

QHP502

QHSE COMMUNICATION POLICY AND PROCEDURE

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1. POLICY INTRODUCTION

The purpose of this policy is to establish the methods for communication that enables National Ambulance to inform internal and external interested parties of matters related to the QHSE. This includes information about:

- QHSE Policy, objectives, and targets
- QHSE Management System, roles and responsibilities
- General QHSE issues
- QHSE system performance
- Modification or change in systems
- Legal updates
- Recognized trends and recurrent events

National Ambulance recognizes that communication is a two-way process, and encourages the communication through the provision of various communication methods. Included in this policy are the mechanisms by which employees communicate with the company itself.

This policy works closely in conjunction with the QHP201 Risk Management Policy and Procedure and QHP401 Feedback and Enquiry Policy and Procedure.

This policy was developed in accordance with the principle set forth in the OSHAD SF - Element 04 – Communication and Consultation and the OSHAD – SF: Management System Elements, V3.1 .

This policy is relevant to the Leadership and Commitment, Risk Evaluation and Management, and Continuous Improvement Management System Components.

2. SCOPE

This policy applies to all personnel working on behalf of National Ambulance including staff, contractors, and visitors to National Ambulance managed sites. This is applicable for all business operations.

3. ROLES AND RESPONSIBILITIES

1. Executive Team

- Clearly communicate QHSE issues throughout the organization
- Provided visible and sincere commitment to the QHSE Management System
- Communicate appropriate QHSE issues to external stakeholders

2. QHSE and BC Manager

- Communicate QHSE trends to the employees
- Provide QHSE input for publication in the RIB and The Dispatch newsletter

3. Directors and Managers

- Participate in the periodic Leadership Meetings providing staff feedback and improvements to the team
- Provide means of communication from the QHSE Team and their staff

4. Employees

- Communicate QHSE concerns through methods available
- Participate in QHSE discussions
- Actively submit QHSE reports when required
- Make themselves aware of QHSE issues

4. QHSE COMMUNICATION

4.1. INTERNAL COMMUNICATION

The National Ambulance QHSE Management System is intended to be a transparent and understandable system. Even though the majority of QHSE documents, forms, and records are located within the Quality Management System directory (i.e. the QHF201 QHSE Report Register) available to all staff, several methods exist to communicate directly to staff members such as: Submission of Hazards, Incidents, Non-Conformances and Suggestions for Improvements

- QHF202 QHSE Reporting Form - as detailed in the QHP201 Risk Management Policy and Procedure, this form can be used by staff for submitting hazards, incidents, non-conformances, suggestions /ideas for improvements.
- QHSE e-mail at qhse@nationalambulance.ae – staff can email directly to QHSE instead of using the dedicated forms above. This simplifies the process for submitting hazards, incidents, non - conformances and suggestions for improvement. A QHSE staff member will call the person back and complete the official form.
- Site Inspection Checklists - Hazards, incidents, non-conformances and suggestions for improvements can be documented when completing Site Inspection Checklists. The reports submitted will then be reviewed by the QHSE Team

Tracking of Hazards, Incidents, Non Conformances and Suggestions for Improvements

- Use of Asana Computer Application for managing Action Plans – this also facilitates communication as it shows the complete dialogue with each action and the staff member submitting is listed and participates in this online dialogue.

QHSE Awareness

- QHSE information is provided in a dedicated section of the Routine Information Bulletin (RIB) every month
- Periodic QHSE awareness e-mails are provided to staff, including Hazard Alerts
- The QHSE Performance Snapshot is posted on all QHSE Notice Boards, and some snapshots are provided in the quarterly Dispatch Newsletter.
- All main sites and offices have a QHSE Noticeboard

QHSE input from staff

- The Leadership meeting is held regularly with QHSE having a dedicated section within this meeting.
- QHSE is discussed in all meetings and is documented in the COF101 Minutes of Meeting Template
- Suggestions for Improvement – through the QHSE process also includes suggestions for improvement/ideas for the QHSE Management System directly from the staff.

4.2. EXTERNAL COMMUNICATION

National Ambulance communicates with external stakeholders through a variety of methods. These include:

- Participation in industry associations
- Direct meetings with external stakeholders by Executive Team or their designees
- Signage, briefings, and tours as needed for visitors or contractors
- Valued Customer and Base Commander Surveys
- Mandated reporting as per the QHP104 Legal Compliance Policy and Procedure
- Providing information on the National Ambulance website

5. RELEVANT LEGISLATION

International, federal or local legislation and circulars relevant to this Policy. Full detail on this legislation can be found in QHP109 Legal Register.

Code, Name of Legislation	Jurisdiction
OSHAD – SF: Management System Elements, V3.1	Abu Dhabi

6. RELATED POLICIES AND FORMS

List related policies and procedures to the created/updated policy

Policy & Procedure /Form
QHP201 Risk Management Policy and Procedure
QHP401 Customer Enquiries and Feedback Policy Procedure
QHF202 QHSE Reporting Form
QHP104 Legal Compliance Policy and Procedure

7. FEEDBACK

Any feedback or suggestions for improvement to this Policy, Processes or Procedures can be submitted to qhse@nationalambulance.ae

8. DOCUMENT CONTROL AND OWNERSHIP

A review and update of this document will take place as necessary, when changes occur that identify the need to revise this Policy such as changes in roles and responsibilities, release of new legislative or technical guidance, or identification of a new policy area.

This document ownership for editing is identified as:

- QHSE and BC Manager

Change Brief

Version No.	Date	Change
Version 1.0	11 Aug 12	New Policy and Procedure
Version 2.0	05 Sept 2012	Created "Stand-down" recording of information , update version add change brief
Version 3.0	20 July 2015	Replacement of QHSE Consultative Committee with Directors and Managers meeting and QHSE Consultative Blog.
Version 4.0	22 Jan 2020	Add document codes to policies, change DPE to QHSE and BC Manager, addition of Site Inspection Checklist to 4.1, other minor changes

CEO Approval

Board Member Verification