SAFETY MANAGEMENT SYSTEM AUDIT

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1 BACKGROUND INFORMATION

The University’s Safety Management System (SMS) has been developed to ensure a systematic and consistent approach to achieving sustained improvements in safety culture and performance. The Safety Management System is multi-layered and includes policy, management standards, common processes and performance standards for specific areas of operational risk.

The University’s ability to ensure the safety of our community is dependent on effective and ongoing implementation of the Safety Management System at all levels of our organisation.

2 WHY CARRY OUT AUDITING?

Auditing is carried out periodically to verify that the Safety Management System is being implemented throughout our organisation. The process is designed to identify opportunities for improvement and drive sustained improvements in our safety culture and performance.

3 HOW IS THE AUDITING PROGRAM STRUCTURED?

A tiered approach is being applied to auditing. Three (3) different processes will be used to verify implementation at different levels of the organisation. The approach involves due diligence reviews at the most senior levels of the organisation with less frequent and more detailed reviews at operational levels.

**Tier 1 - Portfolio level**
- Vice Chancellor, Provost, Vice Principal Operations and other Deputy Vice Chancellors
- Due diligence review against legislative requirements
- Annual process

**Tier 2 - Faculties & Professional Service Units (PSU)**
- Faculty Deans and PSU Directors (or equivalent)
- Audit against the SMS management standards (high level)
- Frequency dependent on size and risk profile (once every 1-3 years)

**Tier 3 - Schools and Administrative Units**
- Heads of Schools and Administrative Units
- Audit against SMS management standards (detailed review)
- Once every three years
3.1 WHO WILL CONDUCT THE AUDIT?

Safety Health & Wellbeing have engaged Generative HSE Pty Ltd to conduct the auditing in accordance with University requirements. The Generative HSE consultants who will carry out the work have formal auditing qualifications and extensive auditing experience. In addition, the consultants working on this project have been trained in the specific requirements of the University Safety Management System and the University Audit Tools. They will work under the direct supervision of Safety Health & Wellbeing.

Use the links below to view the professional profiles of the auditors.

<table>
<thead>
<tr>
<th>Name</th>
<th>Position</th>
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<tbody>
<tr>
<td>David Porteous</td>
<td>Auditor</td>
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<tr>
<td>Marc McLaren</td>
<td>Auditor</td>
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Generative HSE Pty Ltd

3.2 WHEN WILL THE AUDIT BE CONDUCTED?

Auditing will be conducted over a three year period in accordance with the Audit Schedule.

3.3 HOW WILL IMPLEMENTATION BE VERIFIED?

The University appointed auditor will contact you to arrange an audit interview. During the audit interview, the auditor will seek to verify implementation of the Safety Management System by various means including the demonstration of knowledge and the review of documentation. In addition to the audit interview, Tier 3 audits will include site visits to representative work areas to observe work practices and talk to relevant supervisors and workers.

It is a requirement that the relevant Dean/Director or HOS/HOA attend the audit interview and actively participate in the audit process. Other managers and local safety appointees can also participate and provide support.

You should expect the auditors to be with you for 2-3 hours, including up to 1 hour with the relevant Dean/Director or HOS/HOA.

3.3.1 DEMONSTRATION OF KNOWLEDGE

Depending on your role, you may be asked to explain your:

- Organisational structure
- Operational activities
- WHS responsibilities
- Key health and safety hazards and risks within your area of responsibility
- Local processes and systems to manage safety.
3.3.2 REVIEW OF DOCUMENTATION

You will be asked to provide documented evidence of a range of activities including:

- Active discussion about safety at management and team meetings
- Safety planning
- Consultation and participation
- Workplace inspections
- Risk assessments and safe work procedures (where relevant)
- Training.

Evidence will be accepted in a number of different formats including completed safety documentation e.g. WHS Action Plan, meeting minutes and other general business documents, RiskWare and CareerPath records, email correspondence and diary notes.

3.3.3 WORKPLACE OBSERVATIONS AND SITE VISITS

Auditors will also validate implementation by observing your workplace and work processes, and talking to relevant supervisors and workers.

4 WHAT WILL BE AUDITED?

Senior managers are required to demonstrate due diligence in relation to safety. Faculties, PSUs, schools and administrative units are required to demonstrate implementation of the University’s safety management standards (detailed below).

4.1 DUE DILIGENCE REQUIREMENTS

1. Provide leadership and promote work health and safety
2. Acquire and keep up-to-date knowledge of work health and safety matters
3. Understand the nature of University operations and associated hazards and risks
4. Ensure appropriate resources are allocated and processes established to identify hazards, eliminate or minimise risk and achieve work health and safety compliance
5. Receive and consider information about risks, incidents and hazards, and respond in a timely manner
6. Verify the provision and use of work health and safety resources and processes.

4.2 MANAGEMENT STANDARDS

The safety management standards are drawn from the specific requirements of the Work Health & Safety Procedures 2016. These management standards must be applied by all supervisors at all levels of the organisation.

4.2.1 ACTIVE AND VISIBLE SAFETY LEADERSHIP

Safety leadership is vital to the success of the Safety Management System. In order to meet our safety objectives staff at all levels of the organisation must demonstrate active and visible safety leadership.

Taking time to regularly walk through work areas to observe work practices and talk to workers about safety (e.g. safety conversations) is one way that you can demonstrate active and visible leadership.
4.2.2 SAFETY PLANNING

Safety planning is required at all levels of our organisation. WHS Action Plans must identify the “top 5” WHS issues for the area and include planned actions to eliminate or reduce the risk of injury or illness.

Faculty and PSU safety plans should refer to the University's Safety Health & Wellbeing Strategic Plan 2014-16 and must take account of the local WHS Action plans of subordinate organisational units.

4.2.3 CONSULTATION AND PARTICIPATION

Within the University, the primary medium for consultation on health and safety matters is direct dialogue between supervisors and the workers acting under their instruction. Consultation at this level is fundamental to the successful management of work health and safety risks. You must be able to demonstrate evidence of meaningful and effective WHS consultation.

4.2.4 RISK MANAGEMENT

The University applies a risk based approach to the management of health and safety. This means that priority must be given to high risk activities and high risk groups of people within the University community.

All organisational units are required to apply the University risk management steps to identify WHS hazards and hazardous activities, assign priorities, assess the risks, and eliminate or control the risks in consultation with those involved.

Safe work procedures must be developed and documented for all hazardous activities that require the application of administrative or procedural risk controls.

Regular workplace inspections must be carried out as a systematic way to identify WHS hazards.

4.2.5 TRAINING & INSTRUCTION

The provision of relevant safety information, training and instruction is essential to the success of the Safety Management System. All staff, higher degree research students and affiliated workers must complete the online WHS induction and be provided with a relevant local WHS induction. The need for other specific WHS training (including instruction on safe work procedures), must be identified and assigned to workers.

4.2.6 EMERGENCY MANAGEMENT

All staff must know how to report an emergency and respond to emergency situations, including fire, medical emergencies and personal threats. To facilitate this, local emergency management must be planned for and monitored as a part of the WHS Action Plan.

Building emergency procedures must be kept current and regularly practiced. To support this, heads of faculties, schools, PSUs and administrative units must appoint staff to fill local emergency roles, e.g. chief warden, emergency wardens and first aid officers. Appointed staff must be appropriately trained and allocated adequate time to fulfil their emergency duties.
4.2.7 INCIDENT/HAZARD REPORTING & MANAGEMENT

All incidents, near misses and hazards must be promptly and accurately reported to the supervisor and formally recorded in RiskWare within 24 hours of the incident occurring or a hazard being identified.

Supervisors are required to investigate hazards and incidents and plan action to prevent the reoccurrence of similar incidents in the future. Supervisors are required to submit corrective action plans in RiskWare within 7 days of an incident or hazard being reported. The corrective action plan includes specific tasks, which are assigned to individuals with target completion dates.

4.2.8 SUPPLIERS, CONTRACTORS AND PURCHASING CONTROLS

The safety risks associated with purchased goods and services must be considered. Within reason, attempts must always be made to purchase the safest product or service. Safety should be a mandatory selection criterion in all quotation and tender review processes. Services contractors must be alerted to University hazards and supervised when on-site. Service contracts should include safety performance requirements and performance indicators.

4.3 AUDIT TOOLS

The auditors will use the University audit tools developed by Safety Health & Wellbeing. The audit tools detail specific implementation requirements and provide links to relevant University guidance. Use the links below to view the audit tools.

<table>
<thead>
<tr>
<th>Safety Management System Audit Tools</th>
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<tr>
<td>Tier 1 Due diligence review (Section 4.1)</td>
<td>Vice Chancellor, Provost, Vice Principal (Operations), other DVCs</td>
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<tr>
<td><strong>Tier 2 SMS Audit Tool (participant version)</strong></td>
<td>Faculties and Professional Service Units</td>
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<tr>
<td><strong>Tier 3 SMS Audit Tool (participant version)</strong></td>
<td>Schools and Administrative Units</td>
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You will notice that some implementation requirements listed in the audit tools have been greyed out. These are new requirements. Limited conformance with these is anticipated during the initial round of auditing (2015-16).

5 AUDIT RESULTS

Draft audit results will be provided to you for comment prior to finalisation.

Final audit results will be provided to the relevant Dean/Director and HOS/HOA and summary results provided to SEG Work Health & Safety Committee and the Senate Safety & Risk Management Committee.

6 WHAT HAPPENS AFTER THE AUDIT?

Your WHS Adviser will work with you to identify and agree on appropriate action to fill identified gaps. These will be recorded as tasks in RiskWare. Progress towards the completion of actions will be monitored using your local safety planning processes.
### 7 DOCUMENT CONTROL

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<tr>
<td>Related Documents</td>
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<tr>
<td>WHS_SMS_GUI_1_Safety Management System</td>
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<tr>
<td>WHS_SMS_MTL_1_T2 SMS Audit Tool</td>
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<td>WHS_SMS_MTL_1_T3 SMS Audit Tool</td>
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<tr>
<td>WHS_SMS_MTL_1_Audit Schedule 2015-17</td>
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<th>Date released</th>
<th>Author/s</th>
<th>Custodian</th>
<th>Approved by</th>
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<tr>
<td>1.0</td>
<td>30/07/2015</td>
<td>Matthew Mitchell</td>
<td>Manager, WHS Services</td>
<td>Director, Safety Health &amp; Wellbeing</td>
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