**INTRODUCTION**

1. This document provides internal processes and procedures for the through-life management of Hazardous Substances (HS) and Restricted Materials (RM). It describes a means of managing HS/RM in compliance with the SoS Policy (Reference A, and Reference B, C and D and the DE&S O&A Statement (Reference E). For the purpose of this document HS/RM are defined as:

   a. A Hazardous Substance is any substance or preparation which is very toxic, toxic, harmful, corrosive or irritant or has a Workplace Exposure Limit (WEL) or any other substance that creates a risk to health because of its properties and the way it is used or is present in the workplace.

   b. A Restricted Material is one that is banned or controlled by legislation but is still permitted for specific uses.

**PURPOSE**

2. This document aims to provide guidance that, through compliance with legislation and effective and efficient management of hazardous substances and restricted materials, ensures that all appropriate precautions are taken to prevent harm to personnel and protect the environment while maintaining the operational capability.

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1 This document does not identify new requirements. It does identify a coherent means of compliance for hazardous substance management across the TLB. Similar processes and procedures should already be in place and this document intends to provide minimum requirements and procedures for compliance with MOD Policy.
POLICY

3. The Secretary of State’s Policy Statement directs that, within the UK, Defence will comply with all applicable legislation (which includes legislation giving effect to the UK’s international obligations). Overseas, Defence will apply UK standards where reasonably practicable and, in addition, respond to host nations’ relevant Health Safety and Environmental Protection expectations. There are a number of pieces of legislation which effectively exempt defence activities or provide relevant derogations; there may also be powers of specific dis-application granted to SoS in some legislation. In these circumstances, the Policy Statement requires the introduction of Departmental arrangements that produce outcomes which are, so far as is reasonably practicable, at least as good as those required by legislation.

4. Departmental Safety and Environmental Management Systems also require that:
   a. For acquisition of material, equipment and services of all kinds, safety and environmental management is to begin at the requirements definition stage and is to be carried forward through-life to disposal/termination.
   b. Furthermore, all aspects of maintenance, operation (including military service) and disposal (including through-life disposal of consumables or damaged equipment) are to be taken into account.
   c. MOD Regulations require that all new uses of hazardous substances and restricted materials should be avoided. Additionally, the legacy use should be minimised and cease as soon as possible. These requirements apply, even where derogations or exemptions for Military purposes have been established. Where disapplication or exemptions exist in legislation, substances/materials shall be used within the allowed scope or restricted use and then only where there is no suitable and adequate alternative to meet operational capability.

RELATIONSHIP TO OTHER GUIDANCE

5. MOD Policy. The Defence environment and safety management policy is implemented through Reference C. Management requirements for health and safety and sustainable development and environment are delivered through JSPs (References C and D).

6. Domain Specific Policy. Regulation and guidance will be delivered through publications managed by Defence Safety and Environmental Authority (DSEA) or Military Airworthiness Authority (MAA). Hierarchy of MOD Publications is detailed in Reference B, Chapter 2^2.

7. Departmental Procedures. CDM has put in place a DE&S O&A Statement (Reference E) that details procedures for management of safety and environmental protection. The O&A Statement mandates the use of the Acquisition Safety and Environmental Management Systems (ASEMS^3), Reference F.

APPLICATION

8. It is Departmental policy that staff comply with the MOD’s Policy, Standards and Regulations. QSEP will provide guidance and procedures to implement those Policies. Those holding safety and environmental delegations are to ensure that in the procuring or supporting equipment and services, they conform to the SoS Policy, MOD Policy, Standards, Regulations and Departmental Procedures. DE&S hazardous substance management will be within the terms of reference of the Environmental Protection Improvements Committee (EPIC) formerly the Restricted Materials Steering Group.

9. The hazardous substance management instructions set out in this document are aligned with the policy requirements detailed in ASEMS Part 1, and must be followed by all staff associated with the procurement and support of products, equipment and services. They apply to all equipment

^2 Previously JSP 815 Chapter 4 Annex D
^3 Acquisition Safety and Environmental Management System consists of Project Oriented Safety Management System and Project Oriented Environmental Management System.
and services acquired for Government use, supported and managed either directly or by agencies operating on its behalf. Compliance with this leaflet shall not in itself relieve any person from any legal obligations imposed upon them whether by legislation, regulation or common law.

REQUIREMENTS

10. Operating Centres. To ensure compliance with MOD Policy and CDMs’ O&A Statement, OCs must ensure that their Safety and Environmental Governance captures the through life management of hazardous substances as follows:

      (1) A process for compliance and non-compliance management.
      (2) A process for authorising disapplication, derogation and exemptions at an appropriate management level.
      (3) A process for coordination of hazardous substances and restricted materials reporting as required by MOD Policy or Legislation.

   b. Processes for monitoring and measuring safety and environmental performance for assurance of hazardous substances and restricted materials ensuring:
      (1) Management process and procedures are commensurate with the risk.
      (2) New or continued use of a hazardous substance is properly risk assessed, justified and authorised at an appropriate management level.
      (3) Use is compliant with Legislation, Standards and MOD Policy.
      (4) Risks and impacts are managed within the safety and environmental management systems.
      (5) HS Elimination Plans, Obsolescence Plans and Disposal Plans are valid and appropriate.
      (6) Sufficient Information is provided to their customers to enable safe use and prevention of harm to others and the environment.

11. Project Teams. To ensure compliance with MOD Policy, DE&S Project Team must follow the hazardous substances and restricted materials management requirements detailed below:

   a. Project Teams must ensure that all new uses of hazardous substances and restricted materials are avoided where possible.

   b. Project Teams must identify all hazardous substances and equipment containing hazardous substances. The following management processes must be applied:
      (1) Risk Assessments must be carried out for the new or continued use of hazardous substances. Control measures must be commensurate with the risk.
      (2) Where necessary to meet operational capability, use of the hazardous material needs to be justified and authorised at an appropriate management level, with supporting evidence managed and reviewed through life to disposal. Safety and environmental cases will contain evidence to support safe use of hazardous substances. However, a dossier specific each substance and use should be maintained and contain reference to technical and supporting information and authorised at an appropriate management level. A guide for the development of a

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4 Procedures for compliance with MOD Policy are defined at TLB level eg O&A Statement, this document, Standardised Reporting etc.
5 The Risk Assessment must meet the ALARP Principles. (AOF AEMS SEP Leaflet 02/2011)
6 The Secretary of State, Ministers, DES SB, EPIC, Domain delegated exemption committees or other delegated authorities may authorise deviations from legislation for appropriate levels of risk.
Technical Dossier is included in Reference E (Vol 2, Leaflet 5, Annex B) and this leaflet has an exemplar template at Appendix 1 to Annex A.

(3) Defence Conditions 68 (Supply of Data for Hazardous Articles, Materials and Substances) and Defence Condition 624 (Supply of Asbestos Fibres and Equipment Containing Asbestos Fibres) are applied to all contracts in accordance with Commercial Policy (AOF Reference G, Commercial Toolkit) or compliance with Standardised Contracting Policy.

(4) Management of Safety Data Sheets in accordance with Reference H, ie ensuring they are both accurate and valid and relevant information provided to users, to enable risk assessment and safe use.

(5) The appropriate Stores Management System\(^7\) correctly identifies hazardous substances in accordance with Reference I, Volume 2, Inventory Management.

(6) Warnings and information on hazardous substances are included in delivered equipment or services publications covering operation, maintenance, packaging, storage and transport.

c. Project Teams are responsible for identifying\(^8\) and managing compliance with applicable Legislation and Standards. The DE&S AEMS (Reference F), safety and environmental management procedures SMP01 (POSMS) and EMP01 (POEMS) requires identification and documentation of relevant Legislation and Standards. Where legislation pertains to hazardous substances or restricted materials they are to identify the impact of compliance and non compliance on delivered operational capability. Hazards and impacts of use of hazardous substances should be managed through POSMS/POEMS (eg Hazard Logs and Environmental Features Matrix).

d. Project Teams must seek assurance that suppliers are compliant with current Legislation that applies to the equipments and services they manage. Where legislation may impact capability, Project Teams are to:

   (1) Ensure a risk assessment is carried out.

   (2) Consult with Industry to identify suitable and adequate alternative solutions at the earliest opportunity and, where identified and proven to meet MOD specifications, substituted so far as is reasonably practicable.

   (3) Where an operational capability may be affected by the legislation, the Project Team are to access whether any disapplication or exemption within the legislation is tolerable and justifiable.

   (4) Where equipment or services are not compliant with legislation and hence a significant risk that capability cannot be achieved, the risk should be referred to a higher authority\(^8\).

e. Project teams must engage with Disposal Services Agency, Reference H, at the earliest opportunity, to ratify their Disposal Plan (Reference I, Vol 2, Part 404). DES guidance is to address disposal as early as possible in the CADMID Cycle (eg Assessment Phase prior to trials). As part of the evidence supporting the Safety Case, the hazard information will

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\(^7\) Item of Supply Information System (ISIS), CRISP, SS3, SSCS, EMSD etc

\(^8\) It is expected that Suppliers would be aware of legislation and standards that apply to the equipment and services they deliver to the MOD.
need to be passed to new owners or disposal contractors. Assurance that the competent contractors have been used should be included in the Safety Case Report. The following documents refer to requirements for disposal:

1. **JSP 886 Vol 3 Part 16, Unit Disposal**
2. **JSP 886 Vol 2 Part 404, Disposal of Inventory**
3. **JSP 886 Vol 4 Part 9, Gifting of MOD Materiel**
4. **JS886 Vol 2 Part 305, Retain Awaiting Disposal Advice - Re-Appraisal Procedure**

f. Project Teams must ensure auditable records of their hazardous substance management are maintained.

g. Project Teams must ensure the documentation is current, and accurate and available for inspection by Regulators (internal or external), Enforcing Authorities or Auditors where there is a legal or MOD policy obligation\(^9\) to manage and report use of hazardous substances.

h. Accident and Incident reporting requirements within DE&S are detailed in Reference F, Part 1, SEP Leaflet 01/2010. Project Teams must monitor and record instances where the inherent performance of their equipment or services impacts capability or results in harm to individuals or the environment, including near misses; using this information manage risk.

**ENFORCEMENT**

12. Performance of management of safety and environmental legislation and hazardous substances is included in the DE&S Annual Safety and Environmental Protection Assurance Report delivered to the PUS and Defence Environment and Safety Committee. Assurance of hazardous substance management will be achieved through audit.

**OTHER LEGISLATION**

13. Substances may be affected by legislation which could impact on delivered capability. Some known issues with legislation and substances are captured in Reference E, Leaflet 5, Hazardous Substance and Restricted Materials Management. Hazardous materials may be delivered to the MOD as:

a. Substances (eg benzene, talc) or;

b. Substances within mixtures (eg Fuel with additives, paints) or;

c. In articles (eg clothing impregnated with pesticides/biocides, equipments with anti-corrosion treatments like cadmium plating, or in components such as asbestos brake linings).

14. An example of legislation that may impact the supply chain of equipment and services is REACH (Reference J). REACH applies to all chemicals imported to or manufactured in the EU. This legislation sets out specific requirements dependant on tonnage, imported or manufactured per product per year, or whether the chemical is a substance of very high concern\(^10\) (SVHC) issues that impact the MOD include:

a. The ECHA\(^11\) Registration, Evaluation and Authorisation processes have cost implications that may deter suppliers from manufacturing, importing or using some substances. This may impact on delivery of capability and be a significant risk, particularly where the substance use may be concealed deep within the supply chain. Risk to delivery

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\(^9\) Example. Halons - requirement to record and report use, holdings and emissions

\(^10\) SVHC one or more of the following carcinogenic; mutagenic; toxic for reproduction; it is persistent, bio accumulative and toxic; there is scientific evidence of probable serious effects to human health or the environment.

\(^11\) European Chemicals Agency
need to be managed through the AEMS and Business procedures.

b. Projects may also find alternative substances may not meet their required specification or have not yet been sufficiently tested.

c. There is considerable reliance on suppliers to manage their supply chain. These risks and impacts will need to be dealt with on a case by case basis and it is recommended that assurance of the management of REACH is sought from the supplier.

d. The MOD REACH Defence Exemption Process has authority, through the Secretary of State (SOS), to provide exemption in the interest of national security. However this does require significant justification and will require evidence that mirrors the requirements under REACH.

**OTHER HAZARDOUS MATERIALS OF SIGNIFICANT CONCERN**

15. Radioactive Materials (RAM) are covered by JSP 392 (Reference K). Volume 2 Leaflet 1 covers Acquisition of Sources of Ionising Radiation by Pts and is supported by the DES Radioactive Materials Management Guide. In addition to the obligations for hazardous substances there are requirements for RAM depending on material/activity, which requires engagement with a Radiation Protection Advisor.

**FEEDBACK & CONTINUOUS IMPROVEMENT**

16. Any comments or suggestions for improvement of this Leaflet should be directed to the author, who will maintain them on behalf of the sponsor.

17. The MOD is subject to both United Kingdom and European laws regarding Health and Safety at Work. Many processes and procedures could result in injuries to health if adequate precautions are not taken. Adherence to these procedures in no way absolves users from complying with legal requirements relating to Health and Safety at Work. Any conflicts between these procedures and legal requirements must be notified to S&EP as soon as possible.

**USEFUL CONTACTS**

<table>
<thead>
<tr>
<th>Topic</th>
<th>Contact – Post Name</th>
<th>Contact Tel–</th>
</tr>
</thead>
<tbody>
<tr>
<td>Acquisition Safety And Environment Policy</td>
<td>DES TECH-QSEP-SEP-DepHD</td>
<td>030 679 32320</td>
</tr>
<tr>
<td>Safety Lead</td>
<td>DES TECH-QSEP Saf-AsstHd</td>
<td>030 679 35525</td>
</tr>
<tr>
<td>Environmental Lead</td>
<td>DES TECH-QSEP Env-AsstHd</td>
<td>030 679 82505</td>
</tr>
<tr>
<td>JSP 418 Hazardous Substances Policy</td>
<td>DES TECH-QSEP Env-AsstHd</td>
<td>030 679 82505</td>
</tr>
<tr>
<td>Acquisition Environmental Policy</td>
<td>DES TECH-QSEP Env-Systems</td>
<td>030 679 82522</td>
</tr>
<tr>
<td>REACH/ Hazardous Substances Management</td>
<td>DES TECH-QSEP Env-REACH</td>
<td>030 679 82521</td>
</tr>
<tr>
<td>Radiation Protection/Legislation/Standards</td>
<td>DES TECH-QSEP Support</td>
<td>030 679 82520</td>
</tr>
</tbody>
</table>

Annexes:

A. Management of Asbestos Containing Materials.
B. Management and Reporting of Halons and F-Gases.
C. Hazardous Substance Management Assurance
MANAGEMENT OF ASBESTOS CONTAINING MATERIALS

References:
A. JSP 375 Vol 2 Leaflet 54
B. JSP 418 Vol 2 Leaflet 5
C. JSP 886 Vol 2 Part 404, Disposal of Inventory

Applicability
1. This annex applies to Project Teams managing equipment and components that contains, or may contain, asbestos.

Purpose
2. The purpose of this Annex is to provide advice, guidance and internal procedures for the management and reporting of Asbestos Containing Materials (ACM) in compliance with Legislation and MOD Policy.

MOD Policy
3. Reference A identifies the MOD Policy for compliance with legislation relating to management of asbestos and details of the hazards associated with asbestos. Reference B provides guidance on the management of Hazardous Substances and also details the requirements for, and aspects to be included in, a Technical Dossier.

Departmental Procedures
4. Complimenting the hazardous materials requirements contained in this Leaflet, this Annex identifies a means of compliance for management of ACM to be followed by PTs.

DE&S Instruction
4. Project Teams shall ensure that, where possible, any new equipment/munitions are asbestos free and:
   a. Ensure Defence Conditions 68 and 624 are applied to all procurement contracts, iaw Defence Conditions Guide, or compliance with Standardised Contracting Policy.
   b. Actively seek the cooperation of suppliers to eliminate the use of asbestos.
   c. Where the use of asbestos in any new equipment/munitions cannot be avoided, a Defence REACH Exemption\textsuperscript{12} for the ACM is obtained before procurement.
6. Project Teams must ensure that ACM is removed or replaced in new or legacy equipment where reasonably practicable and:
   a. Develop\textsuperscript{13} and maintain an Asbestos Register identifying ACM, condition and location.
   b. Develop and Maintain an Asbestos Management Plan (AMP) for each use of ACM. The Plan must deliver:
      (1) Risk Assessment with suitable and adequate control measures implemented.
      (2) Technical Dossier (TD) with justification for use, authorised at an appropriate management level, for each use of an ACM (referenced to the Asbestos Register).

\textsuperscript{12} MOD REACH exemption must be fully justified (eg alternatives considered, National Security Interest and capability impact substantiated) and presented to S&EP for review by the REACH Exemption Working Group prior to consideration by the SoS
\textsuperscript{13} Reference A, JSP 375 Vol 2 Lft 54 Para 3.4 but may require survey for legacy equipment iaw J Para 3.3.
(3) ACMs or components/equipment that are suitably labelled and packaged in such a way that personnel shall not be exposed to the component and will not need to break into the packaging before issue or use by competent persons.

(4) Disposal Plan, Reference C refers.

(5) Assurance and Audit Plan (ASEMS)

(6) Continuous review to ensure timely updates for information about any changes to the type, condition and location of ACM or where technology or other opportunities identifies a reasonably practicable alternative.

c. Ensure sufficient Information is provided so that:

(1) Where appropriate, surveys can be carried out and warning labels placed to clearly identify location of ACM.

(2) Operating and Maintenance instructions clearly identify safe systems of work.

(3) Appropriate training can be delivered to operators and maintainers.

Reporting

7. The MOD is required to annually\(^{14}\) report its Asbestos Elimination Programme to DSEA with copies to the SoS, HSE and Defra. Operating Centres and Project Teams must:

a. Ensure evidence in support of justification for continued use of ACM is developed and maintained including:

(1) Asbestos Management Plan.

   (a) Technical Dossiers.

   (b) Justification and Authorisation Certificates.

(4) Audit Reports

b. Provide information\(^{15}\) to S&EP (DES TECH-QSEP RMRad1) to allow the DE&S data to be collated into the AMP report. As a minimum, the following information will be required by 01 Mar each year:

(1) Number of line items (ACM) by Platform/Equipment. Nil returns required.

(2) Reason for Use Justification by groups.

(3) Statement that Technical Dossier/Justification certificates have been developed and authorised.

Assurance

8. Operating Centres should provide assurance that Project Teams are compliant with this instruction.

9. S&EP are delivering an Audit Programme that will include themed audits, and will include through life management of hazardous substances.

Means of Compliance

10. Exemplars of good practice for the management of ACM that has options for individual or multiple item reporting are published on the AOF and Defence Intranet or can be obtained through the DES Focal Point. Alternative means of compliance must capture the principles of the Technical Dossiers, justified and authorised at an appropriate management level.

\(^{14}\) Calendar Year and is reported to DSEA by 31 Mar.

\(^{15}\) Previous annual reports required delivery of Justification/Authorisation Certificates to QSEP. To reduce the administrative burden, this requirement was changed, as there was expectation that TDs and justification/authorisation certificates would be maintained by Project Teams and inspected during safety and environmental management audits.
EXEMPLAR - TECHNICAL DOSSIER

LEGISLATION
Document the Restricted Material/Hazardous Substance Legislation or Standards that impact on the equipment or material likely to be delivered or currently in use. Document how that legislation impacts on the delivery and use of the equipment. Identify how legislation will be monitored through life of the project.

APPLICABILITY
Where there is derogation, disapplication or exemption within the legislation; analyse the restriction criterion and also any applicable MOD Policy and document how it might apply to the delivered equipment.

ALTERNATIVE
If there is a less/non-hazardous suitable and adequate alternative it should be used, so far as is reasonably practicable. Document why an alternative is not suitable or available or why it is not reasonably practicable. It will be necessary to substantiate this case with technical and benefit analysis that captures through life management. Where there is no alternative it or it is considered that an alternative is not reasonably practicable, seek advice from the Operating Centre focal point or DES SE SEP.

ACCEPTANCE
Where MOD policy tolerates the use of the substance under specific conditions and, the use is compliant with that policy, reference it and its applicability to this project.

RISK ASSESSMENT
Ensure the risk assessment is documented and referenced. Include any cost benefit analysis, limitations to use and all measures implemented to prevent harm. Ensure that the quality of evidence justifying the use is commensurate with the risk. The ALARP argument should define why the use of the substance is believed to be acceptable and the risk from its use ALARP.

CONTROL MEASURES
Document how the prevention of Harm is to be managed through life of the project and reference documented evidence.

TECHNOLOGY
Through life monitoring of technology is essential to capture changes that may allow replacement of the substance. Identify how technology is to be monitored.

EQUIPMENT UPDATES
When equipment it to be modified or updated the Technical Dossier and Elimination Plan must be reviewed to ensure it captures changes to technology, legislation, MOD Policy and justification for continued use.

JUSTIFICATION
Evidence from the Technical Dossier should be sufficient to claim justifiable use. A justification document, signed off by the TL, should outline the case and reference supporting documents. Note. Where there are several items on a single platform they may be captured on a single document with a spreadsheet identifying Line items, justification (by groups for simplicity) etc in a spreadsheet.

ELIMINATION PLAN
The Elimination Plan should identify Platform, Equipment, Component (by Line Item NSN or Part Number), Location, Key Dates (eg date estimated removal/replacement, reviews or end of life) and Justified Use. Note. Where there are several items on a single platform they can be captured in a spreadsheet grouped by “Justified use” as long as the information is captured for each line item.

REPORTING
Some hazardous substances are reported annually, currently asbestos, Halons and F-Gases. PTs are to report in specific formats and at specific timescales.

AUDIT TRAIL
The Technical Dossier and Elimination Plan are to be version marked to ensure that changes can be captured for the audit trail.

AUTHORISATION
Wherever a derogation, disapplication or exemption is applied, the continued use must be authorised at an appropriate management level. Where the continued use is necessary to meet an essential operational requirement and is not compliant with legislation it must be referred to an appropriate Authority, ie EPIC, MAA, DSEA or SoS etc.
EXAMPLES OF JUSTIFIED USE
Where it is necessary, to achieve or maintain operational capability, the Hazardous Substance may be used or retained in-use, in line with current legislation and MOD Policy. Where this is not the case, authorisation should be sought through the management chain. Examples of justified use are:

DELAYED AVAILABILITY. An alternative has been identified but will not be available or, cannot be installed due to operational commitments, until DDMMYYYY.

The use of the Hazardous substance remains crucial to the maintenance of full operational capability until the replacement is available.

SHORT LIFE. A less/non-hazardous alternative has been identified but a modification programme to fit the new design to the equipment could not be accomplished within the planned service life of the equipment, which is to end DDMMYYYY.

The use of the Hazardous Substance remains crucial to the maintenance of full operational capability until the OSD.

NO ALTERNATIVE To date, technical investigations have failed to find a suitable and adequate alternative that is capable of maintaining the inherent safety of the equipment and delivering Operational capability.

The planned service life of the equipment is to end DDMMYYYY. To maintain full operational capability until that date, or until a suitable alternative item is found, it is essential that the original equipment/components containing Hazardous Substances be used.

EXPOSURE RISK Dependant on risk of exposure during use. A less/non-hazardous alternative has been identified. However, risk of exposure during normal us is such that the benefit of removal is outweighed by the unacceptable risk of exposure during the removal process.

Unless circumstances change the, hazardous substance will remain in place and until the end of life of the equipment DDMMYYYY.

COST EFFECTIVE Dependant on risk of exposure during use. A less/non-hazardous alternative has been identified but the cost of a modification programme to fit the new design to the equipment could not be justified on the remaining life of the equipment. The planned service life of the equipment is to end DDMMYYYY.

To maintain full operational capability until that date the equipment/components containing the Hazardous Substance must still be used.

ESSENTIAL USE The equipment/component containing the Hazardous Substance is being procured, has been procured or is reuse of GFX to meet a specific essential operational capability.

Note. This justification may also encompass one or more of the above justifications. Advice should be sought through DES TECH-QSEP in the first instance.

FURTHER INFORMATION This exemplar supports the requirements for a Technical Dossier as detailed in JSP 418 Vol 2 Leaflet 5. For further information, contact destech-qsepenv-REACH@mod.uk

NOTE The Technical Dossier does not necessarily need to include all the evidence required. However it is essential that the appropriate evidence is referenced within the document. The examples above must be supported by suitable and adequate evidence and available for audit or assurance through an agreed third party.
MANAGEMENT AND REPORTING OF HALONS AND F-GASES

References:
A. JSP 418 Leaflet 6 Fluorinated Greenhouse Gases (F-Gases).
B. JSP 418 Leaflet 7 Ozone depleting Substances
C. JSP 418 Leaflet 7 Reporting Matrix (.xls)

MANAGEMENT

1. MOD Policy. The MOD management and reporting requirements for Halons and F-Gases is defined in Reference A and Reference B. This Annex defines the DE&S process for compliance.

2. Project Teams. PTs are to ensure that within their area of responsibility:
   a. All uses of the substances are identified, described and reported centrally annually.
   b. A strategy exists to minimise use and emissions of the fluorinated greenhouse gases and to ensure that more environmentally acceptable alternatives are evaluated and used wherever they are suitable.
   c. A strategy exists to replace all the identified uses of the ODSs, to support them until they are replaced where this is consistent with MOD policy and permitted under the applicable legislation, and to minimise emissions of the substances to atmosphere.
   d. A plan exists and is regularly reviewed to implement the strategy in order to comply with MOD Policy and current legislation.
   e. A communications plan exists to enable information exchange between PTs and Users to ensure use, emissions and reporting requirements are met.

3. Users. All users of the controlled substances and most notably the operators of the equipment containing ODSs and F-Gases must take all precautionary measures practicable to prevent and minimise any leakages and emissions of controlled substances.

4. Operating Centres. OCs must have a governance process which captures and coordinates the management and reporting process.

REPORTING

4. Safety and Environmental Protection. QSEP have delegated responsible for maintenance of ODS and F-Gas Policy Leaflets (Reference A and B). QSEP, as the DES Focal Point (TLB Representative), is responsible for coordination of the annual returns and significant accidental or avoidable loss reports.

5. Project Teams.
   a. Procurement and Losses. PTs must notify the DES Focal Point of all significant procurements or events that result in a significant accidental or avoidable loss of any F-Gas or ODS\textsuperscript{16} (as soon as reasonably practicable). The notification of the event should include a concise description of the circumstances, the outcome of the investigation and a description of measures taken to prevent a recurrence.
   b. Annual Report. The Annual Report (Jan-Dec) is to be collated through OCs and returned, in an electronic format wherever possible, to the DES Focal Point by 01 Mar of the following Year. Data is to be supplied in the format of the Reporting Matrix at Reference C. Project Team reporting requirements are to be in accordance with References A and B:

\textsuperscript{16} The information/data which operators of equipment containing ozone depleting substances or fluorinated greenhouse gases are mandated to collect and gather must be made available to the competent authority (Defra) and the European Commission if requested.
HAZARDOUS SUBSTANCE MANAGEMENT ASSURANCE

1. Audit and Assurance is an integral part of safety and environmental management systems. It may be carried out through Regulator, TLB, Operating Centre, external or internal review processes. For DE&S it provides safety and environmental assurance to Senior Management of the status of safety and environmental delivery and culture within their areas of responsibility. To ensure hazardous substance management is included in the through life assurance processes an exemplar question set focused on the requirements of this leaflet has been developed.

OPERATING CENTRES.

<table>
<thead>
<tr>
<th>Question</th>
<th>Result</th>
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<tbody>
<tr>
<td><strong>COHERENT MANAGEMENT PROCESS FOR LEGISLATION AND MOD POLICY</strong></td>
<td></td>
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<tr>
<td>1. Does the OC O&amp;A statement identify;</td>
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<tr>
<td>1a How the OC intends meeting the General Requirements for Safety and Environmental Protection responsibilities mandated by CDM’s O&amp;A Statement, and processes for;</td>
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<tr>
<td>1a Compliance and non-compliance management;</td>
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<tr>
<td>1b Authorisation of disapplication, derogation and exemptions at an appropriate management level;</td>
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<tr>
<td>1c Coordination of hazardous substances and restricted materials reporting as required by MOD Policy or Legislation?</td>
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<tr>
<td><strong>MONITORING AND MEASURING SAFETY AND ENVIRONMENTAL PERFORMANCE</strong></td>
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<tr>
<td>2 Are there processes for monitoring and measuring safety and environmental performance that addresses management of hazardous substances, through life and do they assure that;</td>
<td></td>
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<tr>
<td>2a They are commensurate with the risk;</td>
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<tr>
<td>2b New or continued use of a hazardous substances are properly risk assessed;</td>
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<tr>
<td>2c The justification and approval processes has been followed and have been authorised at an appropriate management level;</td>
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<tr>
<td>2d Compliance with Legislation, Standards and MOD Policy has been met;</td>
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<tr>
<td>2e Risks and environmental impacts are managed within the appropriate safety and environmental management systems;</td>
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<tr>
<td>2f Elimination Plans, Obsolescence Plans and Disposal Plans have been developed and are valid and appropriate;</td>
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<tr>
<td>2g Sufficient Information has been provided to customers to enable safe use and prevention of harm to others and the environment?</td>
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<tr>
<td>Question</td>
<td>Result</td>
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<tr>
<td><strong>HAZARDOUS SUBSTANCES AND RESTRICTED MATERIALS MANAGEMENT REQUIREMENTS</strong></td>
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<tr>
<td>3  Does the Project Teams have process for management of hazardous substances and restricted materials?</td>
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<td>4  Is there evidence that all new uses of hazardous substances and restricted materials are avoided where possible?</td>
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<tr>
<td>5  Is there evidence that all hazardous substances and equipment containing hazardous substances are identified, and;</td>
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<tr>
<td>5a Is there evidence that DEFCON 68, 624 or Standardised Contracting terms and conditions have been applied;</td>
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<tr>
<td>5b Have Risk Assessments been carried out for the new or continued use of hazardous substances;</td>
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<tr>
<td>5c Are control measures commensurate with the risk;</td>
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<tr>
<td>5d Is hazardous material use justified and authorised at an appropriate management level;</td>
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<tr>
<td>5e Is there evidence that use of hazardous substances is captured in the Safety and Environmental cases;</td>
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<tr>
<td>5f Is there evidence that warnings and information on hazardous substances have been included in delivered equipment or services publications covering operation, maintenance, packaging, storage and transport delivered equipment or services?</td>
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<tr>
<td>6  Do the Safety and environmental management systems (EMP01/SMP01) identify applicable legislation and standards and;</td>
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<tr>
<td>6a Where the legislation applies to hazardous substances is there evidence of the impact of that legislation on the use of hazardous substance;</td>
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<tr>
<td>6b Is the environmental impact or hazard reflected in the environmental or safety cases (Hazard Log or Environmental Features Matrix);</td>
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<tr>
<td>6c Is there evidence that, where an operational capability may be affected by the legislation, an assessment as to whether any disapplication or exemption within the legislation is tolerable and justifiable has been carried out;</td>
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<td>6d Where equipment or services are not compliant with legislation has the risk should be referred to a higher authority?</td>
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<tr>
<td>Question</td>
<td>Result</td>
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<td>7</td>
<td>Is there evidence that project teams have sought assurance that their suppliers are compliant with current Legislation and;</td>
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<tr>
<td>7a</td>
<td>Is there evidence of consultation with Industry to identify suitable and adequate alternative solutions at the earliest opportunity;</td>
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<tr>
<td>7b</td>
<td>Where identified, and proven to meet MOD specifications, has the hazardous substance been substituted, so far as is reasonably practicable?</td>
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<td>8</td>
<td>Is there evidence of a Disposal Plan and does the plan include;</td>
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<tr>
<td>8a</td>
<td>Engagement with Disposal Services Agency;</td>
</tr>
<tr>
<td>8b</td>
<td>Solutions for disposal both through life and end of life;</td>
</tr>
<tr>
<td>8c</td>
<td>Where disposal has taken place is there assurance that the correct disposal process and competent contractors have been used?</td>
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<td>9</td>
<td>Is their evidence that auditable records of hazardous substance management are maintained and;</td>
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<tr>
<td>9a</td>
<td>Where there is a legal or MOD policy obligation to manage and report use of hazardous substances, is the documentation current, and accurate;</td>
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<tr>
<td>9b</td>
<td>Is their evidence of inspection or assurance by Regulators (internal or external), Enforcing Authorities or Auditors?</td>
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</tbody>
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