Return to **work.**
Return to **life.**

Self-insured work health and safety standards & guidance notes

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Version 1

Government of
South Australia

Disclaimer

This publication is:

- for use by ReturnToWorkSA in assessing performance against some of the requirements of registration as a self-insured employer.

- a reference document for self-insured employers, or employers considering an application for registration as a self-insured employer.

- not intended as a substitute for the requirements of the *Work Health and Safety Act 2012* or the Code of conduct for self-insured employers.

Information produced by ReturnToWorkSA Corporation of South Australia in this publication is correct at the time of printing and is provided as general information only. In utilising general information about workplace health and safety and injury management, the specific issues relevant to your workplace should always be considered.

Introduction

Self-insurance is an integral part of the South Australian Return to Work Scheme ('the Scheme') and self-insured status should only be granted to employers that are able to demonstrate a level of performance commensurate with the relevant sections of the Return to Work Act 2014 ('the Act').

Section 129(11)(e) of the Act states that the Corporation, in deciding whether to grant, renew, reduce or revoke the period of registration will have regard to "the effect, or likely effect, of the working conditions under which workers are employed by their employer, or any of the employers, on the health and safety of those workers".

Performance against the work, health and safety (WHS) standards and guidance notes (the standards) is one of the considerations ReturnToWorkSA has regard to when deciding whether to grant, renew, reduce or revoke a period of registration as a self-insured employer. These standards must be read in conjunction with other administrative and legislative requirements, including the Code of conduct for self-insured employers (the Code), the Act, and the requirements of Schedule 3 of the Regulations.

The standards are designed to assess:

- the implementation of WHS systems to maintain the health and safety of workers for self-insured employers;
- consultation including joint employer and worker involvement;
- a system that manages risk and supports compliance with WHS legislation;
- the development of systems that measure outcomes ensures continuous improvement.

The standards have been designed to assess Section 129(11)(e) of the Act with the aim of reducing the number, rate, severity, duration and costs of claims in South Australia. Whilst the standards do not represent all elements of a WHS system, they have been developed with reference to contemporary WHS management systems elements and the *Work Health and Safety Act 2012* (SA). Evaluations against the standards will include physical inspection of premises and work locations to verify practice against procedure. Consideration will also be given to feedback received from workers and industrial associations when assessing system compliance.

A business management systems structure clearly designates overall responsibility for WHS to senior management of the organisation. There must be commitment and accountability for the implementation and performance of the safety management system from senior leaders. Effective implementation of this will be evaluated within operational elements of the standards. It should be noted that compliance with these standards is one of several matters that ReturnToWorkSA will consider as part of the evaluation process associated with initial applications and renewal of self-insured registration. Compliance with WHS legislation extends beyond what is contained in these standards including investigations and breaches identified by SafeWorkSA, which will also be considered when assessing Section 129(11)(e) of the Act.

If a conflict between these standards and the law occurs, the law will take precedence. Details of the full range of requirements are contained in the Code, which is available from ReturnToWorkSA's website, [www.rtwsa.com.](www.rtwsa.com)

Leader Self-Insured Services

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Standard 1: Commitment and consultation

Element 1.1: Endorsed and distributed policy statement

1.1.1	The organisation shall define its WHS policy in consultation with workers or their representatives.

Guidance notes

The organisation's policy statement shall:
- recognise the requirement for legislative compliance.
- recognise the pursuit of continuous improvement.
- recognise an approach for setting WHS objectives.
- recognise the organisation's duty of care to all persons in the workplace including labour hire, contractors and subcontractors, volunteers, visitors.
- recognise a hazard management approach to WHS.
- incorporate a commitment to consultation and communication with all relevant parties on WHS related matters.
- be endorsed by senior executive and made available to all parties.

Potential evidence considered

- current WHS policy statement for the organisation.
- evidence of consultation, communication and distribution.

Element 1.2: Consultation

1.2.1	The organisation shall ensure arrangements for worker consultation and involvement are documented and implemented.

Guidance notes

The organisation shall have:
- a documented system/process implemented that outline consultation arrangements. Definition in the system shall include:
  - processes for formation, structure and terms of reference for relevant consultative forums (e.g. WHS committees).
  - reporting frameworks (including forums where relevant).
  - appropriate engagement with Health and Safety Representatives (HSR) (if present).
  - consultative processes relating to:
    - hazard management.
    - incident investigation/review outcomes.
    - internal audit outcomes.
    - development of WHS plans.
    - changes to workplace/practice.
    - legislative change.
    - elections of worker representatives and committees (where relevant).

- ▪ WHS responsibilities.
- ▪ policy and procedure review.
- ▪ dispute resolution.
- consultation arrangements to ensure effective consultation with all relevant workers. It is expected communication arrangements are considered from the commencement of employment.
- evidence that consultation processes are appropriately documented and considered in applicable planned activities. Committee minutes shall reflect suitable attendance and engagement.
- forums for consultation need to be engaged throughout activities such as workplace change, procedural review and not be limited to discussion on completed processes (e.g. once a procedure has been reviewed and disseminated).
- processes to ensure outcomes of consultation are a consideration of any review of the suitability and effectiveness of the systems supporting policies and procedures.
- evidence of state business or local level consultation where plans / standards / policies / procedures are developed at a high corporate level or nationally.
- allowance for time and resources to effectively complete consultation.
- consultation and communication arrangements throughout the system that address, where applicable, the cultural and linguistically diverse needs of its workers.

Potential evidence considered

- procedures relating to consultation.
- terms of reference for consultative forums or applicable committees / workgroups/ review panels etc.
- meeting minutes.
- WHS plans.
- worker feedback.
- evidence of planned activities and processes with steps to seek and account for consultation and feedback (e.g., hazard and incident investigations, procedure reviews).
- evidence of dispute resolution processes being applied.

Element 1.3: Responsibility and accountability

1.3.1	The organisation shall ensure defined responsibilities are communicated to all levels of the organisation and accountability mechanisms are documented.

Guidance notes

The organisation shall:
- describe mechanisms used to hold individuals/groups accountable for meeting allocated responsibilities.
- be able to evidence that defined mechanisms for communication of WHS responsibilities are used and that the scope of information communicated to workers and management adequately covers their responsibilities as defined within the system.
- be able to demonstrate documentation and reporting of system defined accountability mechanisms used to hold individuals and groups (executive, managers, workers, governance committees, health and safety committees, contractors, labour hire, volunteers) accountable for meeting allocated WHS

responsibilities.

Potential evidence considered

- policies/procedures describing accountability mechanisms; including associated disciplinary/ grievance/ dispute policy/procedures.
- Codes of Conduct.
- meeting minutes where WHS responsibilities and accountabilities are communicated.
- job descriptions.
- work instructions/ SWMS.
- information packs/kits/forms.
- WHS Key Performance Indicators (KPIs).

Standard 2: Planning

Element 2.1: System objectives

2.1.1	The organisation shall ensure documented processes are implemented for the identification and achievement of WHS systems objectives.

Guidance notes

The organisation shall ensure:
- the process for the setting of objectives is defined within the system.
- the setting of objectives considers several inputs and drivers, such as:
  - the commitment statements in the principal policy.
  - emerging risks (where relevant) e.g. noise-induced hearing loss, dust diseases or psychosocial hazards.
  - incident/Injury trends.
  - hazard and risk profile of the business.
  - performance against previous plans, programs and objectives.
  - outcomes of consultation and communication with workers.
  - audit outcomes.
  - investigation outcomes.
  - action plans.
  - legislation.
  - changes to the organisation its workplace or practice.
  - the need for continuous improvement.
  - the adequacy of resources.
  - findings from exit interviews or wellbeing/culture surveys.
- objectives are specific, measurable, achievable, realistic and time-framed ('SMART') to ensure that they are an effective tool to drive improvement in the system and WHS performance.
- detailed plans are documented on how objectives will be achieved, including what activities will be completed, by who, by when and how the results will be measured, monitored and reviewed.
- consultation and communication with workers is evident in the process of developing and implementing objectives of the system.

Potential evidence considered

- WHS policy.
- WHS plans, programs, strategic plans with WHS content.
- minutes of meetings or planning days where objectives were determined for the planning period.
- analysis of inputs and outputs from previous plans, WHS performance/incident trends.
- policies/procedures relating to planning or improvement which describe requirements for setting of WHS objectives including any targets and/or performance indicators.
- documented key focus/priority areas (programs) for which the organisation has, to set and achieve objectives. These may be plans, procedures or strategic plans.
- survey outcomes, data.
- exit interview findings.

Element 2.2: Legislative compliance

2.2.1	The organisation shall ensure documented process(es) are implemented to ensure legislative requirements and changes to requirements are identified.

Guidance notes

The organisation shall ensure:
- all applicable legislation relevant to the nature of the organisation's activities, processes, products or services that may directly or indirectly affect workers, contractors, visitors, and volunteers have been identified, for example:
  - o description of legislative update services/memberships.
  - o industry Forums.
  - o research/review activities.
  - o where relevant legislative requirements have been identified; for example within:
    - statutory registers.
    - references within policy and procedures.
- there is a system for ensuring legislative updates are monitored and relevant requirements are captured within the system and implemented appropriately.
- requirements and processes for updating system documents in response to legislative change are evidenced.

Legislative compliance shall also be addressed in system procedures, ensuring procedures reflect legislative requirements of the WHS Act and associated legislation. It is expected that self-insured employers will identify and address legislation relevant to their activities and system. This may include statute beyond the WHS Act.

Potential evidence considered

- current policies/procedures describing processes for managing legislative compliance.
- legislative register (containing relevant acts, standards, codes of practice).
- policies/procedures specifically containing legislative requirements (e.g. confined space, procedures associated with high risk work).
- plans; registers or schedules detailing timeframes/requirements for statutory testing or inspection

(for example schedules for cooling tower inspection, pressure vessel testing, workplace inspection)
- notifications such as HSR election notifications; notifiable incidents to SafeWork SA.
- WHS Act offences, cessation of work, provisional improvement notices, WHS disputes, SafeWork SA enforcement measures, enforceable undertakings or entry permit holder reports.
- meeting minutes documenting communications relating to legislative change or reviews.
- planned arrangements.
- legislative audit schedules and completed legislative audits.
- changes to policies and procedures in response to legislation (e.g. introduction of new approved Code of Practice; changes to High Risk Work licensing etc.).

Standard 3: Support

Element 3.1: Training

3.1.1	The organisation shall ensure a documented process is implemented to plan, deliver and review appropriate training requirements for all workers attending the employer's workplace.

Guidance notes

The organisation shall ensure:
- the process for identification of WHS related training needs is described in the system, including:
  - management training requirements that reflect accountability and responsibilities associated with their roles and or level within the organisation.
  - forums or positions responsible for conducting training needs assessments.
  - how and where training requirements will be recorded.
  - consultation processes with stakeholders and individuals.
  - requirements and timeframes for review of identified training needs including who is responsible for this and when it will occur.
- determination of training needs includes consideration of:
  - each person and/or roles within the organisation including workers, labour hire, agency employees, contractors, volunteers and work experience persons.
  - induction, orientation, buddy systems, changes in role and the expected levels of competencies to be gained before working unsupervised.
  - the need for renewal or refresher of related training requirements.
  - the needs of certain individuals to understand WHS policies and procedures that apply to the roles to which they are assigned.
  - skill needs to support specific fields of expertise e.g. conducting and utilising applicable tools/databases to undertake investigations, audits, training, risk assessments etc.
  - the level of skill, understanding and competency sufficient to operate plant/ equipment; to carry out specific tasks or processes required in the system.
  - improvement areas of training needs because of reviews (e.g. quality and outcomes of incident/hazard reports).

- legislative requirements with respect to a worker's tasks and responsibilities. This includes training for: health and safety committee members, health and safety representatives, emergency personnel for fire and first aid, confined space training etc.
- the process for developing training plans is defined within the system. The plan/s shall be based on the training needs analysis findings.
- the scope of the training plan/s includes the:
  - targeted participants.
  - schedule of courses, and formally approved course content.
  - dates and times of training planned for individuals and/or positions.
  - levels of training.
  - defined mandatory training versus optional / voluntary training.
  - refresher training.
  - follow up arrangements e.g. non-attendance.
- there is a system in place that monitors and reviews the implementation of the WHS training plan and a mechanism to address identified gaps, including:
  - the mechanisms for provision of training.
  - the process for record maintenance.
  - how the organisation monitors and reviews the completion/compliance of training plans.
  - description of competency requirements, where relevant.
  - how gaps in learning/attendance are addressed.
- evidence is available that demonstrates training has been implemented in accordance with the planned schedule and proposed attendance.

Potential evidence considered

- current list or document register of WHS policies/procedures/controlled system documents relating to training.
- training needs assessments.
- training matrix.
- training plans.
- system review results considering training.
- audit result focusing on training identification / needs.
- legislative reviews with regards to training.
- consideration of risk assessment outcomes i.e., administrative controls identified.
- training schedule.
- personal development/performance reports with training identified.
- individual learning development plans.
- corporate/organisational/business unit training calendars/schedules.
- training databases.
- training records.
- reports of training attendance and non-attendance.
- records of actions to address non-attendance.
- reviews of training delivery e.g., collating training evaluation forms.
- worker feedback.
- observations from Evaluator site visits.

Element 3.2: Provision of information

3.2.1	The organisation shall ensure communication arrangements for information dissemination and/or exchange are in place.

Guidance notes

The organisation shall ensure:

- communication arrangements used to disseminate and exchange appropriate WHS information that is necessary to protect all persons from risks to their health are communicated to workers and any other relevant persons. Communication arrangements shall be defined in the system and implemented. Communication should be two ways, between workers and management.
- arrangements outline the processes for what information will be communicated and how this will occur. This may include but is not limited to hazard/incident reporting processes, consultation arrangements, safety rules, work instructions, reporting structure etc.
- WHS information is available to workers and management on an ongoing basis.
- consideration is given to language, standards of literacy, cultural diversity and mechanisms of delivery.
- workers are notified of whether there are elected HSRs in the workgroup and the mechanism/right to apply to have designated workgroups/HSRs.

Potential evidence considered

- procedures relating to communication.
- emails.
- induction/awareness material.
- newsletters, noticeboards, posters.
- meeting minutes.
- WHS plans.
- worker feedback.

Element 3.3: Documentation

3.3.1	A documented process shall be implemented for reviewing, updating and maintaining documented information.

Guidance notes

Document control processes in place shall include evidence of the following:

- identification and traceability of documents.
- appropriate endorsement, authorisations and timely document reviews.
- scheduled and timely document reviews with documented inputs (relevant to the review).
- collection, indexing, filing processes applied.
- retention and maintenance.
- retrieval and disposal processes and methods documented and utilised appropriately.

Policy and procedure review process shall be undertaken in accordance with system defined requirements, including:

- evidence to support that review of system documentation occurred in accordance with documented timeframes, and in consultation with stakeholders. Review should demonstrate consideration of relevant criteria, such as:
  - o audit findings.
  - o incident trends/investigation outcomes.
  - o user understanding/implementation.
  - o appropriateness and effectiveness of training or instruction.
  - o legislative requirements and changes.
  - o risk assessment/hazards and effectiveness of controls.
  - o consultation processes / feedback.
  - o changes to references/other documents.
  - o workplace changes (titles, areas, practice).
  - o alignment or association with other documents.
  - o Resources.
- records of policy and procedure review must be maintained.

Potential evidence considered

- current policies/ procedures describing processes for Document Development and review.
- document registers including review dates.
- electronic document management systems.
- audit reports relating to document control/maintenance.
- disposal and retention of records.
- templates / forms to apply defined document control requirements.
- change requests/corrective action records.
- completed document review forms.
- meeting minutes.
- criteria used to determine suitability and effectiveness.
- emails/correspondence with stakeholders.

Standard 4: Operational implementation

Element 4.1: Hazard identification, evaluation, and control

4.1.1	The organisation shall ensure a documented hazard management process is appropriately resourced and implemented to effectively identify, evaluate, and control hazards.

Guidance notes

The organisation shall ensure:

- hazard management processes within the system are implemented that include:
  - o mechanisms for hazard identification.
  - o processes for risk assessment/evaluation of hazards via application of the hierarchy of controls; including management of records and review.

- guidance on the way controls will be used. There must be an emphasis on the use of higher level controls as far as reasonably practicable. The rationale for utilising a particular control in preference to others should be evident.
- evidence of interim measures to minimise risk where adequate controls cannot be implemented in the short term. Timeframes for long term controls shall be established, and status reports periodically updated.
- requirements for providing information, instruction, training, consultation, risk assessment.
- processes for recording, monitoring and review of corrective actions and controls arising from hazard identification, incident investigation, risk assessments, inspections, testing and/or internal audits. This shall include definition of how actions are prioritised and the requirement to allocate appropriate resources and responsibilities.
- processes for reviewing the effectiveness of and improving risk controls over time.

- planning arrangements are defined in the system to describe how the identification, evaluation, and control of hazards occur in the organisation. Planned arrangements shall not be limited to reactive processes. Proactive arrangements such as procurement processes, management of manual tasks, plant, equipment, and substance hazards shall also be present (where relevant). Factors that shall be considered include:
  - organisations activities, processes, products and services.
  - what level of hazard identification and evaluation/assessment is required and when.
  - how review of existing controls is managed.
- the system records all identified hazards, risk assessment levels and control measures that have been or are planned to be implemented, including who is responsible for action, timeframes and where necessary, providing feedback to relevant parties.
- consultation arrangements are incorporated into all relevant hazard management processes, and participation from workers and/or their representatives is evident.
- human and system resources are adequate to successfully achieve the above requirements.

Potential evidence considered

- hazard and risk registers.
- policies/procedures relating to hazard management/risk assessment.
- tools and guidelines used to identify/assess or control hazards.
- procedures/arrangements for hazards specific to organisational activities/services/products (e.g. high risk work, work at heights, remote and isolated work, confined space procedures etc.).
- WHS and injury management related plans.
- plans incorporating hazard management programs selected for measurement.
- contract management/procurement procedures.
- hazard management program outcomes and associated records.
- incident trend analysis and outcomes.
- terms of reference of relevant consultative forums.
- relevant consultative meeting minutes.
- worker feedback.
- risk assessments with recorded consultation evident.
- inspections where worker involvement is evident.
- corrective action registers where worker feedback is evident.

- safe work and operating instructions where worker participation is evident.
- WHS Act offences, cessation of work, provisional improvement notices, WHS disputes, SafeWork SA enforcement measures, enforceable undertakings or entry permit holder reports.
- incident investigations where worker involvement and consultation are evident.
- meeting minutes which demonstrate monitoring of actions.
- observations from Evaluator site visits.

Element 4.2: Change management

4.2.1	The organisation shall ensure documented change management processes and controls for planned temporary or permanent changes that impact WHS performance are implemented.

Guidance notes

The organisation shall ensure:
- documented processes are implemented describing the assessment of risks associated with changes in the workplace or work practices such as expansion/s of existing or new plant, products, processes, systems, projects, or sites. This may include:
  - o risk assessments, job safety assessments, task analysis relating to changes.
  - o hazard and risk registers and reviews following change to ensure the controls remain appropriate.
  - o where appropriate, specific instructions and safe work procedures associated with changes.
  - o processes for changes in legislation.
- appropriate consultation and communication arrangements are implemented to adequately address the changes.

Potential evidence considered

- current policies/procedures describing processes for management of change.
- completed assessments.
- hazard and risk registers.
- systems or databases.
- trial or test outcomes.
- procedures relating to consultation/issue resolution.
- meeting minutes.
- change management forms.
- WHS plans.
- worker feedback.
- observations from Evaluator site visits.

4.2.2	The organisation shall ensure documented processes are implemented to ensure appropriate WHS consideration is given at the time of purchase, hire, lease of plant, equipment, substances.

Guidance notes

The organisation shall ensure:
- documented processes are implemented for introduction of new plant, equipment, or substances

that includes:

- o   hazard identification and evaluation to ensure new hazards are not introduced.
- o   identification of existing controls and evaluation of their effectiveness.
- o   identification and actioning of any additional controls which may be required and evaluation of their effectiveness.
- o   identification of maintenance, storage, handling or procedures required for the introduced plant, equipment or substance.
- o   identification of any legislative requirements associated with the introduced plant, equipment or substance.
- o   determination of the suitability of the item/substance for the task it is intended for.
- o   consideration of training needs which may be required relating to the plant, item or substance.
- o   consultation with relevant workers.
- o   observations from Evaluator site visits.

Potential evidence considered

- current policies/procedures describing processes for new plant, equipment or substances.
- completed risk assessments, Job safety assessments, task analysis.
- hazard and risk registers and reviews.
- electronic notification systems and databases.
- change management process from concept to completion.
- specific instructions and safe work procedures.
- evidence of trials or tests.
- observations from Evaluator site visits.

Element 4.3: Contractors, visitors and volunteers

4.3.1	The organisation shall ensure arrangements are in place to meet the organisation's duty of care for all persons in the workplace including contractors, visitors, and volunteers.

Guidance notes

The organisation shall ensure:

- a documented process covering the engagement and management of visitors, contractors, labour hire employees, volunteers, and work experience students is implemented.
- an ability to meet WHS requirements is assessed in the selection of contractors, labour hire employees, and volunteers, including verification at procurement or the prequalification process.
- arrangements for engagement and management of contractors, volunteers, labour hire personnel and other persons in the workplace includes:
  - o   identification of job safety requirements and related risk assessments.
  - o   relevant hazard controls.
  - o   Identification of instruction and training requirements and provision of these where relevant.
  - o   communication of roles and responsibilities.
  - o   Identification and review of licensing qualifications and accreditations.
  - o   communication arrangements.
  - o   auditing/testing/supervision to ensure continued adherence to WHS legal/contractual requirements.

- o corrective actions relevant to identified non-conformances.
- o monitoring and supervision.

Potential evidence considered

- current policies/procedures describing processes relating to duty of care.
- inductions and relevant training records.
- contractor and Labour Hire agreements.
- permit to work processes being applied.
- relevant labour hire processes defined and applied.
- volunteer processes defined and applied.
- documented processes for supervision and monitoring being applied.
- contractor/visitor registers.
- relevant site risk assessment and safe work arrangements being implemented.
- audits/reviews of contractors/labour hire suppliers.
- license and training records.
- inspections of contractor work activities.
- records of communication/consultation.
- formal reviews of labour hire/contractors being undertaken.

Element 4.4: Emergency management

4.4.1	The organisation shall ensure emergency response arrangements are documented, implemented, and periodically tested and evaluated.

Guidance notes

The organisation shall ensure documented processes are implemented which:

- manages emergencies that potentially may occur, for example: fire, explosion, major substance spills, sabotage, armed robbery, medical emergency, natural disasters, power failure, structural collapse, remote and isolated work emergency.
- outlines how all emergency arrangements are to be tested, recorded, and/or evaluated, including timeframes, trained resources and the mechanisms to achieve this.
- details how relevant information and training is provided to workers involved in emergency response arrangements.
- ensures emergency testing arrangements are implemented with appropriate records kept and retained.

Potential evidence considered

- current emergency management procedures and plans.
- current procedures detailing management of emergencies related to specific operational activities where relevant (such as confined space rescue, vertical rope rescue, remote/isolated worker retrieval arrangements, bushfire).
- schedules for emergency drills/tests.
- corrective action registers.
- debrief reports.
- meeting minutes.

- reports on desktop exercises.
- procedural amendments arising from tests.

Element 4.5: Incident investigation and improvement

4.5.1	The organisation shall ensure documented procedures are implemented to ensure work related injury/illness and incidents are investigated and action taken when relevant.

Guidance notes

The organisation shall ensure:

- documented processes are implemented that clearly describe the investigation of all relevant work related incidents. If investigations are undertaken based on risk, including methodology to assess severity and frequency.
- evidence of appropriate implementation of the incident investigation procedure. Incident investigation processes shall include:
    - o examination of the workplace and work systems leading to the identification of contributing factors.
    - o identification of corrective actions demonstrating the use of hierarchy of controls.
    - o review of corrective actions to ensure they are implemented and effective.
    - o where relevant, and as defined in the system, processes of notification to applicable Regulators e.g. SafeWork SA, OTR.
    - o consultation with injured workers and other relevant workers who are affected or likely to be affected by the risk factors identified in the investigation and subsequent risk controls determined.
    - o consideration of recurring incidents to assess the immediate need for review of system improvements and/or risk reduction opportunities.
    - o any additional hazards identified from the investigation process are managed in line with the hazard and incident reporting process under sub-element 4.1.1.

Potential evidence considered

- current policies/procedures describing processes for incident or 'near miss' investigation and reporting.
- incident investigation reports.
- completed incident forms.
- registers (incident/hazard).
- incident trend analysis and outcomes.
- meeting minutes with discussion of incidents and/or investigations.
- evidence of risk control implementation to prevent recurrence.
- WHS Act offences, cessation of work, provisional improvement notices, WHS disputes, SafeWork SA enforcement measures, enforceable undertakings or entry permit holder reports.
- post verification activity to confirm ongoing suitability and effectiveness.

Element 4.6: Workplace monitoring

4.6.1	The organisation shall ensure that the implementation of relevant inspection and testing procedures are conducted by the relevant, competent person(s) and that corrective/preventive action is taken on any non-conformance issues identified.

Guidance notes

The organisation shall ensure:

- documented processes are implemented outlining relevant plans and schedules that capture maintenance, inspection and testing requirements required by legislation and the wider system needs (e.g. manufacturer's requirements).
- that resources allocated to undertake inspection and testing tasks are adequate and competent.
- gaps or deficiencies in testing and checking are identified and addressed.
- evidence of analysis and review of inspection and testing reports is available. Where inspections identify non-compliance, evidence of systematic corrective/preventative action processes.
- consideration is given to how records of disposal or remedial action are maintained when services are provided by a third party or contracted specialist, to verify that faulty equipment or items which fail to meet the specified test requirements are repaired or taken out of service.

Potential evidence considered

- current policies/procedures describing processes for inspection/testing/statutory requirements / corrective actions.
- completed inspections (e.g., workplace; pressure vessel; lifting and rigging; test and tag; service inspection reports).
- training records/competencies of persons undertaking inspection.
- contracts with preferred service providers detailing scheduled preventative maintenance/inspection/service arrangements.
- reports utilised to monitor completion of testing to schedule.
- maintenance databases.
- work orders raised and completed work orders.
- preventative maintenance schedules.
- breakdown maintenance systems.
- corrective action registers and reports used to monitor status of corrective actions.
- maintenance databases with detail of work undertaken.
- reviews/audits of inspections.
- remedial actions to correct issues (i.e., tagging out of plant/removal/replacement of equipment/ repairs).
- observations from Evaluator site visits.

Standard 5: Measurement and evaluation

Element 5.1: Internal audits

5.1.1	The organisation shall establish and implement documented processes to ensure programmed internal audits are undertaken and the necessary corrective action(s) are identified, prioritised and implemented.

Guidance notes

The organisation shall ensure internal audit processes demonstrate:

- internal audit scheduling, including details of how internal audits schedules are developed (rationale for frequency such as risk assessment, incident trend analysis etc.).
- audit activity that reflects the planned audit schedule.
- requirements to define the scope of internal audits are documented and followed. Internal audits shall review and assess practice undertaken against defined system procedures. This may include development of documented audit tools against individual procedures; referencing of procedural criteria against questions or required evidence or use of marked up system procedures.
- the sampling methodology utilised is relevant to the nature of the procedure being audited.
- persons/positions responsible and processes/mechanisms for monitoring of audit completion to schedule.
- training, competency and/or selection criteria for internal auditors is determined and applied.
- consultation and communication processes are defined and followed, including as part of the audit process and in relation to audit outcomes and corrective actions.
- corrective actions are identified, prioritised, communicated and monitored until closed out.
- actions are taken to address outstanding or late corrective actions.
- how local corrective actions and learning's are applied to the wider organisation, if required.

Potential evidence considered

- current policies/procedures describing processes for internal audit.
- training records of personnel undertaking audits.
- internal audit schedule.
- completed internal audits (reports/tools and procedures audited).
- audit tools.
- record of audits / audit findings.
- worker consultation (forum, agenda & minutes).
- summary audit reports provided to executive/WHS & injury management committees.
- corrective action/non-conformance reports.
- corrective action registers demonstrating monitoring of action completion.
- minutes from meetings showing discussion of audit outcomes and prioritisation of actions.
- reports on corrective actions to relevant forums/individuals.
- verification processes/reports used to ensure actions are implemented.
- follow -up/verification audit reports.
- management system review forum and minutes, outcomes and decisions.
- observations from Evaluator site visits.

Element 5.2: Measuring, monitoring and reviewing objectives

5.2.1	The organisation shall ensure planned objectives for key elements of the system are measured, monitored and reviewed in line with documented procedures.

Guidance notes

The organisation shall ensure:

- documented processes are implemented to measure, monitor and review objectives in accordance with the system objectives (described in sub-element 2.1.1).
- the monitoring process includes reporting against documented WHS objectives and:
  - records shall support this occurs in accordance with defined timeframes.
  - reports shall be tabled and provided to forums/persons identified with responsibility for monitoring and maintaining objectives.
  - reports shall include sufficient information to determine:
    - whether objectives are being met or otherwise.
    - what actions are being taken or are planned to address under-performance.
    - persons responsible for collating information and taking action to maintain program performance.

Potential evidence considered

- current policies/procedures describing processes for planning, measurement and monitoring.
- WHS performance reports (e.g., Monthly/ quarterly/annual).
- reports provided to relevant forums which detail WHS focus/priority areas (programs); objectives, and status of performance (whether objectives are being achieved).
- meeting minutes showing discussion of tabled program performance results.
- electronic tracking systems used to monitor KPI's; targets; objectives.
- evidence of reporting.
- program documentation.
- relevant senior management meeting minutes.
- governance forum meeting minutes i.e., audit and risk control committee, board meeting etc.
- corrective action registers/requests.
- WHS plans.
- system reviews and outcomes (i.e., audits against external standards/accreditation etc.).
- strategic Plan review and updates.
- internal/ divisional reports supporting WHS Plans.

Element 5.3: System review

5.3.1	The organisation shall implement documented processes to ensure the system is reviewed and revised, if required.

Guidance notes

The organisation shall ensure:

- documented processes are implemented to review the system at planned intervals to assess ongoing suitability, adequacy and effectiveness. Measurement outcomes or inputs to system review

may include:

- o actions from past reviews.
- o audit (internal and external; including ReturnToWorkSA or Third Party accreditation).
- o WHS program performance reporting and analysis.
- o performance reviews of personnel.
- o consultation or survey responses/outcomes.
- o incident and hazard reporting trends and statistics.
- o incident investigation outcomes.
- o legislative reviews.
- o training reviews.
- o performance against business plans/action plans etc.
- o outcomes from risk assessments and corporate risk register reviews.
- o outcomes and reviews of strategic plans relevant to system objectives.
- o revised and / or new system objectives.
- o consideration of the appropriateness of the level of resourcing.
- o the effectiveness of implemented controls.
- o findings from exit interviews or wellbeing/culture surveys.
- outputs of the review are documented including:
  - o assessment of the effectiveness of the system including any changes that should feed into planning.
  - o assessment of the adequacy of resources.
  - o any opportunities for continuous improvement.
  - o any necessary corrective actions.
  - o opportunities to improve policy or objectives.

Potential evidence considered

- current policies/procedures describing processes for system planning, review and improvement.
- review of risk assessments and risk controls.
- reviews of training programs and outcomes.
- system development and improvement reviews.
- audits/reviews of the system against external standards/legislation including outcomes/actions.
- analysis of reports pertaining to workplace, work practices, and other relevant risk control inspections etc.
- reviews of health monitoring and / or surveillance inspection activities.
- risk profile reviews and updates.
- purchasing process / resource reviews.
- changes to policies and procedures in response to legislation (e.g., introduction of new approved Code of Practice; changes to High Risk Work licensing etc.).
- development of new procedures in response to changes in organisational activities/operations.
- review of plans or procedures to reflect changes to personnel/human resources (i.e. organisational growth or loss of positions).
- development or alterations to procedures to reflect current work practices (i.e., identified from procedure reviews above or following relevant internal / external audit recommendations); introduction of plant/substances etc.

- meeting minutes providing evidence of discussion of legislation, workplace, work practices and measurement outcome issues.
- WHS performance reports (e.g. monthly/ quarterly/annual).
- relevant senior management meeting minutes.
- governance forum meeting minutes i.e., audit and risk control committee, board meeting etc.
- corrective action/non-conformance reports.
- corrective action registers/requests.
- WHS plans.
- legislative update reports to relevant forums.
- system reviews and outcomes (i.e., audits against external standards/accreditation etc.).
- strategic Plan review and updates.
- internal/ divisional reports supporting WHS plans.
- verification processes/reports used to ensure actions are implemented.
- follow -up/verification audit reports.
- management system review forum and minutes, outcomes and decisions.
- survey outcomes, data.
- exit interview findings.

Glossary

Action plan	Describes the activities of the organisation to achieve the organisation's objectives and includes key elements for attention and/or review, the person responsible for action, and the timeframes intended for completion.
appropriate	Suitable or fitting for a particular purpose, person, occasion or intent.
competent	A person who is suitably qualified (by experience and/or training) to carry out the work or function described.
conformance	Activities undertaken and results achieved fulfil the specified requirements.
consultation	Consultation involves the sharing of information and the exchange of views between employers and the persons or associated stakeholder bodies that must be consulted and the genuine opportunity for them to contribute effectively to any decision-making process to eliminate or control risks to health or safety. The extent and nature of the consultation will vary between workplaces and the different situations.
contingency	Planning to maintain control of the management system applicable to a particular business during an unplanned event, such as fire, chemical spill, bomb threat, injury, and the loss of key personnel.
continuous improvement	Process of enhancing the health and safety systems, to achieve improvements in overall related performance, in line with the organisation's policies. The process need not take place in all areas simultaneously.

evaluate	To test and find value, quality etc., to appraise, make judgements.
hazard	A situation, task or object that has the potential to cause injury or illness.
incident	An unplanned occurrence, near miss or event that causes or contributes to personal injury or damage to property.
inspection	An examination of a workplace to identify and record hazards for corrective action and to check how safety features (hazard controls) are operating, paying attention especially to components most likely to develop unsafe or unhealthy conditions because of stress, wear, impact, vibration, heat, corrosion, chemical reaction or misuse, etc.
internal audit	A systematic, and wherever possible, independent examination, carried out by a competent person, appointed by the employer, in consultation with employees or their representatives, to determine whether an activity or activities and related results conform to planned arrangements; whether these arrangements are implemented effectively; and whether they are suitable to achieve the organisation's policy and objectives. The results of the internal audits must be documented and employees consulted over them. Preventive/corrective action plans must be subsequently developed.
key element	An essential component of the management system applicable to a particular business.
legislative compliance	Meeting the requirements of prevailing legislation.
management	A person or group of people that direct workers or controls or leads part or all the organisation.
measurement	Any technique used to measure any system or element outcome against objectives, targets, timeframes etc., established, or set by the organisation.
non-conformance	Activities undertaken and the results achieved do not fulfil the specified requirements of the elements. This may be due to the substantive absence or inadequate implementation of a system or documented systems or procedures not being followed.
objective	An overall goal in terms of performance, arising from policies that an organisation sets itself to achieve, and which is quantified, where practicable.
organisation	A company, corporation, firm, enterprise, government agency, institution, or other legal identity, or part thereof, whether incorporated or not, public or private, that has its own functions and administration.
performance indicator	A selected indicator of how effectively a process is operating against objectives. These indicators can be quantitative or qualitative and the choice is dependent on the type of element they are used to measure, as appropriate to the organisation.
policy	Statement by the organisation of its intentions and principles in relation to its overall health and safety performance. The policy provides a

	framework for action and for the setting of health and safety objectives and targets.
procedure	Written, detailed way to action/perform in conformance with policy objectives.
program	A planned component of an organisation's business management system for health and safety.
relevant	Connected with the matter in hand; pertinent (e.g. legislative requirements and/or other identified needs of the organisation).
target	A detailed performance requirement, quantified wherever practicable, pertaining to the organisation that arises from the health and safety. It needs to be met to achieve those objectives.
work health and safety (WHS) management system (System)	An orderly arrangement of interdependent activities and related procedures that drives an organisation's WHS performance.
workers	A worker is anyone who carries out work for the organisation regardless of whether they are full-time, part-time or casual. This can be an employee, contractor or subcontractor or an employee thereof, outworker such as a contractor or worker who is engaged to work from their home or at a place that would not previously have been thought of as a business premise, apprentice or trainee, school-based work experience student, labour hire worker or volunteer.
workplace monitoring	To check, observe or keep a record of something (by a person or a device), usually used for the evaluation of a hazard and for assessing the effectiveness of control measures.

Change Log

Date	Version	Change Type	Change Description
February 2025	1.0	Document creation	Restructure of the standards including alignment to contemporary standards, removal or merging of certain obligations, further guidance based on Evaluator focus areas. Consolidation of standards and guidance notes documents.

The following free information support services are available:

If you are deaf or have a hearing or speech impairment, you can call ReturnToWorkSA on **13 18 55** through the National Relay Service (NRS) **www.relayservice.gov.au**.

For languages other than English call the Interpreting and Translating Centre on **1800 280 203** and ask for an interpreter to call ReturnToWorkSA on **13 18 55**.

For braille, audio or e-text of the information in this brochure call **13 18 55**.