

OHS AUDITS AT MONASH UNIVERSITY

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1. PURPOSE

This document sets out the processes for developing and conducting OHS audit programs at Monash University in accordance with the requirements of the Occupational Health and Safety Act (2004) and associated regulations and to meet the requirements of Standards AS/NZS 4801:2001 *Occupational Health & Safety Management Systems – specifications with guidance for use* and OHSAS 18001:2007 *Occupational Health and Safety Systems – Requirements*

2. SCOPE

The processes described apply to all OHS management system audits as defined by Occupational Health and Safety (OH&S), Monash University.

The procedure addresses criteria 4.5.4 of *AS/NZS 4801:2001 OHS Management Systems Audit* and criteria 5.5.5 of *OHSAS 18001:2007 Internal Audit* and associated control requirements of the Monash University OHS management system.

3. ABBREVIATIONS

OH&S	Occupational Health and Safety Branch
OHS	Occupational health and safety
SDU	Staff Development Unit

4. DEFINITIONS

4.1 LEGAL COMPLIANCE AUDIT

A legal compliance audit is a systematic and documented verification process of objectively obtaining and evaluating evidence to determine whether the university's OHS policy, procedures and practices comply with legislative requirements.

These assessments are conducted by the Audit & Risk Management Office at Monash University (separate to OHS audits).

4.2 MONASH CONTROLLED ENTITY

Monash controlled entities (e.g. companies) include entities where Monash can control decision making, directly or indirectly, in relation to the financial and operating policies so as to enable the entity to operate with it in pursuing the objectives of Monash University.

For the remainder of this document, a Monash controlled entity will be referred to as a controlled entity.

4.3 NON CONFORMANCE

A non conformance is an activity or item that does not conform to the policy, procedures or other requirements of the Monash University OHS management system.

4.4 OHS AUDIT

4.4.1 An OHS audit is a systematic and documented verification process of objectively obtaining and evaluating evidence to determine whether the university is conforming to planned OHS arrangements.

4.4.2 Audits are risk-based, with controls designed to manage high risk areas/processes audited more frequently than lower risk areas/processes.

4.4.3 Types of OHS audits

4.4.3.1 Self audit

A self audit is an OHS audit conducted by an academic/administrative unit/controlled entity of their own OHS

systems. A Monash University self audit questionnaire is available at the OH&S web site (www.adm.monash.edu.au/ohse/forms).

4.4.3.2 Internal OHS audit

An internal OHS audit is an OHS audit conducted by a Monash University internal auditor independent of the area under audit.

4.4.3.3 External OHS audit

An external OHS audit is an OHS audit conducted by an external consulting auditor.

4.4.3.4 Certification and surveillance audits

Certification and surveillance OHS audits are audits conducted by a certification body to assess whether the Monash University's OHS management system meets the requirements of *AS/NZS 4801:2001 Occupational Health & Safety Management Systems – specifications with guidance for use* and *OHSAS 18001:2007 Occupational Health and Safety Systems – Requirements*.

4.5 OHS AUDITOR COMPETENCY

4.5.1 All auditors must be appropriately trained and experienced. Minimum competency requirements have been set as:

- Internal management system auditor training
- Technical understanding of the OHS control requirements for the area or subject being audited.

4.5.2 Auditors must be approved by OH&S.

4.5.3 Audit programs and processes are developed by staff who have undertaken Lead Auditor OHS and Environmental training.

4.6 OHS AUDIT REPORT

4.6.1 An OHS audit report is a documented report of audit findings, consisting of;

- The area and element audited
- Audit team, audit scope, persons interviewed
- Executive summary
- Graphical representation of findings
- Summary of key findings (identified non-conformances)
- Recommendations for:
 - short term action;
 - longer term action; and
 - opportunities for improvement, which are areas that may become non-conformances in the future.

4.6.2 OH&S will disseminate audit reports to units/entities.

5. SPECIFIC RESPONSIBILITIES

A comprehensive list of OHS responsibilities is provided in the document *Occupational health and safety management at Monash University: Structure, functions, roles and responsibilities*. The responsibilities with respect to OHS audits are summarised below.

5.1 OH&S

It is the responsibility of O&HS to:

- coordinate the university's OHS audit program;
- distribute audit results;
- maintain records of audit programs; and
- assist units/entities to apply corrective actions and controls to system or procedural deficiencies and non-conformances.

5.2 AUDITORS

It is the responsibility of internal auditors to:

- plan and conduct audits;
- report on audit findings and non-conformances;
- verify that agreed corrective actions adequately address detected system or procedural deficiencies and non conformances; and
- assist units/entities to address system or procedural deficiencies and non conformances.

5.3 HEAD OF ACADEMIC/ADMINISTRATIVE UNITS/CONTROLLED ENTITIES

It is the responsibility of the head of academic/administrative units/controlled entities to:

- ensure self audits are conducted annually and that corrective actions are implemented;
- provide the auditor with evidence of current system and procedural practices in response to audit questions; and
- identify and implement corrective actions to improve the OHS management systems and general workplace safety, where deficiencies are detected.
- communicate audit results to the local OHS&E committee/s.

6. AUDIT

6.1 AUDIT PROGRAM

6.1.1 Audits will be conducted to:

- assess compliance of the Monash University OHS management system with the requirements *AS/NZS 4801:2001 Occupational Health & Safety Management Systems – specifications with guidance for use* and *OHSAS 18001:2007 Occupational Health and Safety Management Systems- Requirements*;
- assess the extent of implementation of the Monash University OHS management system in the university's operations and activities; and
- verify the implementation and effectiveness of the university's OHS policy and procedures.

6.1.2 OHS audit program

6.1.2.1 An audit program will be prepared and maintained by OH&S. The audit schedule will be available at the OH&S website www.monash.edu.au/ohs/management-system/index.html

6.1.2.2 The audit schedule will reflect:

- the level of risk associated with the activity/ies, policy or procedure;
- the OHS importance of the specific element of the Monash University OHS management system;
- the results of previous audits; and
- the significance of problems encountered in the areas to be audited.

6.1.2.3 Unscheduled audits may be conducted at any time based upon:

- external audit results;
- regulatory inspections/entry reports;
- operational changes;
- management reviews;
- incidents; or
- identified non-conformances.

6.1.3 Types and frequency of audits

<u>Audit</u>	<u>Conducted by</u>	<u>Frequency</u>
Self audit	Safety Officer and Head of each unit/entity	Annually
Internal	OH&S staff	As required, using criteria in 6.1.2.2
External	External consultants	As required, using criteria in 6.1.2.2
Certification/ Surveillance	External consultants	3 yearly with assessments 12 monthly throughout the certification period

6.2 AUDIT PROCEDURE

Step	Action	Responsibility	Output
1.	<p>Preparation of audit program</p> <p>At least annually, the Manager, OHS Operations is responsible for:</p> <ul style="list-style-type: none"> Preparing the audit schedules; Determining the scope of the audits; Preparing master audit checklists as required in consultation with the Director, OH&S and other OH&S staff 	Manager, OHS Operations	<p>Audit schedules</p> <p>Master checklists</p>
2.	<p>Notification of audits</p> <ul style="list-style-type: none"> The Manager, OHS Operations will be responsible for notifying auditors of scheduled audits at least 3 weeks before the audit completion date. The auditors will mutually agree (based on local knowledge and experience) on who will be the lead auditor. The Manager, OHS Operations sends email to academic/administrative unit/controlled entity notifying reasons and time of audit, verifying that scheduled time is convenient at least 3 weeks before the audit date. Email is sent to: <ul style="list-style-type: none"> Head of academic/administrative unit; Safety officer; Health safety representative (if applicable); Resources Manager; Faculty/divisional Manager; Dean of faculty; and OHSE consultant/manager of the area. 	<p>Manager, OHS Operations</p> <p>Auditors</p> <p>Manager, OHS Operations</p> <p>Unit/entity</p>	<p>Audit notification to auditors</p> <p>Nomination of lead auditor</p> <p>Audit notification to unit/entity</p> <p>Reply to email</p>
3.	<p>Pre-audit activities</p> <p>Prior to the audit, the Manager, OHS Operations is responsible for:</p> <ul style="list-style-type: none"> Determining the scope of the audit; Collating relevant information for review by 	Manager, OHS Operations	<p>Audit information</p> <p>Audit timetable</p>

Step	Action	Responsibility	Output
	<p>the audit team which may include operating procedures, previous audit findings, standards, legal requirements, internal procedures;</p> <ul style="list-style-type: none"> • Preparing an audit timetable; • Preparing audit checklists as required; • Identifying staff to be interviewed during the audit; • Contacting the unit/entity to agree on and confirm the above information. • <i>Opening meeting (30 min)</i> OHSE consultant of the area/ OH&S branch representative and area personnel to meet to commence the audit. Items to cover: <ul style="list-style-type: none"> – Introductions; – Scope of audit; – How the audit will be conducted; – Access arrangements to laboratories; – Resources required (keys, PPE); – What the team will do if they find an unsafe situation; and – Reporting process. 		<p>Audit checklists</p> <p>Contact with auditee</p> <p>Diary appointments for meetings and audits</p> <p>Opening meeting conducted</p>
4.	<p>Conducting the audit Audits should be conducted by the audit team as follows using the following steps as a guideline:</p> <ul style="list-style-type: none"> • <i>Conduct audit</i> <ul style="list-style-type: none"> – Obtain objective evidence for examination to assess conformance; – Follow audit trails to confirm evidence; • <i>Closing meeting (5 min)</i> At least the OHSE consultant/manager of the area and area personnel, perhaps the team of auditors. Cover: <ul style="list-style-type: none"> - Confirm completion of audit; - Return keys, PPE, etc; - Provide a general statement regarding findings; and - Confirm reporting process. • <i>Within 2 days, team to discuss and complete audit sheets</i> <ul style="list-style-type: none"> - Recorder of team to complete electronic entry, if used; - Leader of team to check sheets when complete, if used. 	Lead Auditor / Audit Teams	<p>Entries on checklists</p> <p>Records</p> <p>Notes</p> <p>Samples</p> <p>Completed audit sheets</p>
5.	<p>Audit report The Lead Auditor is responsible for finalising the audit report which shall include:</p> <ul style="list-style-type: none"> • Area and element audited; • Audit team, audit scope, persons interviewed; • Executive summary; • Graphical representation of findings; • Summary of key findings (identified non-conformances); • Recommendations: 	Lead Auditor / Audit Team	<p>Audit report</p> <p>Summary graphs</p> <p>Audit Report</p>

Step	Action	Responsibility	Output
	<ul style="list-style-type: none"> - For short term action; - For longer term action; - Opportunities for improvement, which are areas that may become non-conformances in the future. 		
	<p>The completed report is reviewed by:</p> <ul style="list-style-type: none"> • Manager, OHS Operations; and • another consultant who attended the audit 	Manager, OHS Operations	Comments
	<p>The completed report distributed includes:</p> <ul style="list-style-type: none"> • covering email to head of academic/administrative unit/controlled entity; • audit report; • appendices, including summary graphs; and • other attachments, as necessary. 	Manager, OHS Operations	Completed report
	<ul style="list-style-type: none"> • Copies of the report are distributed to: <ul style="list-style-type: none"> - head of academic/administrative unit - safety officer(s); - health & safety representative; - resources manager; - dean of faculty/head of division; - faculty manager; and - OHSE consultant/manager for area. 	Manager, OHS Operations	Report mailed
	<ul style="list-style-type: none"> • Copies of the report are filed in the : <ul style="list-style-type: none"> - RMO file of OHS audit file; - sequential file; and - the agenda of the next OHSPC meeting. 		Copies of report filed
	<p>The OHSE consultant/manager for the unit audited arranges follow-up meeting with:</p> <ul style="list-style-type: none"> - head of academic/administrative unit; - safety officer; - health & safety representative; - resources manager; and - Manager, OHS Operations. 	OHSE Consultant/manager	Meeting notes
6.	<p>Corrective Actions</p> <p>The OHSE consultant of the area provides advice to appropriate personnel (Manager/Supervisor/Safety Officer) of the unit audited to ensure corrective actions are completed within the agreed timeframes.</p>	OH&S/ Unit/entity	Corrective actions
	<p>The academic/administrative unit/controlled entity in consultation with the OHSE consultant/manager is responsible for:</p> <ul style="list-style-type: none"> • Tracking the progress and effectiveness of the corrective actions; • Closing out corrective actions; • Closing out non-conformances; and • Reporting status of corrective actions to management & to the local OHS&E committee on a 3 monthly basis. 	Unit/entity OHSE Consultant or Manager/ Other OH&S staff	Corrective action closures Reports
7.	<p>Management Reporting</p> <p>The Director, OH&S is responsible for reporting results of internal audits to university management at each quarterly OHSPC committee meeting.</p>	OH&S	Reports to management

7. RECORDS

<u>Record to be kept by</u>	<u>Records</u>	<u>To be kept for:</u>
Academic/administrative unit/ controlled entity	Records of audits including: <ul style="list-style-type: none">• self audits• internal audits• external audits• certification/ surveillance audits	5 years
	Records of corrective actions taken and controls used to address system or procedural deficiencies and non-conformances	5 years
	Records of training provided by unit/entity, including: <ul style="list-style-type: none">• Attendees• Short description of training content	Indefinitely
OH&S	Records of audits, including: <ul style="list-style-type: none">• self audits• internal audits• external audits• certification/ surveillance audits	5 years
SDU	Records of training provided by SDU, including: <ul style="list-style-type: none">• Attendees• Short description of training content	Indefinitely
	Course evaluation sheets	5 years

8. REFERENCES

8.1 LEGISLATION

Occupational Health and Safety Act 2004 (Vic)

8.2 MONASH UNIVERSITY OHS DOCUMENTS

www.monash.edu.au/ohs/

Monash University self audit tool

Occupational health & safety training guide

Training records

8.3 AUSTRALIAN STANDARDS

AS/NZS 4801:2001 Occupational Health & Safety Management Systems – specifications with guidance for use.

OHSAS 18001:2007 Occupational Health & Safety Management Systems – requirements