

Auditing Health and Safety Management Systems

4th Edition



SafetyMAP

AUDITING HEALTH AND SAFETY MANAGEMENT SYSTEMS

/th Edition

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PREFACE

Since its introduction in 1994 SafetyMAP has maintained its place at the leading edge of health and safety management systems auditing.

In this 4th edition we have retained the original concepts and style of SafetyMAP, whilst aligning the audit criteria more closely to the format used in Australian Standards such as: AS/NZS 4801:2001, Occupational health and safety management systems - Specification with guidance for use; AS/NZS 4360:1999, Risk management; AS/NZS ISO 9001:2000, Quality management systems - Requirements; and AS/NZS ISO 14001:1996, Environmental management systems - Specification with guidance for use.

Past experience has shown us that the majority of interest is in the SafetyMAP Initial and Advanced Certification Levels. The Transition Level has therefore been removed from this 4th Edition to more closely reflect the preference of the majority of stakeholders. The inclusion of additional criteria at Initial Certification Level is consistent with the concept of continual improvement.

A further change is to the arrangement of elements. The 4th Edition sets out criteria for auditing a health and safety management system under element headings equivalent to the major headings in clause 4 of AS/NZS 4801:2001.

We believe that the changes will make SafetyMAP a better product and more compatible with Australian Standards.

ACKNOWLEDGEMENTS

This document was prepared by the Management Systems Branch of WorkSafe Victoria. Comment and review of the document was sought from a wide spectrum of organizations and individuals. This included employer and employee associations, individuals and organizations who have been successfully using SafetyMAP and health and safety regulatory bodies in Australia. The contributions made by those who reviewed the draft material and provided feedback were invaluable and are much appreciated.



INTRODUCING SafetyMAP

SafetyMAP (Safety Management Achievement Program) is an audit tool that provides the means to undertake an independent audit and review of an organization's health and safety management system. This helps to establish safer working environments that will protect people at work by eliminating, or better managing, health and safety hazards. This is consistent with the requirements of health and safety legislation.

The audit criteria within SafetyMAP enable an organization to:

- measure the performance of its health and safety program;
- implement a cycle of continual improvement;
- compare its health and safety system to a recognized benchmark; and
- gain recognition for the standards achieved by its management of health and safety.

The audit criteria describe features one might observe in a robust health and safety management system. However an organization may not require all of these features to have an effective health and safety management system. The system components should be based on organizational needs, circumstances and risk exposure, not an audit tool.

The audit criteria are set out in Part 2 which also contains introductory and guidance information for each section.

PART 1: SafetyMAP EXPLAINED

THE SafetyMAP **APPROACH**

SafetyMAP provides a set of audit criteria, which can be used to measure current performance and identify those areas where an organization can improve, its health and safety management system. The audit process also helps to determine priorities and to allocate resources in the way that best suits the organization's needs. SafetyMAP is not intended to prescribe how to manage health and safety - it provides a systematic way of measuring how well health and safety is being managed. The design and flexibility of SafetyMAP enables it to be used to audit any health and safety management system.

The use of SafetyMAP is voluntary, and organizations are encouraged to adapt it to their own environment.

Integrating with other systems

SafetyMAP is based on the belief that health and safety management should be included in the way every organization conducts its day to day activities. It is expected, although not mandatory, that the health and safety system is compatible, and preferably integrated, with other management functions such as quality and environmental management systems.

Flexibility

A basic consideration for any organization, large or small, should be the degree of risk associated with its operations. Where the risks to health and safety are greater, there is obviously a requirement for more elaborate and extensive procedures. Smaller organizations often operate under simpler structures, and generally do not need the same degree of complexity as larger organizations, however it is the risk factors that ultimately determine the system requirements. SafetyMAP was designed to be flexible in its application to organizations of differing sizes, management structures and business activities.

SafetvMAP is intended to assist organizations to be more productive and is not intended to burden them with additional paperwork. The type of system, and the level of documentation required,

is determined by the exposure of people to health and safety risks, not the size of the organization.

Recognition, but not a legislative substitute

The SafetyMAP audit criteria are not tied to any specific health and safety legislation or jurisdiction, and can therefore be used throughout Australia and New Zealand, as well as other countries.

Various SafetyMAP criteria refer to the requirements of the relevant health and safety legislation, and conformance to these criteria would indicate that the organization has adopted the management practices needed to fulfil its legal responsibilities. However conformance to SafetyMAP criteria, whether recognised by formal certification or other means, does not assure compliance with statutory obligations nor does it preclude any action by a statutory body.

THE SafetyMAP **PROCESS**

Starting out - conducting a self-assessment

Although all organizations will have introduced some level of health and safety management, it is likely that some matters are better handled than others. Before deciding what needs to change, it is necessary to assess the standard of the system currently in place. This is best achieved by undertaking a critical self-assessment.

One method for conducting this self-assessment is to follow the SafetyMAP Initial Level User Guide. The User Guide provides an explanation of all Initial Level criteria and examples of the types of verification that may be appropriate to demonstrate conformance with those criteria. Organizations moving towards best practice should refer to the SafetyMAP Advanced Level User Guide.

Self-assessment uses internal resources to investigate what procedures are in place, confirm whether they are functioning as planned, and identify areas for improvement. Alternatively, an external consultant could be engaged to provide an assessment of the health and safety management system and recommendations for improvement.



Following the self-assessment, the organization will have a better understanding of the strengths and weaknesses of its health and safety management system and be better prepared for the next step.

There are a range of resources available to assist those organizations starting out on the SafetyMAP journey. Publications and advice can be obtained from organizations listed on the back of this publication.

Continual improvement and self-audit

Once an organization's baseline health and safety performance has been determined using the SafetyMAP User Guide, the process for improvement can begin.

The recommended improvement cycle is shown in Figure 1. The start of the process is the development of a health and safety policy which clearly sets out top management's commitment to health and safety. From this, a plan is developed to ensure that hazards arising from work activities are identified so that risks can be assessed and then controlled. Implementation of the plan is the next component of the process, followed by ways to measure and evaluate the risk controls to determine their effectiveness. Finally performance of the entire health and safety management system is monitored and reviewed to determine if it is achieving the desired results. However this is not the end of the process, because the policy, planning and implementation have to be reviewed and improved in light of the results from measurement, evaluation and reviews. This structured approach to the management of health and safety leads to a continual improvement cycle that ensures risks are fully assessed and controlled.

SafetyMAP is based on this continual improvement cycle where an organization clearly sets out its overall health and safety policy, and a plan for improvement that includes realistic, achievable goals and timeframes. When it identifies a health and safety problem, it makes the necessary changes and then reviews progress. As new procedures are added, they are incorporated into the evaluation and review cycle. Organizations are able to move through this process at their own pace and there are no set timeframes.

The self-audit process should focus on improvement. For those organizations that wish to introduce an internal audit process, some hints for effective internal auditing are included on page 8.

To receive formal acknowledgment and recognition for its health and safety management system, an organization may choose to apply for SafetyMAP Certification.

Fig 1. Typical health and safety management model



PART 1: SafetyMAP EXPLAINED

Certification

To gain a SafetyMAP Certificate, organizations must be able to demonstrate to independent auditors that they have effective health and safety procedures that conform to the SafetyMAP audit criteria.

Only organizations accredited by the Joint Accreditation System - Australia and New Zealand (JAS-ANZ) may conduct SafetyMAP certification audits and award SafetyMAP Certificates. JAS-ANZ maintains a list of the accredited Certification Bodies and WorkSafe Victoria can also provide this information.

Certification is available at either Initial Level or Advanced Level and it should be noted that the decision to apply for Certification is entirely voluntary.

Initial Level Certification requires an organization to satisfy the requirements of 82 SafetyMAP audit criteria. These criteria have been selected as encompassing the building blocks for an effective, integrated health and safety management system that is also capable of meeting legislative requirements. Success at Initial Level is a significant milestone that should be seen as a foundation for further improvement.

Advanced Level Certification requires all 125 applicable SafetyMAP audit criteria to be in place. Organizations operating at this level will possess the systems and processes to enable them to maintain their health and safety systems at 'best practice'. They will be deriving maximum benefit from their health and safety management system and will have reached a level of excellence that others acknowledge and respect.

The criteria used for auditing each Certification Level are listed on page 10.

SafetyMAP Certification provides the following benefits:

(i) Cost efficiencies

A health and safety management system that is functioning effectively will help to deliver longterm cost efficiencies through the prevention of work related injury and illness, better industrial relations and ideas for improved performance.

(ii) Performance verification

A SafetyMAP Certificate provides independent verification that the organization's health and safety management system is functioning as designed and is effective.

(iii) Public relations

As a public demonstration of health and safety commitment, organizations may advertise SafetyMAP Certification to customers, suppliers and members of the public by displaying the SafetyMAP logo.

(iv) Due diligence

A SafetyMAP Certificate demonstrates that the organization has the capacity to manage its health and safety responsibilities and is doing so effectively.

(v) Competitive advantage

A SafetyMAP Certificate is independent recognition of the attainment of health and safety standards often required as part of quality controlled tendering processes.



Documentation required

Complex documentation may not be required to demonstrate conformance to SafetyMAP audit criteria. However objective evidence is needed to verify the presence and effectiveness of procedures. In some circumstances, observation and discussion may provide a sufficient level of evidence.

There is further information about objective evidence on page 9.

Applying for a SafetyMAP certificate

An organization should only apply for a SafetyMAP Certificate when it is confident that it can provide evidence that its health and safety management system conforms to the audit criteria prescribed for the particular level.

The Certification process requires the organization to submit its health and safety management system to independent audit. The audit will determine whether the management system incorporates all aspects of health and safety covered by the SafetyMAP audit criteria and that health and safety is effectively managed within all areas of the organization covered by the audit.

PART 1: SafetyMAP EXPLAINED

A GUIDE TO **INTERNAL AUDITING**

A health and safety management system audit is a 'systematic examination to determine whether health and safety activities and related results comply with planned arrangements'. It should evaluate whether these arrangements are implemented and will effectively achieve the organization's objectives.

The audits should identify procedures that are not fully effective and provide information that will assist the organization to improve.

The scope of the audit will vary according to the needs of the organization. Organizations may choose to focus their audits on critical areas, or they may do regular audits of the entire management system.

Audits are not routine inspections

An audit program should be seen as separate from a workplace inspection program. Inspections are conducted more regularly to detect hazards in the workplace and to check how well risk controls are working for particular activities, processes or areas. Audits look at the procedures that generate those outcomes, rather than the individual deficiencies and failures identified by inspections.

Limitations

Audits provide a 'snapshot' of the health and safety management system under review. The effectiveness of audits is dependent on factors such as:

- audit process;
- cooperation and openness of the individuals being audited;
- competency of the auditors; and
- the audit standard.

Audits must measure management commitment and support

The success or failure of the health and safety management system hinges on the support given to the process by top management. Audits should look at how management commitment is being demonstrated.

Audits are not designed to assess the performance of individuals

Audits of management systems should be designed to assess the performance of the procedures in place, not of individuals working with those procedures.

Auditors

Auditors should meet the following criteria:

- they are not directly involved with the development or management of the area or systems under review;
- they have undergone relevant training in the conduct of audits;
- they are familiar with the processes under review (or have access to persons with this expertise) and are therefore capable of selecting appropriate subjects for analysis;
- they are capable of carrying out an objective review, and of reporting findings accurately and without fear of the consequences;
- they have written and verbal communication skills suitable for interacting with employees and management; and
- they have sufficient knowledge and training in health and safety management.

Training in the techniques of auditing is clearly desirable. There are training courses available which are specifically designed for health and safety auditors.

Audit Standard

The audit standard is the document that describes the desired outcomes or criteria against which the organization will measure itself. The requirements of the criteria must be relevant and apply to the organization in order for them to be included in the audit.

The organization may design its own audit standard or use a standard that is publicly available (such as SafetyMAP and AS/NZS 4801:2001). The advantages of using a public standard include the ability to benchmark health and safety management performance against other organizations and obtain certification. Ideally, the organization will design and use an internal



audit standard that suits their management system, operations and risk exposures, and check their progress at intervals by auditing against an accepted standard, whether or not they are seeking certification.

SafetyMAP offers a staged audit approach. This means that organizations that are at an earlier stage of system development also have the opportunity for benchmarking and certification at the SafetyMAP Initial Level.

Audits generate information for management action

The ultimate purpose of audits is to provide management with fact-based information that can be used to review health and safety management system effectiveness and plan change to ensure continual system improvements. The information generated through an audit will provide evidence of conformance or nonconformance with audit criteria. It is not designed to provide detailed solutions to any identified problems.

Objective evidence

Like any investigation, an auditor needs to gather sufficient evidence to make decisions about the status of the health and safety management system.

The gathering of evidence should include:

- an examination of any documents that describe the system or process;
- records that confirm that the system is followed as described in the written documents;
- interviews with personnel which explore whether activities match the documented requirements, and whether there are any opportunities for improvement; and
- actual observations of the workplace.

In other words, an audit should go beyond the 'paper trail' to establish the level of implementation within the workplace and whether the system contributes to improvement in health and safety performance. Evaluation of this evidence should enable the auditor(s) to determine whether there is 'conformance' or 'nonconformance' with the audit criteria.

The audit report

An audit report should contain information about the evidence that contributed to the auditor's judgement of conformance or nonconformance. The audit report should include opportunities for improvement where identified. It is a management responsibility to decide what changes are required as a result of an audit and to initiate actions to improve performance.

The audit program

It is important that the audit program positively contributes to continual system improvement.

Audits need to be repeated at intervals which:

- will allow timely follow-up of areas where remedial action has been taken; and
- sufficiently cover critical areas.

The health and safety planning process needs to consider the frequency of audits and which areas will receive the greatest attention.

PART 1: SafetyMAP EXPLAINED

SafetyMAP CERTIFICATION LEVELS

	ELEMENT	INITIAL	LEVEL			CED LEV	
1.	Health and safety policy	1.1.1			1.1.2,	1.1.3	
2.	Planning						
2.1	Legal requirements and practical guidance	2.1.1, 2.1.4,	2.1.2, 2.1.5	2.1.3,			
2.2	Objectives and targets	2.2.1			2.2.2,	2.2.3	
2.3	Health and safety management plans	2.3.1,	2.3.2,	2.3.3	2.3.4		
3.	Implementation						
3.1	Structure and responsibility - Resources	3.1.1,	3.1.2,	3.1.3			
3.2	Structure and responsibility - Responsibility and accountability	3.2.1,	3.2.3,	3.2.4	3.2.2,	3.2.5	
3.3	Structure and responsibility - Training and competency	3.3.2, 3.3.6,	3.3.3, 3.3.9,	3.3.5, 3.3.10	3.3.1, 3.3.8,	3.3.4, 3.3.11,	3.3.7, 3.3.12
3.4	Consultation, communication and reporting - Consultation	3.4.1, 3.4.4, 3.4.7	3.4.2, 3.4.5,	3.4.3, 3.4.6			
3.5	Consultation, communication and reporting - Communication	3.5.1,	3.5.2		3.5.3,	3.5.4	
3.6	Consultation, communication and reporting - Reporting	3.6.1,	3.6.2,	3.6.3	3.6.4, 3.6.7	3.6.5,	3.6.6,
3.7	Documentation	3.7.1			3.7.2		
3.8	Document and data control	3.8.2,	3.8.3		3.8.1,	3.8.4,	3.8.5
3.9	Hazard identification, risk assessment and control of risks - General	3.9.1, 3.9.4	3.9.2,	3.9.3,	3.9.5,	3.9.6,	3.9.7
3.10	Hazard identification, risk assessment and control of risks - Specific	3.10.1, 3.10.7, 3.10.11, 3.10.14, 3.10.17, 3.10.21, 3.10.25,	3.10.15, 3.10.18, 3.10.22,	3.10.16, 3.10.19, 3.10.23,	3.10.3, 3.10.9, 3.10.27,	3.10.4, 3.10.20, 3.10.28	3.10.6, 3.10.24,
3.11	Emergency preparedness and response	3.11.1, 3.11.4, 3.11.7	3.11.2, 3.11.5,	3.11.3, 3.11.6,	3.11.8		
4.	Measurement and evaluation						
4.1	Monitoring and measurement - General	4.1.1, 4.1.4,	4.1.2, 4.1.5,	4.1.3, 4.1.6			
4.2	Monitoring and measurement - Health surveillance	4.2.1			4.2.2		
4.3	Incident investigation and corrective action	4.3.1,	4.3.2,	4.3.3	4.3.4		
4.4	Records and records management	4.4.1					
4.5	Health and safety management system audit				4.5.1, 4.5.4,	4.5.2, 4.5.5	4.5.3,
5.	Management review	5.1.1,	5.1.3		5.1.2		
	Total criteria in each certification level	82			82 + 43	= 125	



DEFINITIONS

Audit

A systematic and independent examination against defined criteria to determine whether health and safety activities and related results comply with planned arrangements, whether these arrangements are implemented effectively and whether they are suitable to achieve the organization's policy and objectives.

Audit report

A written record of the audit, which accurately and concisely documents the objective evidence and clearly communicates the findings of the auditor(s) for each of the criteria included in the audit.

Competent person

A person who has acquired through training, qualifications or experience, or a combination of these, the knowledge and skills enabling that person to perform the task required.

Conformance

A judgment made by an auditor that the activities undertaken and the results achieved fulfil the specified requirements of the SafetyMAP audit criteria. While further improvements may still be possible, the minimum requirements are being met.

Customer-supplied goods and services

Customer-supplied goods and services are those which are supplied to the organization by a customer. The organization then performs work on that product or uses that service as part of another task.

Dispute

A dispute may arise in relation to:

- the identification of a workplace hazard;
- the assessment of the level of risk of a workplace hazard;
- control of a workplace hazard;
- statutory duty; or
- workplace changes.

A dispute means a difference of opinion between two or more parties on a health and safety issue and which remains unresolved.

Employees

The term 'employees' covers all those who work for the organization, including casuals, part-time workers and long-term contractors.

Facilities

Facilities refer to washrooms, showers, lockers, dining areas, drinking water, etc. There may be specific legislative requirements and details in building regulations and codes.

Hazard

A source or a situation with a potential for harm in terms of injury or illness, damage to property, damage to the environment, or a combination of these.

Hazard identification

The process of recognizing that a hazard exists and defining its characteristics.

Hazardous substance

Substances that have the potential to harm human health. They may be solids, liquids or gases; they may be pure substances or mixtures. When used in the workplace, these substances often generate vapours, fumes, dusts and mists. Where there are legislative references to hazardous substances the definition may vary from the definition given here.

Health and safety management system

That part of the overall management system includes organizational structure, planning activities, responsibilities, practices, procedures, processes, and resources for developing, implementing, achieving, reviewing and maintaining the health and safety policy, and so managing the health and safety risks associated with the business of the organization.

Health and safety policy

Statement by the organization of its intentions and principles in relation to its overall health and safety performance which provides a framework for action and for the setting of its health and safety objectives and targets.

PART 1: SafetyMAP EXPLAINED

DEFINITIONS

Hierarchy of controls

Hazard control or risk reduction whereby options are considered in the following order (from most to least preferred):

- 1. elimination:
- 2. substitution;
- 3. engineering controls;
- 4. administrative controls; and

5. personal protective equipment and clothing. Variations to this hierarchy to meet local legislative or other requirements are acceptable where the variations do not alter the intent of the hierarchy.

Incident

An unplanned event resulting in, or having the potential for injury, ill health, damage or other loss.

Interested parties

Interested parties, may, depending on circumstances, include health and safety representatives, health and safety committees, contractors, regulatory authorities, community groups, non-government organizations, special interest groups and others.

Nonconformance

A judgment made by an auditor that the activities undertaken and the results achieved do not fulfil the specified requirements of the SafetyMAP audit criterion. This may be caused by the absence or inadequate implementation of a system or part of a system, documented systems or procedures not being followed or a minor or isolated lapse in a system or procedure.

Organization

Company, corporation, firm, enterprise or institution, or other legal entity or part thereof, whether incorporated or not, public or private, that has its own function(s) and administration.

Personnel

A broad term that includes employees, contractors, and non-employees such as unpaid work-experience staff and visitors.

Positive performance indicators

Indicators, based on inputs into the health and safety management system, used to measure

the performance of the system. These are called positive performance indicators as they relate to actions taken to prevent injury and illness. Examples of positive performance indicators are number of audits conducted, number of inspections conducted and percentage of job descriptions incorporating health and safety requirements.

Procedure

A document in text or graphic format that describes the reason, scope, steps to be followed and responsibilities for a component of the health and safety management system. It may also include definitions and references to other documents.

Process

A set of inter-related resources and activities that transform inputs into outputs.

Document that furnishes objective evidence of activities performed or results achieved.

Resources include financial (e.g. money and time), physical (e.g. equipment, reference library) and human resources (e.g. health and safety coordinator, health and safety representative, health and safety consultant).

Risk

The combination of the frequency, or probability of occurrence, and consequence of a specified hazardous event.

Risk assessment

The overall process of estimating the magnitude of risk and deciding whether the risk is tolerable.

SafetyMAP certificate

A certificate issued by an accredited body which recognizes that an organization has fully satisfied the requirements of a SafetyMAP certification audit.

Top management

May consist of an individual, or a group of individuals, with executive responsibility for the organization.

Verification

Confirmation by examination and provision of objective evidence that the specified requirements of the SafetyMAP audit criterion has been met.



The following section contains the SafetyMAP audit criteria and guidance material that will enable users to undertake an audit of a health and safety management system. The format of these pages is explained in the example below:

Element 2: Planning

2.1 Legal requirements and practical guidance

There are legal requirements which directly apply to certain activities, products or services of organizations. Sometimes additional practical guidance is made available in the form of codes of practice or published standards. In some cases, there are also industry agreements or exemptions which must be considered. It is vital that each organization knows which are applicable, and how their contents affects that organization. The legal requirements may relate to employees, contractors and suppliers...

← Element number and title

← Sub-element number and title

← Guidance and explanation for elements or sub-element. Information in this area does not form part of the auditable criteria.

→ Criteria number

Audit criteria numbered in **Blue** are Initial Level.

Those numbered in **Black** are Advanced Level.

- 2.1.1 The organization identifies and monitors the content of all health and safety legislation, standards, codes of practice, agreements and guidelines relevant to its operation.
- 2.1.2 The organization's procedures, work instructions and work practices reflect the requirements of current health and safety legislation, standards, codes of practice, agreements and guidelines.
- 2.1.3 All personnel in the organization are advised of, and have ready access to, current health and safety legislation, standards, codes of practice, agreements and guidelines.

← Audit criteria

Conformance with all applicable criteria is required to achieve either Initial or Advanced Level.

Element 1: Health and safety policy

The health and safety policy is an important part of the organization's health and safety management system. The policy is a general plan of intent and objectives deliberately chosen by top management which guides or influences future decisions. The policy is the basis upon which measurable health and safety objectives and targets and health and safety management system components are developed. The policy should be consistent with the nature and scale of workplace risks. The policy should be known by employees and interested parties. The policy should be periodically reviewed and revised to reflect changing conditions and information. Its scope should be clearly identifiable.

The policy should be signed or endorsed by top management of the site as an indication of their commitment to health and safety. Top management may consist of an individual, or a group of individuals, with executive responsibility for the organization.

- 1.1.1 There is a documented health and safety policy, authorized by the organization's top management that:
 - a) requires compliance with relevant health and safety legislation;
 - b) is appropriate to the nature and scale of the organization's health and safety risks;
 - c) states overall health and safety objectives; and
 - d) demonstrates a commitment to the continued improvement of health and safety performance.
- 1.1.2 The health and safety policy is available to other parties, including regulatory authorities, suppliers, contractors, customers and those visiting the workplace.
- 1.1.3 The health and safety policy is maintained and reviewed periodically to ensure it remains relevant and appropriate to the organization's health and safety risks.



Element 2: Planning

2.1 Legal requirements and practical quidance

There are legal requirements which directly apply to certain activities, products or services of organizations. Sometimes additional practical guidance is made available in the form of codes of practice or published standards. In some cases, there are also industry agreements or exemptions which must be considered. It is vital that each organization knows which are applicable, and how their content affects that organization. The legal requirements may relate to employees, contractors and suppliers. There may be a need for the organization to obtain or organize individual licences, certificates of competency, registration or approvals. In some cases, the organization is also required to submit or notify particular information to public authorities.

It is important also for the personnel in the organization to know and have access to the relevant information, and for it to be incorporated into the documents that describe how employees are to perform their work.

As these requirements change, so the organization needs to keep abreast of the changes and make the necessary adjustments.

[Note: 'Legal requirements' may refer to actual legislation, and to certain agreements with authorities and interested parties. 'Practical guidance' includes codes of practice, standards, guidelines and industry practices.]

- 2.1.1 The organization identifies and monitors the content of all health and safety legislation, standards, codes of practice, agreements and guidelines relevant to its operation.
- 2.1.2 The organization's procedures, work instructions and work practices reflect the requirements of current health and safety legislation, standards, codes of practice, agreements and guidelines.
- 2.1.3 All personnel in the organization are advised of, and have ready access to, current health and safety legislation, standards, codes of practice, agreements and guidlines.
- 2.1.4 The organization and/or individual satisfies legal requirements to undertake specific activities, perform work or operate equipment including any:
 - a) licence:
 - b) certificate of competency;
 - c) notification:
 - d) registration; and/or
 - e) approval.
- 2.1.5 Changes to health and safety legislation, standards, codes of practice, agreements and guidelines generate a review of existing procedures.

2.2 Objectives and targets

It is important to establish and document specific objectives that will enable the organization to realize the intentions of the health and safety policy. Measurable targets should be set for each objective. Once objectives and targets are set, measurable performance indicators consistent with the objectives and targets should be established and used. These indicators are useful for evaluating the performance of the health and safety management system.

- 2.2.1 Health and safety objectives and targets consistent with the organization's health and safety policy are documented, are appropriate to the organization's activities and consider:
 - a) legal requirements;
 - b) standards and codes;
 - c) health and safety hazards and risks;
 - d) available technology;
 - e) agreements and guidelines;
 - f) operational requirements; and
 - g) the views of interested parties.
- 2.2.2 Specific health and safety objectives and measurable targets have been established for all relevant functions and levels within the organization.
- 2.2.3 The organization sets health and safety performance indicators that:
 - a) are consistent with its objectives and targets;
 - b) include actions taken to prevent injury and illness; and
 - c) meet legislative obligations.



2.3 Health and safety management plans

Successful implementation and operation of a health and safety management system requires the establishment and use of a documented plan. The plan should be appropriate to the scale of the organization and take into account the organization's policies, objectives and targets, activities, processes, products and services.

The plan should include details on how targets will be achieved, time-scales and who is responsible for actions within the plan. The plan should also be monitored and reviewed. In developing the plan consideration should be given to all current and proposed activities, processes, products and services of the organization. Consideration should also be given to normal and abnormal operations within the organization as well as potential emergency conditions.

It is essential that the plan documents the methodology for reducing health and safety risks through hazard identification, risk assessment and development of risk control measures. The methodology should aim to accurately identify health and safety hazards and assess the risks, taking into account the nature of their current and proposed activities, processes, products and services.

The methodology should be based on regulatory requirements or directives and take into account relevant codes of practice, standards and guidance documents. The methodology should identify persons responsible and accountable for hazard identification, risk assessment, development of risk control measures and review activities as well as the frequency of these activities. Organizations may also need to take into account the degree of practical control they have over the health and safety hazards or risks being considered.

- 2.3.1 There is a health and safety management plan that defines the means by which the organization will achieve its objectives and targets and meet its legal requirements. The plan:
 - a) applies to all activities undertaken or proposed to be undertaken by the organization;
 - b) is based on an analysis of information relevant to the nature of the organization's activities, processes, products or services;
 - c) aims to eliminate or reduce workplace illness and injury;
 - d) defines the organization's priorities;
 - e) sets timeframes;
 - f) allocates responsibility for achieving objectives and targets to relevant functional levels; and
 - q) states how the plan will be monitored.
- 2.3.2 The organization documents its methodology to reduce health and safety risks through hazard identification, risk assessment and development of risk control measures in accordance with the 'hierarchy of controls' and legal requirements.
- 2.3.3 The organization monitors its progress towards meeting the objectives and targets set in the health and safety plan and takes corrective actions to ensure progress is maintained.
- 2.3.4 Health and safety plans are reviewed on a regular basis, to ensure they are kept upto-date, and when there are changes to the organization's activities, processes, products or services.

Element 3: Implementation

3.1 Structure and responsibility

- Resources

Provision of resources is a key component of a successful health and safety management system. Commitment from top management to provide sufficient resources to meet the health and safety policies and plans of the organization is essential.

Resources include financial (e.g. money and time), physical (e.g. equipment, reference library) and human resources (e.g. health and safety co-ordinator, health and safety representative, health and safety consultant).

- 3.1.1 Financial and physical resources have been identified and allocated to enable the effective implementation of the organization's health and safety plan(s).
- 3.1.2 There are sufficient qualified and competent people to implement the organization's health and safety plan(s).
- 3.1.3 Those who represent employees on health and safety matters are provided with time and resources to effectively undertake this role.

3.2 Structure and responsibility

- Responsibility and accountability

Top management are responsible for the standard of health and safety management in their organization, and for ensuring health and safety legal obligations are met. They should therefore have an understanding of the health and safety legal obligations applicable to their organization.

Specific responsibilities for managing health and safety throughout the organization should be allocated (e.g. responsibilities for conducting risk assessments, undertaking incident investigations, etc.). This applies to all levels of the organization, including a top manager to implement and maintain the safety management system. There should be monitoring of the performance of personnel against their allocated health and safety responsibilities.

- 3.2.1 Top management can demonstrate an understanding of the organization's legal obligations for health and safety.
- 3.2.2 A member of the executive or board has been allocated overall responsibility for the health and safety management system and reports to that group on its performance.
- 3.2.3 The specific health and safety responsibilities [including legal obligations], authority to act and reporting relationships of all levels in the organization have been defined, documented and communicated.
- 3.2.4 Where contractors are utilized in the organization, the health and safety responsibilities and accountabilities of the organization and the contractor(s) have been clearly defined, allocated and communicated within the organization and to the contractor(s) and their employees.
- 3.2.5 Personnel are held accountable for health and safety performance in accordance with their defined responsibilities.



3.3 Structure and responsibility

- Training and competency

Specific requirements of tasks need to be identified to ensure that the persons recruited or utilised for these tasks are able to fulfil these requirements. The organization needs to establish, implement and maintain procedures for identifying and reviewing health and safety training needs. Management are responsible for determining the level of experience, competence and training necessary to ensure the capability of personnel and appropriate allocation of tasks. Employee participation in the process helps to clarify needs and encourages ownership. Training includes induction and refresher training.

Personnel is a broad term that includes employees, contractors, and nonemployees such as unpaid work-experience staff and visitors. Health and safety competencies could be developed in different ways including using existing industry competency standards.

- 3.3.1 The specific requirements of tasks, including medical constraints, are identified and applied to the recruitment and placement of personnel.
- 3.3.2 The organization has established and implemented procedures for the identification of health and safety training needs for all personnel (including any prescribed by legislation).
- 3.3.3 The organization has an induction program for all personnel including management, which is based on their likely risk exposure, and provides relevant instruction in the organization's health and safety policy and procedures.

- 3.3.4 The organization consults with employees to identify their training needs in relation to performing their work activities safely.
- 3.3.5 The organization trains employees to perform their work safely, and verifies their understanding of that training.
- 3.3.6 Training is delivered by persons with appropriate knowledge, skills and experience.
- 3.3.7 Tasks are allocated according to the capability and level of training of personnel.
- 3.3.8 There is a documented competency based training program that provides employees (and volunteers) with the skills to perform their work activities safely.
- 3.3.9 Management has received training in health and safety management principles and practices appropriate to their role and responsibilities within the organization, and the relevant health and safety legislation.
- 3.3.10 Those representing the employer and the employees on health and safety matters, including representatives on consultative committee(s), receive appropriate training to enable them to undertake their duties effectively.
- **3.3.11** Refresher training (as required) is provided to all personnel to enable them to perform their tasks safely.
- **3.3.12** The training program is reviewed on a regular basis, and when there are changes to plant or processes in the workplace, to ensure that the skills and competencies of personnel remain relevant.

3.4 Consultation, communication and reporting - Consultation

The participation of employees and their input to the health and safety decision making process is fundamental to the successful implementation and sustainability of an effective health and safety management system.

All employees should be encouraged to contribute to health and safety activities related to their work. Employee involvement in the hazard identification, risk assessment and risk control process is essential for effective management of health and safety risk. Employees also need to be involved when changes are proposed in their work areas, including discussions and trials of new equipment and other purchases.

Employee health and safety representatives are selected or elected by employees. Representation should cover as many situations as are appropriate to the size of the organization, e.g. representatives for workers on different shifts, at different work sites and having different work descriptions. All employees should know their relevant health and safety representative.

An active consultation process shows the workforce that the organization is committed to achieving the aims of the health and safety policy.

- 3.4.1 There are documented procedures, agreed to by employees, for employee involvement and consultation on health and safety matters, including a procedure for dealing with health and safety issues, and resolving disputes if they arise.
- 3.4.2 The organization, in consultation with employees, has determined the number of employee representatives required to effectively represent all employee work groups.
- 3.4.3 The consultative arrangements allow the employees to select those who will represent them on health and safety matters.
- 3.4.4 Details of the consultative arrangements, including the names of their employee and employer representatives for health and safety matters, are communicated to employees.
- 3.4.5 Employees or their representatives are involved in the development, implementation and review of procedures for the identification of hazards and the assessment and control of risks.
- 3.4.6 Employees or their representatives are consulted regarding proposed changes to the work environment, processes or practices and purchasing decisions that could affect their health and safety.
- 3.4.7 Health and safety consultative committees meet regularly and minutes of meetings are available to all employees.



3.5 Consultation, communication and reporting - Communication

Effective communication relies on regular exchange of information with key parties. As well as promoting the health and safety policy, an organization needs to let employees (and others) know how it is responding to their issues and concerns. Collection of ideas, feedback and complaints allows the organization to identify opportunities for improvement and to take preventive action before situations get out of control.

To minimise hazards, relevant health and safety information is sought from suppliers, and customers are provided with the necessary information to safely use the organization's products or services.

- 3.5.1 The organization's health and safety policy and other relevant information on health and safety are communicated to all employees, and consider language and standards of literacy.
- 3.5.2 The organization regularly communicates to employees the progress towards the resolution of heath and safety disputes.
- 3.5.3 There are procedures for the acquisition, provision and exchange of relevant health and safety information with external parties, including customers, suppliers, contractors and relevant public authorities.
- 3.5.4 There is a documented health and safety complaints procedure that deals with formal and informal complaints received from external parties.

3.6 Consultation, communication and reporting - Reporting

Timely and accurate reporting aids communication, allows for prompt intervention into health and safety issues, and helps the organization meet its deadlines.

- 3.6.1 Health and safety hazards and systems failures are reported and recorded.
- 3.6.2 Workplace injuries, illnesses, incidents and dangerous occurrences are reported and recorded.
- 3.6.3 Where there is a legislative requirement, injuries, illnesses, incidents and dangerous occurrences are notified to the appropriate authorities.
- 3.6.4 Reports on health and safety inspections, including recommendations for corrective action, are produced and forwarded to top management and consultative committee(s) as appropriate.
- 3.6.5 Regular, timely reports on health and safety performance are produced and distributed within the organization.
- 3.6.6 Reports of audits and reviews of the health and safety system are produced and distributed to management, employees and other interested parties.
- 3.6.7 The organization's annual report or an equivalent document includes information about health and safety performance.

3.7 Documentation

When information is important it needs to be recorded so that everyone receives the same message and understands the required standard of performance.

The organization therefore needs to decide how and what parts of the health and safety management system need to be documented for consistent application of health and safety standards. The content, format and extent of the documentation will depend on the complexity of the organization's operations and the needs of the target audience. All documentation should be in a language, style and format which users easily understand.

It is particularly important that the documentation is methodically prepared and maintained, readily recognisable and available. Clear direction to any essential data or other information must be provided to ensure correct interpretation or application of procedures.

- 3.7.1 The organization's health and safety policy, plans and procedures are documented in a planned and organized manner.
- 3.7.2 Specific instructions associated with particular products, processes, projects or sites have been developed where appropriate.

3.8 Document and data control

Organizations need to ensure that documents are up-to-date, authorised, available to those who need them and easily recognised as current versions.

The control of documents and essential data should be as simple as is needed for management and improvement of the health and safety management system. The focus should not be on establishing complex document control systems.

- 3.8.1 The organization has a system for creating, modifying and approving health and safety documents and data, and notifying relevant persons of any changes.
- 3.8.2 Documents and data critical to health and safety shall be clearly identifiable, duly authorized prior to issue, kept legible and include their issue status.
- 3.8.3 The organization provides personnel with ready access to relevant health and safety documents and data and advises them of its availability.
- 3.8.4 Documents and data are regularly reviewed by competent persons to ensure that the information is current.
- 3.8.5 Obsolete documents and data are identified and retained (where required) for legal and/or knowledge preservation purposes and are removed from all points to prevent unintended use.



3.9 Hazard identification, risk assessment and control of risks - General

Management needs to ensure that the existing and potential hazards associated with the organization's activities, processes, products or services are identified so that the subsequent risk exposures can be assessed and suitable control measures introduced.

The identification of hazards in the workplace should consider:

- a) legislative requirements, relevant codes of practice, standards and other quidance
- b) the circumstances or conditions which have the potential to cause injury, illness or property damage;
- c) the types of injury, illnesses and property damage likely to occur; and
- d) past injuries, incidents and illnesses.

In identifying hazards, the organization should consider whether staffing levels, locations, pressure of work, working hours and the level of skill required affect the employees' ability to safely perform work. The organization also needs to examine whether hazards arise at peak times or under other foreseeable operating conditions.

Risk assessment is the process whereby each hazard is examined to evaluate the probability and potential consequences that could arise from that hazard being present at the workplace. Consequences may include injury, illness and disease and/or fire, explosion and property damage. The risk assessment will determine what hazards need to be controlled. This information is important when developing objectives and targets, health and safety management plans, training and competency, consultation, communication and for development of specific hazard controls.

At intervals, the organization needs to check whether their risk management methodology is meeting their planned expectations.

- 3.9.1 Hazards, including public safety hazards, associated with the organization's activities, processes, products or services are identified, risks assessed and control measures implemented. This includes the identification of hazards associated with:
 - a) violence, harassment and workplace stress:
 - b) hazardous substances and dangerous goods;
 - c) manual handling;
 - d) plant and the associated systems
 - e) the work environment; and f) work at heights.
- 3.9.2 The hazard identification, risk assessment and risk control process is undertaken by personnel competent in the use of the organization's methodology.
- 3.9.3 The organization documents all identified hazards, risk assessments and risk control plans.
- 3.9.4 Risks of identified hazards are assessed having regard to the likelihood and consequence of injury, illness or incident occurring, based upon the:
 - a) evaluation of available information: b) records of incidents, illness and disease: and
 - c) the potential for emergency situations.
- 3.9.5 Health and safety hazards are assigned risk control priorities, having regard to the identified levels of risk.
- 3.9.6 The effectiveness of the hazard identification, risk assessment and risk control process is periodically reviewed and documented.
- 3.9.7 The organization has a process for identifying and managing change that may impact on health and safety.

3.10 Hazard identification, risk assessment and control of risks - Specific

This section includes criteria for common workplace hazards. Organizations need to apply the criteria in 3.9 to identify necessary systems procedures and specific risk controls required in the health and safety management system.

Risk control is the process of identifying and implementing all practicable measures for eliminating or reducing the likelihood of injury, illness or disease in the workplace. In identifying risk control measures, the most effective control measure is to eliminate the hazard (e.g. by eliminating the process). If it is not possible to eliminate the hazard, the next best step is to prevent or minimise the risk by selecting one or a combination of the control methods determined in accordance with the 'hierarchy of controls'.

Control measures which are higher on the 'hierarchy of controls' [i.e. elimination, substitution, engineering controls, isolation] should always be selected over control measures which are lower on the 'hierarchy of controls' [i.e. administrative controls, personal protective equipment]. Often a combination of risk control measures will need to be used. Priority should always be given to higher order risk control measures over controls lower on the 'hierarchy of controls'.

Some examples for reducing risk include:

- a) substituting the plant or substance with another that is less hazardous;
- b) using engineering controls (e.g. modifying the design of the workplace or plant, or environmental conditions);
- c) isolating people from the source of exposure;
- d) changing the shape, size and weight of objects to reduce manual handling; and
- e) using mechanical aids for manual handling tasks.

It may not always be practicable to immediately implement the control measures higher on the 'hierarchy of controls' and there may still be a need to keep the process/activity going. In such situations interim control measures (e.g. in the form of administrative controls in combination with personal protective equipment) may be used until the control measures higher on the 'hierarchy of controls' can be implemented.

For the risk control process to be reliable there must also be an ongoing evaluation of the various measures used to control risk. This evaluation may require verifications of design, purchase specifications, contractor performance, modifications, etc. to check their effectiveness.



ACCESS CONTROL

3.10.1 The organization determines those areas where access controls are required and ensures effective controls are implemented and maintained.

(USE OF) CONTRACTORS

- **3.10.2** Health and safety requirements are identified, evaluated and incorporated into all purchasing specifications for services.
- **3.10.3** The ability to meet health and safety requirements is reviewed and evaluated in the selection of contractors.
- **3.10.4** Contractor health and safety performance is monitored and reviewed to ensure continued adherence to health and safety purchase specifications.

DESIGN

- **3.10.5** Hazard identification, risk assessment and the development of control measures are undertaken during the product or process design stage, or when the process is modified.
- **3.10.6** Competent personnel verify that designs and modifications meet specified health and safety requirements.

DISPOSAL OF MATERIALS AND SUBSTANCES

3.10.7 There are procedures to ensure that materials and substances are disposed of in a manner that minimizes risk of personal injury and illness.

EMPLOYEE WELFARE

- **3.10.8** Facilities and amenities in the workplace conform, as a minimum, to relevant legislation, standards and codes of practice.
- **3.10.9** The organization has a program to promote the health and wellbeing of employees.

HAZARDOUS SUBSTANCES/DANGEROUS GOODS

- **3.10.10** The organization documents procedures or work instructions for the safe handling, transfer and transport of hazardous substances and dangerous goods.
- 3.10.11 Comprehensive health and safety information on all hazardous substances and dangerous goods is readily accessible at the point of use.
- 3.10.12 The organization ensures that hazardous substances and dangerous goods are safely stored.

PERMIT TO WORK

3.10.13 There are 'Permit to Work' procedures for high-risk tasks.

PERSONAL PROTECTIVE EQUIPMENT

3.10.14 Where personal protective equipment is required, it is appropriate for the task, its provision is accompanied by suitable training, and it is used correctly and maintained in a serviceable condition.

PLANT

- 3.10.15 Plant and equipment is maintained and a record is kept which includes relevant details of inspections, maintenance, repair and alteration of plant.
- **3.10.16** There is a process for unsafe plant and equipment to be identified and quarantined or withdrawn from service.
- **3.10.17** Appropriate controls are used to ensure the safety of persons working on or near plant and equipment that is in the process of being cleaned, serviced, repaired or altered.
- 3.10.18 Competent personnel verify that plant and equipment is safe before being returned to service after repair or alteration.

PURCHASING GOODS

- **3.10.19** The organization determines their health and safety requirements prior to the purchase of goods, and communicates those specifications to the supplier.
- **3.10.20** Purchased goods are checked for conformance to purchasing specifications.

SIGNAGE

3.10.21 Safety signs (including regulatory, hazard, emergency information and fire signs), meet relevant standards and codes of practice, and are displayed in accordance with legal and organizational requirements.

STORAGE AND TRANSPORT OF MATERIALS

3.10.22 There are procedures to ensure that materials are transported, handled and stored in a safe manner.

SUPERVISION

- **3.10.23** Individuals are supervised according to their capabilities and the degree of risk of the task.
- **3.10.24** There are supervisory arrangements that ensure that tasks are performed safely and work instructions and procedures are followed.

SUPPLY OF GOODS AND SERVICES

- **3.10.25** There is a documented process which requires the organization to identify potential health and safety hazards (including public safety hazards), assess the potential risks and determine appropriate risk control strategies before it accepts a contract to supply its goods or services to others.
- **3.10.26** Where the organization is required to provide its services at a customer's workplace, the health and safety hazards affecting the organization's employees are identified, risks assessed and appropriate control measures adopted.

3.10.27 Customer-supplied goods and services used in the organization's work processes are subject to hazard identification, risk assessment and control prior to use.

TRACEABILITY

- **3.10.28** Where product is sold and there is the potential for that product to cause public health and safety concerns, there are documented procedures to enable the product to be traced to the point of sale.
- **3.10.29** All substances in containers and transfer systems are identified and clearly labelled to avoid inadvertent or inappropriate use.



3.11 Emergency preparedness and response

Unplanned incidents can still occur in the most effectively managed health and safety management system. Emergency planning ensures that if an incident does occur, the organization can respond in a way that defuses the situation and mitigates the immediate and ongoing effects. In some industries there may be catastrophic consequences if response management plans fail to deal with emergency situations.

A necessary part of emergency response planning is having crucial information readily available for emergency authorities, such as a manifest showing the location, type and quantity of dangerous goods at the site. The success of the response also relies on the placement, type and integrity of the emergency equipment, including the warning alarms.

Regular testing and review of emergency procedures provides confidence that the response will be effective and proceed according to plan.

- **3.11.1** Potential emergency situations have been identified and emergency procedures are documented and regularly reviewed.
- **3.11.2** The organization has allocated overall responsibility for control of emergency situations to specified individuals and communicated this information to all personnel.
- **3.11.3** Employees receive training and practice in emergency procedures appropriate to their allocated emergency response responsibilities and the degree of risk.
- **3.11.4** Competent persons have assessed the suitability, location and accessibility of emergency equipment.
- **3.11.5** Emergency and fire protection equipment, exit signs and alarm systems are inspected, tested and maintained at regular intervals.
- **3.11.6** A dangerous goods manifest or inventory system is in operation.
- **3.11.7** The organization has assessed its first aid requirements, and the first aid system in place is appropriate to the organizational risks.
- **3.11.8** The organization has systems in place to assist employees who are exposed to critical incidents at work.

Element 4: Measurement and evaluation

4.1 Monitoring and measurement

- General

To make sure that they work, risk control measures need to be checked.

The checks may include:

- a) monitoring potentially hazardous processes to ensure that engineering controls are effective;
- b) inspection of plant, e.g. pressure vessels to ensure conformity with regulatory requirements;
- c) inspection and discussion in work areas where administrative controls are used;
- d) identification of necessary maintenance of buildings and facilities; and
- e) using equipment for monitoring and measurement of health and safety risks (e.g. flammable gas determination, noise dosimetry). Such equipment should be identified, calibrated, maintained and stored in accordance with the manufacturer's specifications.

For regular inspection activities, the use of checklists promotes coverage of issues and consistency of approach.

- 4.1.1 There is a documented health and safety inspection program that:
 - a) defines intervals for inspections that are based on identified risk;
 - b) incorporates a reporting and corrective action process; and
 - c) uses workplace specific checklist(s).
- 4.1.2 The inspection program includes checks that monitor:
 - a) conformance to the organization's safe working procedures;
 - b) compliance with relevant health and safety legislation; and
 - c) the effectiveness of control measures.
- 4.1.3 Inspections seek input and involvement from the personnel who are required to undertake the tasks being inspected.
- 4.1.4 Engineering controls, including safety devices, are regularly inspected and tested to ensure their integrity.
- 4.1.5 Monitoring of the workplace environment (general and personal) is conducted where appropriate and records of the results are maintained.
- 4.1.6 Inspection, measuring and test equipment related to health and safety is appropriately identified, calibrated, maintained and stored.



4.2 Monitoring and measurement

- Health surveillance

Health surveillance involves monitoring the health of persons potentially exposed to hazardous substances and work environment hazards. The main purpose of health surveillance is to detect adverse changes to health caused by occupational exposure to certain environmental conditions or substances, or to detect the excessive absorption of substances. Health surveillance can help to evaluate the effectiveness of risk controls. However health surveillance is not a risk control, nor is it an alternative to the implementation and proper maintenance of higher order risk controls.

Health surveillance may include the following:

- a) biological testing, e.g. determination of the presence of substances or their metabolites in blood, urine or expired air;
- b) specific medical tests, such as lung function tests;
- c) general medical examinations; and d) hearing tests.

- 4.2.1 Where specified by legislation, the health of employees exposed to specific hazards is monitored, recorded, reported and action is taken to address any adverse effects.
- 4.2.2 The organization has identified those situations where employee health surveillance should occur and has implemented systems to conduct this surveillance.

4.3 Incident investigation and corrective action

Hazards will still exist and accidents and incidents can still occur even with the most proactive health and safety management system. It is important to report accidents and incidents so that an investigation can be carried out. Corrective action should aim to remove or minimise the hazard to prevent a recurrence.

In establishing and maintaining procedures for investigating incidents, and taking appropriate corrective and preventive action, the organization should include these basic elements:

- a) identifying the cause(s) of incidents;
- b) identifying and implementing the necessary corrective action;
- c) implementing or modifying controls necessary to avoid repetition of the incident; and
- d) recording any changes in written procedures resulting from the corrective action.

Depending on the situation this may be accomplished rapidly and with a minimum of formal planning or it may be a more complex and long-term activity. The associated documentation should be appropriate to the level of corrective action.

- 4.3.1 There is a procedure, which includes involvement of operational line management, for the investigation of hazards, injuries, illnesses, incidents and other systems failures impacting on health and safety.
- 4.3.2 Investigations shall:
 - a) be undertaken by a competent person(s);
 - b) identify the factor(s) that led to the hazard, injury, illness, incident or other system failure;
 - c) review the identified hazards, assessed risks and effectiveness of the control measures; and
 - d) recommend appropriate control measures.
- 4.3.3 Responsibility is assigned to identified personnel for implementing and reviewing the effectiveness of corrective actions arising from investigations.
- 4.3.4 Corrective actions are discussed with personnel affected prior to implementation.



4.4 Records and records management

It is necessary for an organization to keep records to demonstrate compliance with legislative requirements and conformance to health and safety management system requirements.

The organization needs to identify the records it needs to keep, who has responsibilities for keeping records, the confidentiality requirements, where and how records are to be stored, how long records are to be kept and the method of disposal of records.

Health and safety records may include:

- a) external (e.g. legal) and internal (e.g. health and safety performance) requirements;
- b) health and safety management plans;
- c) hazard identification, risk assessments and risk control;
- d) health and safety training records;
- e) permits to work;
- f) employee qualification information;
- g) process information;
- h) product information (including composition);
- i) equipment information;
- j) equipment inspection, maintenance and calibration records;
- k) monitoring data;
- l) pertinent contractor and supplier information;
- m) details of incidents, complaints and follow-up action;
- n) information of emergency preparedness and response;
- o) audit results; and
- p) management reviews.

- 4.4.1 There are effective systems for management of health and safety records including their:
 - a) identification and traceability;
 - b) collection, indexing, filing;
 - c) access and confidentiality;
 - d) retention and maintenance;
 - e) protection against damage, deterioration or loss;
 - f) retrieval; and
 - g) disposal.

4.5 Health and safety management system audit

To ensure that the health and safety management system is functioning effectively, regular reviews must be undertaken. Auditing provides a systematic and structured method of verifying that activities conform with planned arrangements and monitors their effectiveness. Audit data should be evaluated and suggested system improvements implemented to ensure that the safety management system remains dynamic and relevant.

The audit program and procedures should cover the following:

- a) the activities and areas to be evaluated in audits:
- b) the frequency of audits;
- c) the responsibilities associated with managing and conducting audits;
- d) the communication of audit findings;
- e) auditor selection and competence; and f) how audits will be conducted.

The quality of the information is enhanced when the process includes document review, workplace observations and contribution from the relevant employees and their representatives.

- 4.5.1 Scheduled health and safety management system audits are carried out to verify whether activities:
 - a) comply with planned arrangements;
 - b) have been properly implemented and maintained; and
 - c) are contributing towards the effectiveness of the system.
- 4.5.2 The audit program takes into consideration the significance of health and safety risks and the results of previous audits.
- 4.5.3 The audit procedures cover:
 - a) scope;
 - b) frequency;
 - c) methodologies;
 - d) auditor selection and competencies;
 - e) responsibilities; and
 - f) reporting of results.
- 4.5.4 Audits incorporate workplace observations and input from a representative sample of employees to confirm the effectiveness of the system.
- 4.5.5 Deficiencies highlighted by the audits are prioritized and progress monitored to ensure corrective action is implemented.



Element 5: Management Review

To ensure its continuing effectiveness, the organization's top management should conduct a review and evaluate the health and safety management system at defined intervals.

The health and safety management system needs to be reviewed and evaluated at least every two years. Depending on the complexity of the system, and the level of risk encountered this may need to occur more regularly.

A review needs to be comprehensive but does not necessarily require assessment of the entire health and safety management system at one particular time. Partial reviews may be conducted.

Reviews should include:

- a) determining the continued suitability of health and safety policy;
- b) review of objectives, targets and the extent to which objectives and targets have been met;
- c) reviewing the adequacy of resources provided to meet the objectives and targets;
- d) result from audits and incident investigations;
- e) the continuing suitability of the health and safety management system in relation to changing conditions and information, determining the suitability of methods of communication; and
- f) comments of relevant interested parties.

Observations, conclusions and recommendations should be documented for necessary action.

- 5.1.1 Top management oversee a comprehensive documented review of the health and safety management system at defined intervals to ensure its continuing suitability and effectiveness in satisfying the organization's stated health and safety objectives.
- 5.1.2 Management reviews take into account health and safety management systems audit results, changing circumstances and a commitment to continual improvement.
- 5.1.3 Recommendations arising from health and safety management systems reviews generate actions to improve performance.

Comparison between SafetyMAP and AS/NZS 4801:2001

1.	Health and safety policy	4.2	OHS Policy
2.	Planning	4.3	Planning
2.1	Legal requirements and practical guidance	4.3.2	Legal and other requirements
2.2	Objectives and targets	4.3.3	Objectives and targets
2.3	Health and safety management plans	4.3.1 4.3.4 4.4.6.1	Planning identification of hazards, hazard/risk assessment and control of hazards/risks; OHS management plans; and General
3.	Implementation	4.4	Implementation
3.1	Structure and responsibility - Resources	4.4.1.1	Resources
3.2	Structure and responsibility - Responsibility and accountability	4.4.1.2	Responsibility and accountability
3.3	Structure and responsibility - Training and competency	4.4.2	Training and competency
3.4	Consultation, communication and reporting - Consultation	4.4.3.1	Consultation
3.5	Consultation, communication and reporting - Communication	4.4.3.2	Communication
3.6	Consultation, communication and reporting - Reporting	4.4.3.3	Reporting
3.7	Documentation	4.4.4	Documentation
3.8	Document and data control	4.4.5	Document and data control
3.9	Hazard identification, risk assessment and control of risks - General	4.4.6.3 4.4.6.4	Hazard identification; Hazard/risk assessment; Control of hazards/risks; and Evaluation
3.10	Hazard identification, risk assessment and control of risks - Specific		Hazard identification; Hazard/risk assessment; and Control of hazards/risks
3.11	Emergency preparedness and response	4.4.7	Emergency preparedness and response
4.	Measurement and evaluation	4.5	Measurement and evaluation
4.1	Monitoring and measurement - General	4.5.1.1	General
4.2	Monitoring and measurement - Health surveillance	4.5.1.2	Health surveillance
4.3	Incident investigation and corrective action	4.5.2	Incident investigation, corrective and preventive action
4.4	Records and records management	4.5.3	Records and records management
4.5	Health and safety management system audit	4.5.4	OHSMS audit
5.	Management review	4.6	Management review



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HELP US TO IMPROVE SafetyMAP

The organization that administers SafetyMAP is committed to the provision of quality services which reliably and consistently meet the changing needs of our clients and the community.

You can help us to achieve this quality service through your feedback to us about SafetyMAP. As a user of SafetyMAP you know better than anyone else does what improvements to SafetyMAP would benefit you.

Please let us know how you think SafetyMAP could be improved by writing to:

The Manager,

Health & Safety Systems Unit

WorkSafe Victoria GPO. Box 4306 Melbourne Victoria AUSTRALIA 3001

CONTACT DETAILS

FURTHER INFORMATION ON HEALTH AND SAFETY MANAGEMENT SYSTEMS IS AVAILABLE FROM:

AUSTRALIA

Australian Capital Territory

ACT WorkCover

Telephone (02) 6205 0200 Website www.workcover.act.gov.au

Commonwealth

COMCARE

Telephone 1300 366 979 Website www.comcare.gov.au

New South Wales

WorkCover NSW

Telephone (02) 13 10 50

Website www.workcover.nsw.gov.au

Northern Territory

NT WorkSafe

Telephone (08) 8999 5010

Website www.worksafe.nt.gov.au

Queensland

Division of Workplace Health and Safety Department of Employment and Industrial Relations

Telephone: 1300 369 915 Website: www.whs.qld.gov.au

South Australia

WorkCover Corporation of South Australia Telephone 13 18 55 Website www.workcover.com

Standards Australia

Telephone 1300 654 646 Website www.standards.com.au

Tasmania:

Workplace Standards Tasmania Telephone 1300 366 322 Website www.wsa.tas.gov.au

Victoria

WorkSafe Victoria

Telephone (03) 9641 1444 or 1800 136 089 Website www.worksafe.vic.gov.au

Western Australia

WorkSafe Western Australia Telephone (08) 9327 8777 Website www.safetyline.wa.gov.au

NEW ZEALAND

Occupational Safety and Health Service Website www.osh.dol.govt.nz