Executive Summary
The Work Health and Safety (WHS) Systems Manual describes how the University of Tasmania manages work health and safety through its documented WHS Management System.

1. Purpose
   The purpose of this manual is to:
   - establish, implement and maintain information that describes the core elements of the WHS Management System and their interaction; and
   - provide direction to related documentation.

2. Standard
   This manual has been developed in accordance with:
   - Work Health and Safety (WHS) Act 2012 and WHS Regulations 2012;
   - AS/NZS 4801:2001 Work health and safety management systems – Specification with guidance for use; and

3. Review
   The Work Health and Safety Committee will, at intervals that it determines, review the manual, to ensure its continuing suitability, adequacy and effectiveness.

4. Responsibilities
   Control and maintenance of this manual is the responsibility of the Manager Workplace Health and Safety.

5. Procedure
   The structure and content of this manual reflects AS/NZS 4801: Section 4, Occupational health and safety management system (OHSMS) requirements:
   1. General Requirements;
   2. WHS Policy;
   3. Planning;
   4. Implementation;
   5. Measurement and Evaluation; and

6. Appendices
   Appendix 1: The University's WHS Management System and the Elements of AS/NZS 4801.

7. More information
   For further information, contact the Human Resources - WHS Unit:
   Email: health.safety@utas.edu.au
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1 GENERAL

1.1 Scope of Operations

The University of Tasmania is a research led university, with a high standard of teaching, and a strong and increasing international focus.

The principal activities of the University consist of:

(a) teaching and learning;
(b) research, knowledge transfer and research training;
(c) community engagement; and
(d) activities incidental to undertaking (a) to (c).

a) Governance

The University Council is the governing body of the University and is chaired by the Chancellor. Council makes decisions in relation to policy and planning, makes University legislation and approves policy documents. It is advised by its committees, its working parties, and (in relation to academic matters) the Academic Senate.

The University’s senior management structure consists of the Senior Executive and the Senior Management Team.

b) Students

University students (2014) consist of:

• all students 33,703
• Undergraduates 27,382, Research Higher Degree 1,718 Postgraduate 4,603;
• total student load (EFTSL) 18,946.2

c) Staff

The staff of the University (2014), including casuals, consist of:

• Full Time Equivalent (FTE) of 2,806.69 (1066.6 Academic, 1360.7 Professional and 379.4 Casual);
• Academic (excluding casuals) 1,267 and professional (excluding casuals) 1,553

d) Campuses

The University has three main campuses in Tasmania - the Sandy Bay campus in Hobart, the Newnham campus in Launceston and the Cradle Coast campus in Burnie.

Also in Hobart, the University’s Conservatorium of Music is located near the city centre; the Tasmanian School of Art is housed in refurbished warehouse on Hunter Street and includes studios and gallery space. The Medical Science Precinct is located in the CBD next to the Royal Hobart Hospital; the Medical Science Precinct houses the School of Medicine and the Menzies Research Institute. A satellite campus of the School of Nursing and Midwifery is located at the Domain. Other facilities in the south include the Institute of Marine and Antarctic Studies (IMAS) campus at Salamanca, the IMAS research facility at Taroona and the University Farm near Richmond.

The main campus in Launceston is situated at Newnham. The Australian Maritime
College, an institute of the University, is also located at Newnham, with facilities at Beauty Point and Bell Bay, including training vessels. In Launceston at Inveresk are the School of Visual and Performing Arts, and the School of Architecture and Design, both housed in refurbished railway workshops.

Based at Burnie the Cradle Coast Campus offers modern, purpose-built teaching and learning facilities. Other facilities include the Makers' Workshop, University farms at Forthside and Elliott and Rural Clinical Schools located within the Mersey and Burnie Hospitals.

In addition, the University has two campuses in Sydney at Darlinghurst and at Rozelle, where students undertake studies in Paramedic Practice and Nursing.  

e) Open to talent

The University’s Mission and Vision is underpinned by Open to Talent²

“Open to Talent’s three priorities bring a clear purpose to our work. Realisation of our ambition will depend on authentic, sustained and focused engagement with Open to Talent’s vision and the judicious alignment of our people, infrastructure, resources and processes”.

People and culture

To build rewarding careers and a healthy and engaged workforce and culture, positioning the University as an employer of choice by:

1. Communicating objectives and clarifying responsibilities and classifications of all staff, including articulation of performance expectations.
2. Providing a formative performance management framework.
3. Committing to justice and fairness of opportunity in employment and striving to create an equitable workplace.
4. Fostering a culture underpinned by mutuality and reciprocity, characterised by open communication, the celebration of achievement, and respectful of collegial debate.
5. Encouraging an entrepreneurial culture, where bold ideas and actions are encouraged.”³

1.2 Policies

Policy statements of the University are in almost all cases, approved by the Vice-Chancellor and in a small number of cases, approved by Council.

The Policy and Delegations Office is responsible for assisting with the development, review and promulgation of components of the University Policy Framework (Policies, Procedures, Guidelines, Standards), and the Governance Level Principles and Delegations Policy.

The Office is also responsible for providing advice to members of the University about all aspects of the Policy Development and Review Policy and associated Procedures and Guidelines which articulate the University Policy Framework and associated Policy

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¹ University of Tasmania 2013, Campus Information, University of Tasmania, viewed 14 May 2013, http://www.utas.edu.au/campuses
³ University of Tasmania 2013 Open To talent – Outline of the Strategies, University of Tasmania, viewed 14 May 2013, http://www.utas.edu.au/__data/assets/pdf_file/0005/263876/OPEN-TO-TALENT-STRATEGIES.PDF
1.3 WHS Management System

The University has established and will maintain a Work Health and Safety (WHS) Management System in accordance with the requirements of Australian Standard AS/NZS 4801 Work health and safety management systems.

The University’s WHS management system:

(a) describes the core elements of the WHS management system and their interaction; and

(b) provides direction on where to obtain related documentation and more detailed information on the operation of specific elements of the WHS Management System.
2 WORK HEALTH AND SAFETY POLICY AND COMMITMENT

The Vice Chancellor is responsible for approving the University’s Work Health and Safety (WHS) Policy.

The University has in place a documented Work Health and Safety (WHS) Policy which:

- is reviewed by the Senior Management Team in consultation with the Work Health and Safety Committee and signed and dated by the Vice Chancellor;
- states the University’s overall objectives and its commitment to continual improvement;
- is applicable to the University’s operations and associated risks, the nature and scale of which are defined in a Risk Register;
- includes a commitment to:
  - measurable objectives and targets,
  - continued improvement,
  - elimination of work-related injury and illness, and
  - compliance with WHS legislation and other requirements;
- is applicable to the University’s employees, students, contractors, volunteers and visitors;
- is documented and communicated to all employees and is:
  - published on the University intranet,
  - provided to workers, including contractors during induction; and
  - where applicable, printed and displayed in its entirety or summary for the benefit of visitors to University operated facilities.
- is made available to all interested parties, including employees, Health and Safety Representatives, students, volunteers, contractors, visitors, auditors and insurers through the University internet; and
- is periodically reviewed (at least every three years) by the Senior Management Team, in consultation with the WHS Committee, to ensure it is kept up to date.
3 PLANNING

3.1 Hazard and Risk Management

The Office of Risk Management and Audit Assurance (RMAA) provides the University with internal audit, risk assessment services, legal compliance, and business continuity planning. It operates under a formal charter approved by Audit & Risk Committee and Council and reports to the Vice-Chancellor, through the Chief Operating Officer.


The University’s Corporate Risk Register and Organisational Unit Risk Registers identify activities and services (including those of contractors and suppliers) over which the University has control or influence. The risk registers are maintained electronically and are periodically reviewed.

Hazard identification is based on operational experience and is carried out through:

- audits;
- analysis of hazard reports;
- analysis of accident/incident history; and
- employee consultation.

3.2 Legal and Other requirements

The University has a documented guideline which describes how legislative requirements are identified, monitored and applied.

A list of current health and safety Acts, Regulations, Codes of Practice, Standards and other information relevant to the University is maintained by Risk Management and Audit Assurance (RMAA).

Changes to legal and other requirements are:

- monitored through subscription to email alert services including Law One™;
- communicated through e-mail;
- reviewed through TRIM™ Workflow; and
- published on the intranet.

The list is updated whenever there is a change to any legal and other requirements applicable to the University’s operations.

Significant changes to legislation are considered in the Management Review process.

Legal and other requirements are communicated to employees through:

- the induction and training process;
- Health and Safety Representative training; and
- E-mail updates

3.3 Objectives and Targets

University wide WHS objectives and targets are developed by the Senior Management Team and documented in the University Work Health and Safety Strategy.

The Senior Management Team reviews the objectives and targets to ensure:
• consistency with the WHS Policy;
• commitment to measuring and improving WHS performance; and
• consideration of:
  – legal and other requirements,
  – hazards and risks,
  – operational and business requirements,
  – views of interested parties.

Each Organisational Unit (OU) of the University develops objectives and targets in support of the University wide objectives and targets and in response to the particular work health and safety requirements of the OU.

3.4 Management Plan

The University’s WHS Management Plan is developed by the Senior Management Team.

The WHS Management Plan:
• details the strategy for achieving the University’s WHS objectives and targets;
• designates responsibility for achievement of objectives and targets; and
• outlines the means and timeframes for completion.

The WHS Management Plan is reviewed in accordance with the University’s WHS Management Review Procedure. The Plan is amended, where required, to reflect significant changes to the University’s activities, services, or operating conditions.

Each OU of the University develops a WHS Action Plan in support of the University wide Action Plan and in response to the particular work health and safety requirements of the OU.
4 IMPLEMENTATION

4.1 Structure and responsibility

4.1.1 Resources

The Senior Management Team has identified and provided the resources required to implement, maintain and improve the University’s WHS Management System.

4.1.2 Responsibility and accountability

The University has defined, documented and communicated the WHS areas of accountability and responsibility relating to all personnel.

These accountabilities are documented in the *Work Health and Safety Responsibilities Minimum Standard* and in Position Descriptions, which are issued to all employees.

Accountabilities and responsibilities are reinforced through induction, training and regular meetings.

Contractor WHS responsibility is included in contract documents and in contractor inductions.

The Officers of the University are issued with Officer Information Kits which provide information on their due diligence duties under the Tasmanian Work Health and Safety Act.

The WHS Committee, comprising management, employee and student representatives and WHS specialists, meets on a regular basis to monitor and review WHS performance.

The WHS Committee is the key consultative group for health and safety related issues.

The Manager Workplace Health and Safety has been assigned responsibility for:

- ensuring WHS requirements are established, implemented and maintained in accordance with AS/NZS 4801; and
- reporting on the performance of the WHS Management System to the Senior Management Team.

4.2 Training and competency

The University has identified the competencies needed to perform required work activities in a safe and healthy manner.

There are procedures in place to ensure that:

- assessment of work activities includes WHS obligations, hazards and risks;
- WHS training needs are identified and take into account:
  - the characteristics and composition of the workforce which impact on work health and safety management, and
  - responsibilities, hazards and risks;
- employees are consulted in the WHS training needs assessment process;
- there is a program for the development and maintenance of competencies;
- all personnel (including contractors and visitors) have undertaken WHS training that is appropriate to identified needs;
• training is carried out by persons with appropriate knowledge, skills, and experience in WHS and training; and
• personnel are assessed as competent on the basis of their skills and knowledge achieved through education, training and experience.

4.3 Consultation, communication and reporting

4.3.1 Consultation

The participation of employees in the Work Health and Safety decision making process is fundamental to the successful implementation and sustainability of the University’s WHS management system.

The consultation process is documented in the WHS Committee Terms of Reference which:

• has been developed through employee consultation;
• is agreed to by workers; and
• is published on the University’s web page and made available to all interested parties.

Workers are involved, either directly in meetings, or through their elected Health and Safety Representatives in:

• the development, implementation and review of hazard and risk related policies and procedures; and
• consultation regarding changes that effect workplace health and safety.

Staff Survey:

• YourVoice@UTAS is conducted across the University and includes a number of safety related questions; and
• results are published and an action plan is developed with responsibilities assigned.

Consultation responsibilities

Health and Safety Representatives (HSRs):

• are nominated, and where required elected, by workgroup employees;
• have their names published on the University’s web page; and
• undertake accredited training where requested.

Managers and supervisors:

• consult with employees at meetings on work health and safety issues;
• consult where changes affecting health and safety are proposed; and
• ensure that work health and safety information is provided to employees.

Issue resolution and consultation

There is a documented process for issue resolution.

• Where a worker identifies a work health and safety issue, it is raised with their immediate manager or supervisor.
• The issue is dealt with as soon as practicable after being reported.
• Where an issue remains unresolved, the next up manager is informed.
• Should an issue still remain unresolved, the respective Health and Safety
Representative is consulted.

- If still unresolved, the issue may be referred to the WHS Committee.

4.3.2 Communication

The University has procedures in place to ensure WHS information is communicated to and from employees and other interested parties.

The procedures include:

- *WHS Committee Terms of Reference*; and
- *WHS incident, accident hazard reporting procedure*.

The following WHS communication strategies are employed by the University:

- WHS Committee agenda and minutes are recorded and an action statement is published on the University’s web page;
- Organisational Unit and other meetings provide a forum to communicate with employees. It is a requirement that:
  - a record is kept of items discussed at the meeting and the employees present;
  - meeting action statements are recorded using a standard form; and
  - issues raised at meetings are followed up by the manager, or referred on to the appropriate person for a response;
- notice boards are used to communicate WHS information;
- web pages are a source of WHS information and are used to communicate important changes that impact on WHS;
- a weekly bulletin News@UTAS is circulated to all staff and contains WHS information where appropriate;
- on-line Incident and Hazard Report forms are used by workers and others to communicate WHS issues; and
- University correspondence (including WHS) is managed using the TRIM record management and workflow system.

4.3.3 Reporting

The University has established procedures for the reporting of WHS information. The purpose of these procedures is to ensure relevant WHS information is reported in a timely manner and performance is monitored and improved.

The reporting related procedures are:

- reports to the meetings of the Work Health and Safety Committee;
- the WHS Report submitted monthly to the Chief Operating Officer (COO) and then to Council;
- regular reports of progress against the measurable objectives established in the *University Work Health and Safety Strategy*;
- *WHS Incident and Hazard Reporting procedure*, which supports reporting of:
  - incidents and system failures;
  - hazard identification and risk assessment;
  - preventive and corrective action; and
Statutory Notification;

- *WHS Committee Terms of Reference*, which supports timely reporting to the WHS Committee, Health & Safety Representatives and employees of incidents, accidents and hazards, and their associated assessments and preventive and corrective actions;

- *WHS Management Review Guideline*, which supports reporting of audits, objective and target, management plan, system implementation and WHS performance;

- *Risk Management Policy*, which supports reporting through Risk Registers; and

- The University’s publication of the Annual Report, which are made available to interested parties on the University’s webpage.

### 4.4 Documentation

The University has established, implemented and maintains information in an electronic form.

The WHS Manual:

- describes, the core elements of the WHS Management System and their interaction; and

- provides direction to related documentation to be found in:
  - Table 1: AS/NZS 4801 Elements and the University’s WHS Management System;
  - the University’s Work Health and Safety web page; and
  - the University’s internet page for publicly available publications.

### 4.5 Document and data control

The University’s Policy and Delegations has established, implemented and maintains a procedure for the control of all documents and relevant data required by the University’s WHS Management System.

Documents are entered to and controlled through TRIM knowledge management software. Controlled documents are published and updated on the University web page.

The *Policy Development and Review Guidelines and Procedure* ensure that WHS documents and data are:

- able to be readily located;
- periodically reviewed as necessary;
- approved for adequacy by competent and responsible personnel;
- available at all essential locations;
- removed from point of issue and assured against unintended use when obsolete;
- identified when required to be retained as archived documents and data, under the records management process;
- legible, dated and maintained in an orderly manner;
- created and modified according to established procedures and responsibilities; and
- precluded from use when obsolete.
4.6 Hazard identification, hazard/risk assessment and control of hazards/risks

4.6.1 General

The University will, as a minimum, comply with the Work Health and Safety Act for identifying hazards and assessing and controlling risks in the workplace. The University has in place a Risk Management Policy to ensure that:

- hazards associated with work processes are identified;
- risk assessments are conducted;
- control measures are implemented; and
- the risk management process is evaluated.

4.6.2 Hazard identification

The University has documented procedures for hazard identification which take into account:

- work situations and activities that have the potential to cause injury or illness;
- the nature of potential illness or injury; and
- the University’s incident, illness and injury history.

In identifying hazards, the University considers:

- work organisation and changes;
- workplace design, processes, materials, plant and equipment;
- fabrication, installation, commissioning, handling and disposal of materials, plant and equipment;
- purchasing of goods and services;
- asset maintenance and renewal through capital works;
- hiring of plant and equipment;
- contracted services and labour; and
- inspection, maintenance, testing, repair and replacement of plant and equipment.

Identified hazards are entered to the University’s Risk Registers. Where required, policies and procedures have been developed to address specific hazards.

4.6.3 Hazard/risk assessment

Identified risks are assessed in accordance with the University’s Risk Management policy and procedure and with reference to AS/NZS ISO 3100 Risk Management – Principles and Guidelines.

Risk assessments are recorded in:

- Risk Registers;
- incident accident reports and investigations;
- audit reports;
- project specific risk assessments;
• Job Safety Analysis (JSA) and Safe Work Method Statements (SWMS);
• hazardous chemical assessments;
• plant and equipment assessments; and
• contract inspections.

The level of risk is established in accordance with the University’s documented risk assessment process.

Priorities are assigned based on the assessed level of risk.

4.6.4 Control of hazards/risks

The Hierarchy of Control is applied when managing the University’s identified WHS risks. This requires adopting the highest ranked control measure that is reasonably practicable and in the following order:

• elimination;
• substitution;
• isolation;
• engineering;
• administrative;
• personal protective equipment; or
• a combination of measures.

Design

• Control measures are identified during the design stage.
• A competent person verifies that designs and modifications meet WHS requirements.

Purchasing

• The University’s purchasing procedure requires that specifications for goods, items of plant and chemicals include the requirement to comply with WHS legislation.
• The procedure also requires that the need for training, Personal Protective Equipment (PPE) and changes to work procedures be considered prior to purchase.

Procedures

• Where work procedures are adopted as controls there is input from relevant workers and competent persons.

High risk tasks

• There is a Permit To Work for high risk tasks including: confined space entry, excavations, hot work, working at height and isolations/lock out tag out.

Personal Protective Equipment (PPE)

• Where PPE is required it is maintained in a serviceable condition, used correctly and provided in conjunction with the necessary training.

Supervision

• Supervisory responsibilities are documented in policies and procedures and position descriptions and are intended to ensure that tasks are
performed safely and that work instructions and procedures are followed.

- Individuals are supervised according to their capabilities and the degree of risk of the task.

**Maintenance**

- There is a scheduled program of maintenance for plant and equipment.
- Maintenance records are kept and include details of inspections, maintenance, repair and alteration of plant.

**Registered Plant**

- Plant requiring registration with WorkSafe Tasmania has been identified and there is a process to ensure registration is maintained.

**Isolation and safeguarding of plant**

- Appropriate controls are used to ensure the safety of persons working on or near plant that is being cleaned, serviced, repaired or altered.
- Responsibility is allocated to verify that plant and equipment is safe after repair or alteration.
- There is a procedure to identify, isolate and withdraw unsafe plant and equipment from service.

**Employee selection and placement**

- The specific requirements and constraints of tasks are identified and applied to personnel selection and placement.
- Tasks are allocated according to employee capability and level of training.
- There is a procedure in place to ensure that where licences and qualifications are required in order to undertake a specific duty, perform work or operate equipment, the relevant licence and qualification has been obtained.

**General Hazards**

- The following general hazards are relevant to the University’s operations and are addressed in the University’s procedures in compliance with the following Sections of the *Work Health and Safety Regulations 2012*:
  - remote or isolated work S.48;
  - airborne contaminants S.49-50;
  - hazardous atmospheres S.51-52;
  - storage of flammable or combustible substances S.53;
  - falling objects S.54-55.

**Hazardous Work**

- The following hazardous work is relevant to the University’s operations and is addressed in the University’s procedures in compliance with the following Sections of the *Work Health and Safety Regulations 2012*:
  - noise S.56-59
  - hazardous manual tasks S60-61;
  - confined spaces S.62-77;
  - falls S. 78-80;
  - high risk work S81-85;
- demolition work S.142-143;
- electrical safety Part 4.7;
- diving work Part 4.8;
- plant and structures Part 5.1;
- construction work Part 6.1;
- hazardous chemicals Part 7.1;
- asbestos Part 8.1;
- major hazard facilities Part 9.1.

4.6.5 Evaluation

Hazard identification, risk assessment and control of risk processes are subject to a documented evaluation of effectiveness and are modified as necessary. This evaluation is carried out in accordance with the University’s Risk Management procedure.

Control measures are reviewed on a regular basis, or when there has been:

- a risk control failure;
- a significant change in a work process; or
- a change in WHS Policy.

Evaluation of risk management process effectiveness is documented in:

- schedule review of procedures;
- incident accident hazard reports and investigations;
- audit reports; and
- Management Review meeting minutes.

4.7 Emergency preparedness and response

The University’s potential emergency situations have been identified and recorded in the Emergency Response Process by Commercial Services and Development (CSD).

An Emergency Procedures Manual has been documented, which aims to mitigate and where practicable eliminate damage, illness and injury that could result from an emergency. Specific emergency situations include:

- armed holdup
- bomb threat
- fire
- infectious disease
- medical emergency
- power failure
- suspicious mail/package
- threatening phone call
- violent/threatening person

Procedures have been developed for the evacuation of staff and students.

The University Emergency Response team is trained in guiding University management
and staff in responding to actual or potential emergencies that could threaten the safety of people or property on campus, or significantly disrupt campus operations.

There is a University Emergency Contacts and Procedures web page, containing relevant emergency information.

The Emergency Procedure requires:

- routine testing of emergency response capability;
- review of the procedure following testing, an incident or an emergency situation;
- allocation of responsibility for the control of emergency situations to trained Emergency Wardens at the University’s major campuses;
- display of emergency instructions, contact details and site plans at prominent locations;
- assessment of emergency equipment for suitability, location and accessibility; and
- maintenance, inspection and testing of emergency equipment at regular intervals.

### 4.8 Health and wellbeing

Proactive health and wellbeing programs are an integral part of supporting a healthy University population. These programs promote the importance in balancing the physical, social and psychological health requirements of staff and students.

The aim is to support proactive health and wellbeing amongst University staff and students. In support of this aim:

- proactive health and wellbeing programs are developed, resourced and implemented;
- participation in University-wide health and wellbeing initiatives is supported; and
- there is a coordinated plan for the identification, implementation and evaluation of health and wellbeing strategies.

### 4.9 Workers Compensation

The University’s aim is to ensure that any staff member on Workers’ Compensation is provided every opportunity for early return to work and a sustainable return to work outcome.

To achieve this:

- managers and injured staff work together to ensure a timely and sustainable return to work;
- local tools to assist with managing return to work are developed and implemented; and
- specific expertise is provided to support return to work of injured staff.
5 MEASUREMENT AND EVALUATION

5.1 Monitoring and measuring

5.1.1 General

The University has in place a process for monitoring and measuring the key characteristics of operations and activities that can cause illness or injury.

The process includes:

- the evaluation of monitoring measures;
- provision and maintenance of appropriate equipment;
- record keeping requirements;
- performance and effectiveness of the WHS system’s operational controls;
- conformance with objectives and targets; and
- compliance with relevant legislation.

5.1.2 Health monitoring

The University has a documented procedure to identify situations where employee health monitoring is required (such as industrial hearing loss) and for the implementation of appropriate surveillance systems (such as audiometric screening). This procedure includes reference to:

- individual employee access to their own results; and
- compliance with legislative requirements.

5.2 Incident investigation, corrective and preventive action

The University has established, implemented and maintains a procedure for:

- investigating, responding to and taking action to minimise any harm caused from incidents;
- investigating and responding to system failures; and
- initiating and completing appropriate corrective and preventive action.

The WHS Unit is responsible for implementing and recording any changes in the WHS Management System procedures that result from incident investigations and corrective and preventive actions.

5.3 Records and records management

The University Records Management Unit has established and implemented a Records Management Policy and Procedure for the identification, maintenance and disposition of WHS records, including the results of audits and reviews. The procedure ensures that WHS records:

- are legible, identifiable and traceable to the activity or service involved;
- are stored electronically (TRIM) and maintained to ensure they are readily retrievable and protected against damage, deterioration or loss;
- have their retention times established and recorded; and
- are maintained in a manner that demonstrates conformance to the requirements of AS/NZS 4801.
5.4 WHS Audit

The objectives of the WHS audit process are to:

- assess the effectiveness and implementation of the University’s work health and safety management system;
- assess and confirm work health safety legal compliance;
- identify opportunities for improvement;
- develop action plans; and
- implement corrective actions and verify completion.

5.4.1 Internal Audit

The Continuous Self-Assessment (CSA) program is currently undertaken under the umbrella of the University’s Core Compliance Audit process as managed by Risk Management & Audit Assurance (RMAA) with the objective to:

"provide management with the means to assess the effectiveness of internal controls in place to manage key risks across core system processes (including financial, student administration, human resources, research and related systems)".

The purpose of the program is to assess the implementation of the University’s WHS management system and to rate system maturity for:

- the University’s Organisational Units (OUs); and
- University-wide.

Under these arrangements, Risk Management and Audit Assurance (RMAA), is responsible for:

- engaging a third party auditor to manage the CSA tool and undertake assessment verification;
- implementing the CSA audit program; and
- submitting reports to the Risk and Audit Committee (RAC).

The WHS Unit is responsible for:

- maintaining the CSA audit program;
- coordinating the training and assignment of internal auditors; and
- submitting reports to the Work Health and Safety Committee.

The Organisational Unit head or delegate is responsible for:

- demonstrating health and safety leadership and commitment through supporting the audit process;
- taking appropriate action to evaluate and address audit findings;
- updating Risk Registers; and
- developing Organisational Unit WHS Action Plans.

5.4.2 Verification audit

A verification process managed by RMAA and undertaken by a third party is aligned with the CSA process to:

- verify the accuracy of CSA assessments and reviews across a sample of Organisational Units; and
- audit one or more elements of the WHS system across selected OUs.
5.4.3 WHS Management System – External audit

The purpose of this external audit is to objectively assess the implementation of the University’s WHS Management System against an external benchmark such as AS/NZS 4801 Occupational health and safety management systems, or other recognised standard to ensure the system:

- conforms to planned arrangements for WHS management, including the requirements of AS/NZS 4801;
- has been properly implemented and maintained; and
- is effective in meeting the University’s WHS Policies and objectives and targets for continual improvement.

The WHS Unit is responsible for:

- implementing an audit schedule of internal and audits to verify WHS System compliance; and
- as directed by the University, managing an external audit process conducted by an approved third-party provider.

5.4.4 Legal Compliance

Under the Work Health and Safety Act 2012 the University’s Officers have a duty to verify the provision and use of the resources and processes employed by the University in meeting its duty as a Person Conducting a Business or Undertaking (PCBU) under the Act.

A legal compliance audit is one means of providing this verification.

Where directed by the University, the WHS Unit is responsible for ensuring:

- a WHS legal compliance audit tool is developed by a competent person;
- a legal compliance audit is undertaken in the event of significant changes to the University’s operations or to WHS legislation; and
- an audit report is provided to the University’s Senior Management Team and other Officers.

5.4.5 Compliance audits

Compliance audits are undertaken in accordance with the conditions of Licences or Permits held by the University, including those for:

- Hazardous Chemical Major Hazard Facility;
- Security-Sensitive Dangerous Substances;
- Scheduled Poisons;
- Radiation sources;
- Nuclear sources;
- Biosafety

5.4.6 Workplace inspections

Scheduled workplace inspections are undertaken in accordance with the University’s Workplace Inspection Procedure.

5.4.7 Audit Program

The WHS Unit is responsible for:
• provision of WHS audit support, including training;
• scheduling of WHS audit programs;
• providing audit reports to the WHS Committee; and
• review and continuous improvement of the WHS audit program;
6 MANAGEMENT REVIEW

The Senior Management Team is responsible for reviewing the WHS Management System at defined intervals to:

• ensure its continuing suitability, adequacy and effectiveness;
• consider the continued relevance of the WHS policies, minimum standards, procedures, objectives and targets, plans and responsibilities; and
• make changes where appropriate in response to audits, changing circumstances and the commitment to continual improvement.

The WHS Unit is responsible for:

• collecting the necessary information to allow the Senior Management Team to carry out the review process, including provision of audit results and advice on changing circumstances;
• organising the review schedule and issuing the meeting agenda; and
• documenting the agenda and minutes for Management Review meetings.
## TABLE 1: AS/NZS 4801 Elements and The University’s WHS Management System

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• Training budget  
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• Training records - MyLO  
• Training files  
• Staff Performance Development and Plan review |
| **4.4.3 Consultation, communication and reporting** | • Work Health Safety Policy  
• Work Health and Safety Responsibilities Minimum Standard  
• WHS Committee Terms of Reference  
• HSR meeting agenda and minutes  
• Health Safety Representative training records  
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| **4.4.3.2 Communication** | • WHS Committee Terms of Reference  
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| **Elements and The University’s WHS Management System**  
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  o Records Management unit  
    o Records Management Policy and Guidelines  
  o Records Management Guideline (Guidance Document for Retention and Disposal of Work Health and Safety Documents) | • WHS intranet webpage  
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| 4.4.6 Hazard identification, hazard/risk assessment and control of hazards/risks | • Risk Management Policy  
  • Risk Management Governance Level Principle GLP2  
  • Risk Matrix  
  • Project and Task WHS Risk Management Procedure | • |
| 4.4.6.1 General | WHS Policies, Minimum Standards and Procedures for hazard identification:  
**Minimum Standards**  
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- Authorised Vehicles Minimum Standard  
- Safe Driving of Vehicles Minimum Standard  
- Field Activity Minimum Standard  
- First Aid the Workplace Minimum Standard  
- Managing Risks of Hazardous Chemicals Minimum Standard  
- Working Safely in | • WHS Risk Register  
• Incident, accident hazard reporting form  
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• Workplace inspections  
• Hazardous chemical assessment forms  
• Plant and equipment assessment forms  
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• Training and licence records (TRIM and MyLO)  
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### AS/NZS 4801

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<td>• Chemwatch registers</td>
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#### 4.4.6.3 Hazard/risk assessment

- **Risk Management Policy**
- **Risk Matrix**

#### 4.4.6.4 Control of hazards/risks

- **Risk Management Policy**

#### 4.4.6.5 Evaluation

- **Risk Management Policy**

#### 4.4.7 Emergency

- **Emergency Response**
- **Emergency site plans**
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**4.5 MEASUREMENT AND EVALUATION**

**4.5.1 Monitoring and measurement**

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