

WHS AUDIT PROCEDURE

1. INTRODUCTION

This document sets out the processes for developing and conducting the WHS audit programs at Charles Sturt Campus Services Limited. (CSCS)

2. SCOPE

The processes described apply to all WHS management system audits conducted at Charles Sturt Campus Services Limited.

3. DEFINITIONS

A comprehensive list of definitions is provided in the Definitions tool. Definitions specific to this procedure are provided below.

3.1 CORRECTIVE ACTION

Corrective action is action taken to eliminate the cause of a detected non-conformance or other undesirable situation.

3.2 NON-CONFORMANCE

A non-conformance is an activity or item that does not conform to the WHS policy, relevant work standards, practices, procedures or legal requirements or any other requirements of CSCS WHS management system.

3.3 WHS AUDIT

A WHS audit is a systematic, independent and documented process for obtaining evidence of the implementation of an WHS management system. WHS Audits are risk-based, designed to manage high risk areas/processes. Higher risk areas/processes are audited more frequently than lower risk areas/processes.

3.4 WHS AUDIT REPORT

A WHS audit report is a documented report of audit findings

4.5 TYPES OF WHS AUDIT

4.5.1 Self-audit

A self-audit is a WHS audit conducted by an administrative unit of their own WHS systems. A CSCS self-audit questionnaire is available at the WHS web site.

4.5.2 Internal WHS audit

An internal WHS audit is a WHS audit conducted by a CSCS internal auditor (s). Internal audits may be based on the broad requirements of CSCS WHS Management System or in applicable areas, on university chemical management requirements.

4.5.3 External WHS audit

An external WHS audit is a WHS audit conducted by an external consulting subject matter expert and assesses the implementation of the requirements of the CSCS WHS Management System for a particular hazard, activity or procedure.

4.5.4 Certification and surveillance audits

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

4. SPECIFIC RESPONSIBILITIES

A comprehensive list of WHS responsibilities is provided in the WHS roles, committees and responsibilities procedure. The responsibilities of WHS audit participants are detailed within.

5.1 WORKPLACE IMPROVEMENT OFFICER (WIO)

It is the responsibility of WIO to:

- coordinate the CSCS WHS audit program;
- distribute audit results;
- maintain records of audit programs; and
- assist administrative units to develop and apply corrective actions and controls to system or procedural deficiencies and non-conformances.
- verify that agreed corrective actions adequately address detected system or procedural deficiencies and non-conformances; and
- assist administrative units to address system or procedural deficiencies and non-conformances.

5.2 WHS AUDITOR

It is the responsibility of WHS auditors to:

- conduct audits;
- report on audit findings and non-conformances.

5.3 LEAD AUDITOR

Lead auditors are responsible for: ensuring the report is delivered to the area within the agreed timeframes

- ensure the audit meets the agreed scope and provide briefing to the audit team.

5. AUDIT

6.1 AUDITS WILL BE CONDUCTED TO:

- 6.1.1 assess compliance of the CSCS WHS management system with the requirements of AS/NZS 4801:2001 Occupational Health & Safety Management Systems – specifications with guidance for use and WHSAS 18001:2007 Occupational Health and Safety Management Systems- Requirements;
- 6.1.2 assess the extent of implementation of the CSCS WHS management system in the CSCS operations and activities; and
- 6.1.3 verify the implementation and effectiveness of the CSCS WHS policy and procedures.

6.2 WHS AUDIT PROGRAM

- 6.2.1 An audit program will be prepared and maintained by WHS. The audit schedule will be available at the WHS web site.
- 6.2.2 The audit schedule will reflect:

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

6.2.3 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.

6.3 AUDITOR COMPETENCY

Audit programs and processes are developed by staff, who have undertaken Lead Auditor WHS training.

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

- management system lead auditor training
- technical understanding of the WHS control requirements for the area or subject being audited.

6.3.2 Auditors must be approved by CSCS.

6.4 PRE-AUDIT ACTIVITIES

6.4.1 Prior to the audit, the WIO is responsible for:

- preparing an audit timetable;
- preparing audit checklists as required;
- collating relevant information for review by the audit team which may include operating procedures, previous audit findings, standards, legal requirements, internal procedures;
- contacting the unit to agree on and confirm the above information.

6.6 CONDUCTING THE AUDIT

Audits should be conducted by the audit team as follows using the following steps as a guideline:

6.6.1 The auditor will conduct audit, which will involve the following steps:

- conduct interview/discussion with area staff;
- obtain objective evidence for examination to assess conformance;
- follow audit trails to confirm evidence.

6.7 AUDIT REPORT

The WIO is responsible for finalising the audit report which may include:

- area and element/procedure/process audited;
- audit team, audit scope, persons interviewed;
- executive summary;
- summary of key findings (identified non-conformances);
- recommendations:
 - non-conformances

- opportunities for improvement, which are areas that may become non-conformances in the future; and
- graphical representation of findings.

The completed draft report is distributed to the General Manager and others as appropriate for comment. One to two weeks are allowed for comment and discussion of any requested changes.

6.8 CORRECTIVE ACTIONS

For information on corrective actions produced by an audit please see the WHS Corrective Actions Procedure.

6. RECORDS

Records to be kept include:

- self-audits
- workplace inspections

These records are kept as hard copy and electronically for a minimum 7 years.

7. TOOLS

Charles Sturt Campus Services **WHS Management System Audit Checklist**

8. COMPLIANCE

This procedure is written to meet the requirements of:

Work Health and Safety Act 2014

Work Health and Safety Regulations 2014

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

9. REFERENCES

9.1 CHARLES STURT CAMPUS SERVICES WHS DOCUMENTS

WHS Management System Audit Checklist

WHS Policy


WHS roles and responsibilities procedure

WHS Managing Company Documents



10. SIGN OFF

Company Representative:

Signed:  Date: 21-03-2018

Name: Martin Dooner Position: General Manager