted By Auditor:** |
| **Notes** |  | **Audit Result (Code):** |

# Standard 2: Health and wellbeing for performed duty

| Criterion 2.1 | Drivers are certified as being fit to drive a heavy vehicle by a medical practitioner | |
| --- | --- | --- |
| **Scope** | Drivers are certified as being fit to drive a heavy vehicle by a medical practitioner according to the *Assessing Fitness to Drive* by Austroads or equivalent document approved by the NHVR. The examination must include an assessment to detect drivers in the high-risk group for sleep disorders. Examinations are to be conducted, as a minimum, once every three years for drivers aged 49 or under, and yearly for drivers aged 50 or over  Review policies and procedures for driver health requirements, including requirements for operator to ‘flag’ when medical examinations are due or overdue.  Review list of all nominated drivers and conduct random check of medical assessment certificates - Assessing Fitness to Drive by Austroads or equivalent document approved by the NHVR. | **How Does Operator’s System Meet /Not Meet the Criterion – Auditor to complete.** |
| **Possible Evidence** | * Policy and procedure manual * Driver medical certificates * System alert for expiring driver medicals | **Evidence Sighted By Auditor:** |
| **Notes** | There are various medical certificate forms that are acceptable, Jurisdictional medical certificates, Aust Roads, Aust Roads re badged as Trucksafe. The importance is that the criteria set to be covered for examination as published in the Assessing Fitness to Drive Publication by Austroads is included in the medical examination. If in doubt contact the NHVR for verification. | **Audit Result (Code):** |

| Criterion 2.2 | Procedures exist for driver fitness for duty, which address issues of driver health, use of drugs/alcohol, medical condition, well-being and state of fatigue | |
| --- | --- | --- |
| **Scope** | Review policies and procedures for driver readiness for duty, this should include:   * drugs and alcohol * random drug screening * newsletters (internal) * website (Intranet) * readiness to work (self-assessment) * prepared to work | **How Does Operator’s System Meet /Not Meet the Criterion – Auditor to complete.** |
| Possible Evidence | Policy and procedure manual | Evidence Sighted By Auditor: |
| **Notes** | For Owner Operators reference to accessing the internet for information is acceptable.  Procedures or policies that refer to the operator reserving the right to conduct drug and alcohol testing are not acceptable. | **Audit Result (Code):** |

| Criterion 2.3 | Procedures for drivers to assess their fitness for duty prior to commencing and during work | |
| --- | --- | --- |
| **Scope** | Verify that policies and procedures for fitness of duty policy include assessment procedures that drivers can use to ascertain their fitness for duty prior to commencing and during work. | **How Does Operator’s System Meet /Not Meet the Criterion – Auditor to complete.** |
| **Possible Evidence** | * Policy and procedure manual | **Evidence Sighted By Auditor:** |
| **Notes** |  | **Audit Result (Code):** |

| Criterion 2.4 | Procedures for drivers to notify the operator if they are unfit for duty. | |
| --- | --- | --- |
| **Scope** | Sight procedures for the drivers to notify the operator if they are unfit for duty due to any lifestyle, health or medical issue both before and during work.  What system does the operator use when drivers are unfit for duty?  Verify that there is a procedure for drivers to notify their operators on their fitness to drive.  Does the operator encourage and use an open-door policy?  Does the operator encourage communication with drivers? | **How Does Operator’s System Meet /Not Meet the Criterion – Auditor to complete.** |
| **Possible Evidence** |  | **Evidence Sighted By Auditor:** |
| **Notes** |  | **Audit Result (Code):** |

| Criterion 2.5 | Medical advice to drivers is taken into account when assigning duties. | |
| --- | --- | --- |
| **Scope** | Review any medical recommendations and verify that this information is taken into account when assigning duties, these may include:   * rehabilitation policy procedures * doctor’s medical recommendations. | **How Does Operator’s System Meet /Not Meet the Criterion – Auditor to complete.** |
| **Possible Evidence** |  | **Evidence Sighted By Auditor:** |
| **Notes** |  | **Audit Result (Code):** |

| Criterion 2.6 | Drivers are provided information to promote and encourage optimal management of their health. | |
| --- | --- | --- |
| **Scope** | Verify that the operator provides information to drivers, promotes and encourages good health, this may include:   * toolbox meetings * brochures * articles * bulletins * financial assistance program * counselling covered under insurance policy | **How Does Operator’s System Meet /Not Meet the Criterion – Auditor to complete.** |
| **Possible Evidence** | * Toolbox meeting records * Company bulletins * Driver interviews | **Evidence Sighted By Auditor:** |
| **Notes** |  | **Audit Result (Code):** |

| Criterion 2.7 | Operators with two-up driving operations have team selection and driver comfort procedures in place. | |
| --- | --- | --- |
| **Scope** | Operators with two-up driving operations are to have procedures in place for undertaking two-up driver recruitment and team selection, and for optimising the alternative driver’s comfort while resting in a moving vehicle.  Determine if the operator uses two-up driving operations (check schedules/rosters).  Establish if the operator has procedures in place for two-up driver recruitment and team selection.  Establish if the alternative driver’s comfort is optimised whilst resting in a moving vehicle? | **How Does Operator’s System Meet /Not Meet the Criterion – Auditor to complete.** |
| **Possible Evidence** |  | **Evidence Sighted By Auditor:** |
| **Notes** | Vehicles used for two up driving must be fitted with an ADR compliant sleeper berth. | **Audit Result (Code):** |

# Standard 3: Training and education

| Criterion 3.1 | Persons who hold a position of responsibility under the Fatigue Management System are trained and familiar with policy procedures | |
| --- | --- | --- |
| **Scope** | Sight a documented instruction that details how persons assigned a role of responsibility within the Fatigue Management System are trained in the specific policies, procedures and responsibilities they are to carry out.  Ensure that the FM operator has communicated to all staff how fatigue risk is relevant to the operation and that the relevance and importance of the operator’s fatigue management system. | **How Does Operator’s System Meet /Not Meet the Criterion – Auditor to complete.** |
| **Possible Evidence** | * Policy and procedure manual * Training Records | **Evidence Sighted By Auditor:** |
| **Notes** |  | **Audit Result (Code):** |

| Criterion 3.2  (a) – (d) | All persons with a designated responsibility under the accreditation have been inducted and hold the required training competencies to demonstrate the ability to manage driver fatigue. | |
| --- | --- | --- |
| **Scope** | Assess competence of these personnel by identifying any evidence that they at a minimum know the causes, effects and symptoms of fatigue and strategies to better manage fatigue.  Drivers and schedulers must be inducted and regularly updated in the operator’s fatigue management policies and procedures. | **How Does Operator’s System Meet /Not Meet the Criterion – Auditor to complete.** |
| **Possible Evidence** | * Driver and scheduler register * Training certificates * Induction letters (Induction letters must be compliant with section 468 of the HVNL) | **Evidence Sighted By Auditor:** |
| **Notes** | All previously recognised TLIF courses completed before 1 July 2018 remain acceptable  After 1 July 2018 drivers who have not previously completed a recognised course must hold TLIF0005.  After 1 July 2018 schedulers who have not previously completed a recognised course must hold TLIF0006.  TLIF0005 & TLIF0006 Certificates issued after 1 July 2018 must be issued by an NHVR approved RTO | **Audit Result (Code):** |

| Criterion 3.3 | Documented procedures exist for maintaining the currency of knowledge in fatigue management for all people who hold a position of responsibility | |
| --- | --- | --- |
| **Scope** | Sight a procedure for maintaining the currency of knowledge in fatigue management for all people who hold a position of responsibility, including identify if, and when, any re-assessment of competence is to be conducted, and ensured that this has occurred.  Ensure that any knowledge needs are identified, and that appropriate action is undertaken to address those needs.  Does the accredited operator have a training needs analysis available that identifies and addresses gaps for personnel who hold a position of responsibility under the FM option?  Has the operator taken any action identified by the training needs analysis? | **How Does Operator’s System Meet /Not Meet the Criterion – Auditor to complete.** |
| **Possible Evidence** | * Policy and procedure manual | **Evidence Sighted By Auditor:** |
| **Notes** |  | **Audit Result (Code):** |

| Criterion 3.4 | Relevant training records for those in a role of responsibility within the Fatigue Management System are maintained. | |
| --- | --- | --- |
| **Scope** | Sight training records for drivers, schedulers or those who supervise or manage drivers and scheduling staff have been maintained, including:   * details of what, if any, training was undertaken, who delivered the training and when this training occurred; * if, and when any re-training is required; and * record of the qualifications of workers, including any units of competence achieved. | **How Does Operator’s System Meet /Not Meet the Criterion – Auditor to complete.** |
| **Possible Evidence** | * Training register * Induction records * Personal training records * Training needs analysis | **Evidence Sighted By Auditor:** |
| **Notes** |  | **Audit Result (Code):** |

# Standard 4: Responsibilities and management practices

| Criterion  4.1 & 4.2 | The appropriateness of each person’s position, qualifications or training for the responsibilities allocated to him or her. | |
| --- | --- | --- |
| **Scope** | Responsibility for the operation of the Fatigue Management System rests with appropriate people within the road transport operation, as nominated by the operator. The authorities, responsibilities and duties of all positions involved in the management, operation, administration, participation and verification of the Fatigue Management System are current, clearly defined and documented and carried out accordingly. | **How Does Operator’s System Meet /Not Meet the Criterion – Auditor to complete.** |
| **Possible Evidence** | * Position descriptions * Duty statements * Role descriptions * Organisational chart showing company structure   The aim is to establish how management ensures that the Fatigue Management system procedures as documented are being complied with in practice. For a small operation, management will have a hands-on role, which enables them to be satisfied that procedures are being followed. In larger organisations, particularly those which span multiple locations, management will require specific mechanisms to ensure that the authorised procedures are being followed correctly and consistently at all locations. | **Evidence Sighted By Auditor:** |
| **Notes** | This section may not be highly detailed for a small operator where all roles are performed by the accreditation holder and a formal management structure specifically for Fatigue Management is not appropriate. However, for a larger organisation, particularly one spanning locations, a formal structure may be appropriate to define roles and responsibilities in respect of mass management of persons at both head office and at individual locations. The auditor should consider the level of detail to which documented procedures should be prepared in order to clearly convey how tasks should be performed in order to avoid misinterpretation or misunderstanding.  The level of detail provided for each task should be appropriate for the complexity of the task being described. As well as reflecting the complexity of the task, the detail necessary should also consider the training and experience of the person performing the task. | **Audit Result (Code):** |

| Criterion 4.3 | There is a documented method to identify and correct all non-conformances including personnel performance management practices counselling and disciplinary action are in place. | |
| --- | --- | --- |
| **Scope** | A documented procedure must be sighted for how non-conformances are to be detected and corrected.  Review policies and procedures in reference to personnel performance management.  The procedure must include the controls for ensuring the incidents are not repeated.  The position responsible for the management of non-conformances is to be identified.  The procedure must be current and have the responsibilities clearly defined. | **How Does Operator’s System Meet /Not Meet the Criterion – Auditor to complete.** |
| **Possible Evidence** | * Review corrective action reports * medical reporting * non-compliance reporting * corrective and preventative actions * counselling * documented Termination Policy. | **Evidence Sighted By Auditor:** |
| **Notes** | For an Owner/Operator – Practices to minimise risks, scheduling and rostering practices. | **Audit Result (Code):** |

| Criterion 4.5 | Is a communication process in place to facilitate the exchange of information between drivers and management where practical and appropriate. | |
| --- | --- | --- |
| **Scope** | Is there a communication process established and implemented within the organisation?  This may include:   * mobile phones * onboard computer data and record * documents * letters * open door communication * communication policy * deviation path procedure * toolbox meetings | **How Does Operator’s System Meet /Not Meet the Criterion – Auditor to complete.** |
| **Possible Evidence** |  | **Evidence Sighted By Auditor:** |
| **Notes** | The size and complexity of the operator’s systems will affect the level of detail expected in satisfying the this criteria. | **Audit Result (Code):** |

| Business Rule | There is a documented procedure for Notifiable Occurrences to be reported. | |
| --- | --- | --- |
| **Scope** | A documented procedure for providing notification of a notifiable occurrence is included in the management system. The procedure is to identify who is responsible and instruction that the NHVR Portal is used to submit the report along with the required timeframes for submitting a report. | **How Does Operator’s System Meet /Not Meet the Criterion – Auditor to complete.** |
| **Possible Evidence** |  | **Evidence Sighted By Auditor:** |
| **Notes** |  | **Audit Result (Code):** |

# Standard 5: Internal Review

| Criterion  5.1 & 5.2 | Procedures exist that define how the annual internal review is to be undertaken. | |
| --- | --- | --- |
| **Scope** | The operator must have a documented procedure for how an annual internal review is to be undertaken.  The procedure must clearly define:   * the scope of activities to be undertaken as part of the internal review * the responsibilities of staff as part of those reviews * the documentation to be generated as part of that review (e.g. a report, list of non-conformances, recommendations for improvements, etc). * a schedule for when the review is to take place   Wherever practicable, the review should be undertaken by persons independent of the activity being reviewed. | **How Does Operator’s System Meet /Not Meet the Criterion – Auditor to complete.** |
| **Possible Evidence** |  | **Evidence Sighted By Auditor:** |
| **Notes** | While the responsibilities of parties conducting reviews MUST be documented, it may be difficult for very small operators to ensure “independent” internal reviews. For all other operators, independent reviews should be mandatory. | **Audit Result (Code):** |

| Criterion 5.3 | There is a documented method to identify and correct all non-conformances | |
| --- | --- | --- |
| **Scope** | A documented procedure must be sighted for how non-conformances are to be detected and corrected.  The procedure must include the controls for ensuring the incidents are not repeated.  The position responsible for the management of non-conformances is to be identified.  The procedure must be current and have the responsibilities clearly defined. | **How Does Operator’s System Meet /Not Meet the Criterion – Auditor to complete.** |
| **Possible Evidence** |  | **Evidence Sighted By Auditor:** |
| **Notes** |  | **Audit Result (Code):** |

| Criterion 5.4 | A quarterly compliance statement is produced and accepted by the responsible party. | |
| --- | --- | --- |
| **Scope** | A documented procedure for the completion of Quarterly compliance statements must be sighted. Quarterly compliance statements must be signed as being accepted by the responsible person in the organisation.  Up to date statements must be sighted and retained for a minimum of three years.  The statement must record the total number of;   * drivers operating under the accreditation * new drivers inducted for the quarter * work and rest hour records reviewed * complaint and non-compliant work and rest hour records * driver medicals that are current * driver medicals that have expired * fatigue related incidents * notices received for breaching fatigue regulations | **How Does Operator’s System Meet /Not Meet the Criterion – Auditor to complete.** |
| **Possible Evidence** |  | **Evidence Sighted By Auditor:** |
| **Notes** |  | **Audit Result (Code):** |

| Criterion 5.5 | Documented procedures exist to investigate incidents to determine whether fatigue was a contributing factor. | |
| --- | --- | --- |
| **Scope** | Review documentation and records to verify that a procedure is in place. | **How Does Operator’s System Meet /Not Meet the Criterion – Auditor to complete.** |
| **Possible Evidence** | * incident forms * investigations * police reports * insurance forms * customer complaints * database. | **Evidence Sighted By Auditor:** |
| **Notes** |  | **Audit Result (Code):** |

| Criterion 5.6 | Records of drivers’ work and rest times are regularly reviewed to ensure they are still relevant and comply with legislative and approved operator limits. | |
| --- | --- | --- |
| **Scope** | Review policies and procedures for maintaining and reviewing records.  Verify records, including work diaries, schedules and rosters. | **How Does Operator’s System Meet /Not Meet the Criterion – Auditor to complete.** |
| **Possible Evidence** | * Work diary pages * Schedules and rosters * GPS tracking data * In vehicle monitoring systems | **Evidence Sighted By Auditor:** |
| **Notes** |  | **Audit Result (Code):** |

| Criterion 5.7 | Changes to documents and procedures are recorded and the original documents and procedures are kept for a minimum of three (3) years | |
| --- | --- | --- |
| **Scope** | The auditor should check the amendment register to identify any changes that have been made to the system and that documents relevant to before changes were made have been kept for a minimum of three years. | **How Does Operator’s System Meet /Not Meet the Criterion – Auditor to complete.** |
| **Possible Evidence** | * Amendment Register * Document version control procedures * Version control detail included with documents. | **Evidence Sighted By Auditor:** |
| **Notes** | Documentation and records must be kept for a minimum of three years, including superseded procedures. | **Audit Result (Code):** |

# Standard 6: Records and Documentation

| Criterion 6.1 | Documentation is current and available to all relevant personnel at all relevant locations. | |
| --- | --- | --- |
| **Scope** | Current documentation must be available for all relevant staff and at all locations where drivers are scheduled or rostered to work would need to be inspected or repaired.  Documents must be identifiable as current by version numbering. The policy & procedure manual should identify the latest form or procedure and if changes have been made the details have been recorded in the amendment schedule.  Where the operator has more than one site, the Auditor must ensure that staff at all sites have access to all current procedures and documentation. | **How Does Operator’s System Meet /Not Meet the Criterion – Auditor to complete.** |
| **Possible Evidence** |  | **Evidence Sighted By Auditor:** |
| **Notes** | Versions of procedures and documents through all depots must be the same. Version control critical for this criterion. | **Audit Result (Code):** |

| Criterion 6.2 | All records are legible, stored, maintained and available for management and audit purposes. | |
| --- | --- | --- |
| **Scope** | Verify that records are legible, stored and maintained in accordance with the requirements.  Review policies and procedures to ensure that retention periods and retrieval arrangements are specified (electronic or hard copy). | **How Does Operator’s System Meet /Not Meet the Criterion – Auditor to complete.** |
| **Possible Evidence** |  | **Evidence Sighted By Auditor:** |
| **Notes** | Documentation and records must be kept for a minimum of three years, including superseded procedures. | **Audit Result (Code):** |

| Criterion 6.3 | A register of all persons with a designated responsibility under the accreditation is kept and regularly updated. | |
| --- | --- | --- |
| **Scope** | The name of persons that have a delegated responsibility under the fatigue management system appears in a register that is kept up to date. | **How Does Operator’s System Meet /Not Meet the Criterion – Auditor to complete.** |
| **Possible Evidence** |  | **Evidence Sighted By Auditor:** |
| **Notes** | The register of people with a designated responsibility may be kept in any format. | **Audit Result (Code):** |

| Criterion 6.4 | Documents are approved, issued, reviewed, modified and accounted for in accordance with the operator's prescribed control procedures. | |
| --- | --- | --- |
| **Scope** | Verify statement of responsibility or role responsibility, which should identify the responsible person or role for maintaining, reviewing and updating the relevant documentation. | **How Does Operator’s System Meet /Not Meet the Criterion – Auditor to complete.** |
| **Possible Evidence** | * Job description * Role responsibilities * Duty statements | **Evidence Sighted By Auditor:** |
| **Notes** |  | **Audit Result (Code):** |

| Criterion 6.5 | Records must include individual driving hours’ records for all nominated drivers. | |
| --- | --- | --- |
| **Scope** | Verify that the operator keeps appropriate records, these may include:   * Work diary pages * Generic sets of rosters * Induction/training documents * Workplace Health and Safety training * Register of documents * Driver medical assessments | **How Does Operator’s System Meet /Not Meet the Criterion – Auditor to complete.** |
| **Possible Evidence** |  | **Evidence Sighted By Auditor:** |
| **Notes** |  | **Audit Result (Code):** |

| Criterion 6.6 | Driver work and rest records for each driver are reviewed each quarter. | |
| --- | --- | --- |
| **Scope** | View driver work and rest records in accordance with the required sample sizes given in the Audit Framework document. | **How Does Operator’s System Meet /Not Meet the Criterion – Auditor to complete.** |
| **Possible Evidence** |  | **Evidence Sighted By Auditor:** |
| **Notes** | A comparison between records checked by the operator and records checked by the auditor will assist with an opinion of how effective the operator is meeting this criterion. | **Audit Result (Code):** |

# Standard 7: Workplace conditions

| Criterion 7.1 | Policies and procedures exist that ensure the working conditions assist in the prevention of fatigue. | |
| --- | --- | --- |
| **Scope** | Review policies and procedures for specific provisions relating to driver rest and driver comfort, these may include:   * seating * sleeping facilities * depot facilities * air conditioning * tinted windows * good quality mattresses * refrigerator/ice packs. | **How Does Operator’s System Meet /Not Meet the Criterion – Auditor to complete.** |
| **Possible Evidence** |  | **Evidence Sighted By Auditor:** |
| **Notes** |  | **Audit Result (Code):** |

| Criterion 7.2 | Vehicles used for stationary rest must conform to the requirements of ADR 42 and be optimised for driver rest. | |
| --- | --- | --- |
| **Scope** | If drivers are required as part of their duties to sleep in a vehicle when away from their home location (including two-up drivers), then the vehicle they are sleeping in must conform to the requirements of ADR 42 and be optimised for driver rest. | **How Does Operator’s System Meet /Not Meet the Criterion – Auditor to complete.** |
| **Possible Evidence** |  | **Evidence Sighted By Auditor:** |
| **Notes** | ADR42 is the minimum design specification for Sleeper Berths | **Audit Result (Code):** |