



Safety Progress Awards 2027

Question Set and Marking Scheme

Purpose and assessment model

This application is for organisations entering only the non-competitive award. Question 1 provides organisational and risk context and is not scored. Questions 2–7 correspond directly to Leadership, Risk, Culture, Capability, Performance and Learning. Each scored question is marked from 0 to 4. The following weightings apply:

- Leadership: 20%
- Risk: 20%
- Culture: 15%
- Capability: 15%
- Performance: 15%
- Learning: 15%

Assessment will take account of the entrant's size, sector, activities, workforce arrangements and risk profile. Strong answers should explain the approach, how it is implemented, who is involved, how effectiveness is measured, and what has improved. Applicants should support statements with current, scope-specific examples and evidence rather than relying only on policies or intentions.

Each of Questions 2–7 is scored from 0 to 4 and converted to the approved weighting for its criterion. The resulting weighted score is expressed out of 100.

Recognition levels:

- Foundation: 50–59
- Advancing: 60–74
- Leading: 75–84
- Pacesetter: 85–100

1	Describe the organisation, site, business unit, region or project covered by this application. Include: • Main activities and locations • Number and profile of employees and regular contractors • Organisational structure and health, safety and wellbeing responsibilities • Any significant operational or organisational changes during the reference period; and • The most significant occupational safety, occupational health and wellbeing risks affecting the scope of the application, including who may be affected and why the risks are significant. Word limit: 600 words.					Question not scored
2	Leadership and accountability Explain how leaders set expectations and provide effective direction for health, safety and wellbeing. Include: • Senior accountability and responsibilities • How priorities and objectives are agreed and integrated into business planning and decision-making • How leaders demonstrate visible commitment • How suitable resources and competent support are provided • How performance information and workforce feedback are reviewed; and One example from the reference period where leadership review resulted in a decision, action, resource commitment or measurable improvement. Word limit: 600 words.	4 — Mature, sustained and influential Clear evidence shows that senior leaders retain accountability; health, safety and wellbeing are integrated into business decisions; responsibilities, objectives and resources are aligned to significant risks; leaders are visibly involved; and performance and workforce feedback are regularly reviewed. A strong example demonstrates a completed leadership decision or resource commitment, verified improvement and learning that has influenced wider practice.	3 — Consistently implemented and improved Senior accountability, responsibilities and objectives are clear. Leaders are visibly involved, provide proportionate resources, review relevant performance and workforce feedback, and act on findings. A specific example shows a completed decision or action with credible evidence of impact or improvement.	2 — Established but uneven Leadership arrangements, responsibilities or objectives are described and some implementation is evident, but leadership visibility, integration, resourcing, review or action is inconsistent, incomplete or weakly evidenced. An example is provided but its completion or impact is unclear.	1 — Limited or unverified Policies, intentions or general leadership support are described, but there is little scope-specific evidence of accountability, visible involvement, suitable resources, systematic review or resulting action.	0 — Insufficient No relevant evidence is provided, or the response reveals a material weakness in leadership or accountability.

3	Risk management Explain how the organisation identifies, prioritises, controls and reviews its most significant occupational safety, occupational health and wellbeing risks. Include: • The approach used to identify hazards, affected groups and changing risks • How risk significance is determined • Preventive and protective controls, using the hierarchy of control where relevant • Employee and contractor involvement • Arrangements for occupational health, psychosocial, emergency, contractor and change risks where applicable • How control effectiveness and residual risk are checked; and • One example from the reference period where risk information led to a verified improvement. Word limit: 600 words.	4 — Mature, sustained and influential A systematic, proportionate and integrated process covers the significant safety, health and wellbeing risks relevant to the application scope, including changing and third-party risks. Controls demonstrably follow prevention principles and the hierarchy of control where relevant. Workers and contractors influence decisions; residual risk and control effectiveness are verified; and the example shows sustained improvement and learning transferable to other activities or locations.	3 — Consistently implemented and improved Significant risks and affected groups are clearly identified and prioritised. Suitable controls are implemented and reviewed, workers or contractors are involved, and monitoring confirms whether controls remain effective. The example shows a completed improvement supported by credible evidence.	2 — Established but uneven Relevant risks and controls are identified, but coverage, prioritisation, workforce involvement, implementation, residual-risk review or effectiveness checks are partial or inconsistent. The example describes action but provides limited evidence that it was completed or effective.	1 — Limited or unverified The response relies mainly on generic risk assessments, policies or lists of controls, with little scope-specific evidence of prioritisation, implementation, worker involvement or review of effectiveness.	0 — Insufficient No relevant evidence is provided, or a significant uncontrolled risk or other material weakness is apparent.
4	Culture and workforce involvement Explain how employees, contractors and their representatives are involved in protecting and improving health, safety and wellbeing. Include: • Communication and consultation arrangements • Accessible routes for raising concerns, reporting events and offering ideas • How barriers to involvement are identified and addressed • How feedback is acknowledged and acted upon • How people are supported to challenge unsafe or unhealthy work; and • One example from the reference period where workforce input changed a decision, control or way of working. Word limit: 600 words.	4 — Mature, sustained and influential Two-way communication, consultation and participation are embedded across relevant workforce groups and contractors. Reporting and challenge are accessible and supported; barriers to participation are actively removed; feedback loops are demonstrably closed; and workforce influence is visible in decisions. The example shows a meaningful, reviewed improvement with sustained or transferable benefit.	3 — Consistently implemented and improved Multiple suitable channels enable communication, consultation and reporting. Relevant groups are involved, concerns receive feedback, and people can influence decisions without unreasonable barriers. A specific example shows that workforce input resulted in a completed change with credible evidence of benefit.	2 — Established but uneven Communication or consultation arrangements exist, but participation varies between groups or locations, contractor involvement is limited, reporting barriers are insufficiently addressed, or feedback and resulting action are inconsistently evidenced.	1 — Limited or unverified The response mainly describes one-way communication, meetings or reporting systems, with little evidence of meaningful consultation, psychological safety, feedback or workforce influence.	0 — Insufficient No relevant evidence is provided, or the response indicates a material weakness in consultation, participation or the ability to raise concerns.

5	Competence and capability Explain how the organisation ensures that employees, managers, contractors and specialist role-holders have the competence and support needed to work safely and protect health and wellbeing. Include: • How competence requirements are defined for relevant roles • How education, training, skills, experience and behaviours are assessed • Induction, refresher learning and continuing development • Supervision and access to competent advice • How competence is checked in practice rather than through attendance alone; and • One capability gap identified during the reference period, the action taken and how effectiveness was rechecked. Word limit: 600 words.	4 — Mature, sustained and influential A role- and risk-based competence system covers employees, managers, contractors and specialist roles. Requirements are defined and kept current; development and supervision are proportionate; competent advice is accessible; and practical performance or behaviour is verified. The example shows a gap closed, effectiveness rechecked and learning applied more widely.	3 — Consistently implemented and improved Relevant competence requirements are clear and assessed using education, training, skills and experience. Induction, refresher development, supervision and competent advice are in place, with checks of practical effectiveness. A specific gap was addressed and the outcome credibly rechecked.	2 — Established but uneven Competence arrangements and training are evident, but role coverage, assessment, refresher development, supervision, contractor competence, practical verification or follow-up on gaps is partial or inconsistent.	1 — Limited or unverified The response relies mainly on training attendance, qualifications or induction, with little evidence of role-based requirements, assessment, supervision, competent support or verification in practice.	0 — Insufficient No relevant evidence is provided, or the response reveals a material competence or capability weakness.
6	Performance measurement and assurance Explain how the organisation understands health, safety and wellbeing performance and uses evidence to guide decisions. Include: • A balanced set of leading and lagging indicators • Occupational safety, occupational health, wellbeing and contractor information where relevant • Objectives or targets and how they are set • Monitoring, inspections, audits and other assurance activity • Responsibilities, frequency, competence and independence of review • Analysis of trends, differences between workforce groups or locations, and emerging concerns; and • One example from the reference period where performance or assurance findings led to a completed and verified change. Word limit: 600 words.	4 — Mature, sustained and influential A balanced, risk-based performance and assurance framework integrates leading and lagging measures across safety, health, wellbeing and relevant third parties. Data quality, trends, differences and emerging issues are actively examined. Assurance is suitably competent and independent, findings inform senior decisions, and the example demonstrates verified impact and learning applied elsewhere.	3 — Consistently implemented and improved Relevant objectives, leading and lagging indicators, monitoring and assurance arrangements are clearly described. Trends are reviewed by accountable people and findings drive action. A specific completed change is supported by credible verification of its effect.	2 — Established but uneven Performance measures or assurance activities exist, but the balance of indicators, coverage, targets, data analysis, reviewer competence, action closure or effectiveness checks are incomplete or inconsistent.	1 — Limited or unverified The response mainly provides incident totals, compliance activity or audit schedules, with little evidence of balanced measurement, trend analysis, governance, action or verification.	0 — Insufficient No relevant evidence is provided, required performance information is absent without reasonable explanation, or a material assurance weakness is apparent.

7	Learning and continual improvement Describe how the organisation converts incidents, ill health, near misses, workforce feedback, audits, inspections, drills, performance data and other experience into learning and continual improvement. Include: • How events and findings are investigated or reviewed proportionately • How underlying and organisational causes are identified • Employee and contractor involvement • How actions are prioritised, assigned, tracked and verified • How lessons are communicated and shared • How previous improvements are reviewed for sustained effectiveness; and • The most significant improvement during the reference period, including what changed, the evidence of impact and what the organisation will do next. Word limit: 600 words.	4 — Mature, sustained and influential Learning is systematically drawn from multiple internal and external sources. Reviews identify underlying and organisational causes; workers and contractors contribute; actions are governed through completion and verification; and lessons are shared across relevant boundaries. The improvement example shows sustained, measurable impact, reflective learning and a clear next step, with practice capable of informing others.	3 — Consistently implemented and improved Events, findings, feedback and data are reviewed using a proportionate process. Causes are examined, relevant people are involved, actions are assigned and tracked, and learning is communicated. The example shows a completed improvement with credible evidence of impact and follow-up.	2 — Established but uneven Learning and corrective-action processes exist, but cause analysis, participation, action closure, communication, verification or review of sustained effectiveness is partial or inconsistent. The example shows activity but limited evidence of impact.	1 — Limited or unverified The response focuses mainly on immediate correction, isolated lessons or future intentions, with little evidence of systematic investigation, shared learning, completed action or verification.	0 — Insufficient No relevant evidence is provided, or the response indicates a material failure to learn from significant events or findings.
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