# OHS MANAGEMENT SYSTEM IMPLEMENTATION PROCEDURE

**March 2015**

## TABLE OF CONTENTS

1. **PURPOSE** ......................................................................................................................................................... 2  
2. **SCOPE** ............................................................................................................................................................... 2  
3. **ABBREVIATIONS** .............................................................................................................................................. 2  
4. **DEFINITIONS** ..................................................................................................................................................... 2  
   4.1 MANAGEMENT SYSTEM .................................................................................................................................. 2  
   4.2 RISK REGISTER ............................................................................................................................................... 2  
5. **SPECIFIC RESPONSIBILITIES** .......................................................................................................................... 2  
6. **OCCUPATIONAL HEALTH AND SAFETY (OHS) POLICY** ........................................................................... 2  
7. **PLANNING** .......................................................................................................................................................... 3  
   7.1 HAZARD AND RISK MANAGEMENT ............................................................................................................... 3  
   7.2 LEGAL & OTHER REQUIREMENTS .................................................................................................................... 3  
   7.3 OHS PLANS .................................................................................................................................................... 3  
8. **IMPLEMENTATION AND OPERATION** ............................................................................................................ 4  
   8.1 RESOURCES .................................................................................................................................................... 4  
   8.2 RESPONSIBILITY, ACCOUNTABILITY AND AUTHORITY .................................................................................... 4  
   8.3 COMPETENCE, TRAINING AND AWARENESS ............................................................................................... 4  
   8.4 COMMUNICATION, PARTICIPATION & CONSULTATION ................................................................................... 4  
   8.5 DOCUMENTATION ......................................................................................................................................... 5  
   8.6 DOCUMENT CONTROL .................................................................................................................................. 6  
   8.7 HAZARD IDENTIFICATION, HAZARD/RISK ASSESSMENT AND CONTROL OF HAZARDS/RISKS .......... 6  
   8.8 EMERGENCY PREPAREDNESS & RESPONSE ............................................................................................. 6  
9. **MEASUREMENT AND EVALUATION** ............................................................................................................... 6  
   9.1 MEASUREMENT & MONITORING .................................................................................................................... 6  
   9.2 EVALUATION OF COMPLIANCE .................................................................................................................... 6  
   9.3 HAZARD AND INCIDENT REPORTING ............................................................................................................ 7  
   9.4 CONTROL OF RECORDS ................................................................................................................................. 7  
   9.5 AUDITS .......................................................................................................................................................... 7  
10. **MANAGEMENT REVIEW** .............................................................................................................................. 7  
    10.1 RESPONSIBILITY ........................................................................................................................................... 7  
    10.2 OHS PERFORMANCE INDICATORS .............................................................................................................. 7  
11. **TOOLS** ............................................................................................................................................................ 7  
12. **COMPLIANCE** ................................................................................................................................................. 8  
13. **DOCUMENT HISTORY** .................................................................................................................................... 9
1. PURPOSE


2. SCOPE

This document applies to all Monash University activities.

3. ABBREVIATIONS

MUOHSC  Monash University OHS committee
OHS     Occupational Health and Safety
OH&S    Monash Occupational Health & Safety
OHSMS   OHS management system
VC      Vice Chancellor

4. DEFINITIONS

4.1 MANAGEMENT SYSTEM

A management system is a set of interrelated elements used to establish policy and objectives and to achieve those objectives. It includes organisational structure, planning activities, responsibilities, practices, procedures, processes and resources.

4.2 RISK REGISTER

A risk register is a central repository for all risks identified by the organisation and for each risk includes a risk ranking based on likelihood and consequence, impact and control strategies.

5. SPECIFIC RESPONSIBILITIES

The Manager, Monash Occupational Health & Safety (OH&S) is responsible for implementing a process for ensuring that the OHSMS is applied across the University.

6. OCCUPATIONAL HEALTH AND SAFETY (OHS) POLICY

An OHS Policy must be produced to give direction to the management of OHS at Monash University.
7. **PLANNING**

7.1 **HAZARD AND RISK MANAGEMENT**

7.1.1 **Risk management**

There must be a documented method for the identification, assessment and control of OHS hazards and their associated risks. The detailed requirements are described in the document **OHS Risk Management Procedure**.

7.1.2 **Risk management tools**

An approved risk assessment tool must be available for use at Monash University. The details are described in the document **OHS Risk Management Procedure**.

7.1.3 **OHS risk register**

- OH&S must maintain an OHS risk register detailing the OHS risks associated with the university's operations.
- The register must include the likely impact of risks, causes and risk rating as well as the treatment strategies in place to minimise identified risks.
- Preventative and corrective actions identified as a result of the risk register shall be implemented as per the requirements of the OHS Preventative and Corrective actions procedure.

7.1.4 **Faculty & Divisional OHS risk register**

- Each Faculty and Division must produce a risk register detailing the OHS risks associated with their operations.
- The register must include the likely impact of risks, causes and risk rating as well as the treatment strategies in place to minimise identified risks.

7.2 **LEGAL & OTHER REQUIREMENTS**

Monash University shall maintain a documented set of procedures that include legal requirements that are directly applicable to the activities, products or services, including relevant relationships with contractors or suppliers.

7.3 **OHS PLANS**

The following OHS Plans must be produced:

- OHS Strategic Plan;
- Monash University OHS Plan;
- OH&S Operational Plan.

7.3.1 **Plan requirements**

7.3.1.1 The OHS Strategic Plan must:

- outline the university’s OHS focus for the next three years;
- must have at least four objectives;
- must have actions indented to achieve these objectives; and
- the actions must be measurable.

7.3.1.2 The Monash University OHS Plan must:

- be aimed at faculties and divisions to use as part of their annual planning process;
- hazard and incident data into account when determining objectives;
- give direction to faculties and divisions, but also allow for customisation;
- must have a built-in process for reporting progress every quarter; and
• progress on the plan must be reported by every faculty and division to MUOHSC.

7.3.1.3 The OH&S Operational Plan must:
• be aimed at helping OH&S achieve the objectives of the OHS strategic plan and additional operational requirements;
• take hazard and incident data into account when determining objectives;
• keep track of the progress towards these objectives; and
• progress must be reported to MUOHSC every quarter.

8. IMPLEMENTATION AND OPERATION

8.1 RESOURCES

Monash University must identify and allocate financial and physical resources to enable the effective implementation of the OHSMS. These resources must be provided for in budget allocation to OH&S and in the OHS budget of each academic/administrative unit.

8.2 RESPONSIBILITY, ACCOUNTABILITY AND AUTHORITY

The OHS roles and responsibilities for staff and students are detailed in OHS Roles, Responsibilities and Committees Procedure.

The Vice Chancellor (VC) is the designated legal authority, and is accountable for safety matters at Monash University. However the VC may choose to delegate responsibility for specific matters.

8.3 COMPETENCE, TRAINING AND AWARENESS

8.3.1 The requirements for training are detailed in the document OHS Induction & Training Procedure.

8.4 COMMUNICATION, PARTICIPATION & CONSULTATION

8.4.1 Consultation

8.4.1.1 The primary method for consultation must be through direct communication with Health & Safety representatives, staff and students via the OHS Consultants/Advisors.

8.4.1.2 The requirements for OHS consultation are detailed in:
• OHS Consultation Procedure
• Health & Safety Issue Resolution Procedure

8.4.1.3 Consultation with a range of staff and student groups must occurs via:
• Occupational Health and Safety Policy Committee;
• Faculty/Divisional OHS committees;
• Campus OHS committees; and
• Local OHS committees

8.4.2 Internal Communication

Monash University’s OHS Policy, OHS documentation and all other relevant OHS information must be communicated to staff, students, contractors and visitors through the following media as appropriate:
• OH&S website;
- Targeted or global emails to staff and students;
- On-line Monash OHS induction;
- Contractor safety induction;
- Contacting OH&S by phone, email;
- By using the Ask.Monash frequently asked question database;
- Academic/administrative unit handbooks and publications;
- Student information handbooks and publications; Safety manuals/safe operating procedures/safe work instructions; and
- Safety signage.

8.4.3 External Communication

Monash University must establish, implement and maintain a procedure for:
- Communication with contractors and other visitors to the workplace; and
- Receiving, documenting and responding to relevant communications from external interested parties.

8.4.4 Reporting

Monash University must measure and report on its OHS performance on a regular basis via:

8.4.4.1 Reports by OHS Consultants and Advisors to:
- Faculty/Divisional OHS committee meetings
- Local OHS committee meetings
- Campus OHS committee meetings.

8.4.4.2 Reports to MUOHSC by:
- OH&S;
- Sub-committees (Biosafety, Radiation Advisory Committee).

8.4.4.3 Reports by OH&S to:
- Audit & Risk Committee of Council;
- Senior Management Team;
- Director, Facilities and Services Division;
- Faculty Deans and Resource Managers, Divisional Directors and senior administrative staff.

8.4.4.4 Reports by MUOHSC to the VC following each meeting

8.4.4.5 The minutes of the quarterly MUOHSC meetings must be displayed on the OH&S web site.

8.4.4.6 Quarterly performance reports must be submitted to the Audit & Risk committee of Council.

8.5 DOCUMENTATION

8.5.1 The requirements for the OHSMS are described in this document. Certain key elements are described in more detail in their specific procedure, which are referenced in this document.

8.5.2 The requirements for documentation are detailed in the Local OHS Document Control and Retention Procedure.
8.6 DOCUMENT CONTROL
The requirements for the control of documents are detailed in the Local OHS Document Control and Retention Procedure.

8.7 HAZARD IDENTIFICATION, HAZARD/RISK ASSESSMENT AND CONTROL OF HAZARDS/RISKS
The requirements for hazard identification, risk assessment and risk control and the evaluation of effectiveness of control measures is documented in OHS Risk Management Procedure, OHS Audit procedure, OHS Hazard and Incident Reporting, Investigation and Recording procedure. Control of hazards/risks is documented in the OHS Preventative and Corrective Actions procedure.

8.8 EMERGENCY PREPAREDNESS & RESPONSE
8.8.1 Requirements for emergency planning and response must be documented.

8.8.2 Resources must be provided to respond to actual emergency situations and prevent or mitigate associated adverse OHS consequences.

8.8.3 The procedure for crisis response is detailed in Monash Crisis Management & Recovery Planning.

8.8.4 The emergency control organisation in each building must conduct an evacuation exercises in the first half and second half of each year.

8.8.5 For building with a student presence, one of these evacuations must be done during semester.

8.8.6 False alarms and genuine emergencies that occur during core business hours can count as an exercise for the requirements of 8.8.4.

8.8.7 OH&S may give specific buildings exemptions from 8.8.4, requiring the building to be evacuated only once per year.

9. MEASUREMENT AND EVALUATION
9.1 MEASUREMENT & MONITORING
The requirements for measurement and monitoring are detailed in the OHS Monitoring, Measurement and Registration Procedure.

9.1.1 Health Surveillance
The requirements for health surveillance programs at Monash University are detailed in the Health Surveillance Procedure.

9.2 EVALUATION OF COMPLIANCE
Monash University shall establish, implement and maintain a procedure for periodically evaluating compliance with applicable legal requirements.

Awareness of the OHS legal and other requirements must be kept up to date by:

- Subscription to legislation services for OHS, including Dangerous goods, workers’ compensation and building legislation.
- Web access to Standards Australia;
- Regular review of the OHS regulatory websites;
- Participation of OH&S staff in workshops, forums and programs run by WorkSafe Victoria.
9.3 HAZARD AND INCIDENT REPORTING
The requirements for reporting hazards and incidents, reporting methods and responsibilities are detailed in the Hazard and Incident Reporting, Investigation and Recording Procedure.

9.4 CONTROL OF RECORDS
OHSMS records must be maintained. The requirements are detailed in the OHS Records Management Procedure.

9.5 AUDITS
The requirements for auditing, reporting methods and responsibilities are detailed in OHS Audit Procedure.

10. MANAGEMENT REVIEW
10.1 RESPONSIBILITY
10.1.1 Academic/administrative units must meet the requirements of monitoring and measurement procedures.

10.1.2 The Manager, OH&S, must provide all relevant OHS performance indicators to the SMT.

10.1.3 Audit and Risk Committee of Council
The OHS performance indicators must be reported to every quarter.

10.1.4 An annual review meeting of the MUOHSC must ensure that the OHSMS continues to be an effective means of satisfying Monash University’s OHS Policy commitments and stated objectives. This review must include:
   - OHS performance indicators;
   - OHS risk and legal compliance registers;
   - A consolidated report of WorkSafe entry reports; and
   - Changes in operations (activities and structure).

10.1.5 A cyclic review of the university’s OHSMS must be conducted every three years, in conjunction with the update of this document.

10.2 OHS PERFORMANCE INDICATORS
10.2.1 Additional performance indicators include:
   - Legal compliance reports
   - Compensation claims
   - Health and Wellbeing

11. TOOLS
The following tools are associated with this procedure:

- OHS cyclic events checklist (pdf) (docx)
12. COMPLIANCE

This procedure is written to meet the requirements of:

- AS/NZS 4804:2001 Occupational health and safety management systems - General guidelines on principles, systems and supporting techniques

OHS performance indicators are measured based on the following procedures:

- Hazard and Incident Reporting, Investigation and Recording Procedure
- Risk Management Procedure
- OHS Audit Procedure
- OHS Roles, Committees and Responsibilities Procedures
- OHS Training and Induction Procedure
- Preventative and Corrective Actions Procedure
### 13. DOCUMENT HISTORY

<table>
<thead>
<tr>
<th>Version number</th>
<th>Date of Issue</th>
<th>Changes made to document</th>
</tr>
</thead>
<tbody>
<tr>
<td>2</td>
<td>February 2011</td>
<td>Guide to the OHS Management System at Monash University, v2</td>
</tr>
</tbody>
</table>
| 3              | March 2013    | 1. Changed guide to procedure  
2. Changed the intent of the document from describing the OHSMS to stating the requirements of the OHSMS.  
3. Changed the structure of document to make it more closely resemble AS18001.  
4. Reduced the detail of some sections and referred to the requirements listed in other documents.  
5. Made a risk register for Faculties/Division compulsory.  
6. Increased the detail of the planning section to list requirements for what plans are required.  
7. Changed the reporting section to increase the scope of what can be reported on.  
8. Removed some specifics on what is reported on.  
9. Defined the key responsibility of the VC.  
10. Clarified the process for review of the OHSMS.  
11. Added document history section.  
12. Deleted OHSMS Chart. |
| 3.1            | December 2014 | 1. Modified section 8.8 to clarify that buildings need to be evacuated once in the first half of the year and once in the second half of the year.  
2. Listed the exceptions to this rule.  
3. Added the suggestion that buildings with students should conduct at least one evacuation trial during semester. |
| 3.2            | March 2015    | 1. Deleted reference to “controlled entities” in all sections of document.  
2. Added ‘Tools’ section with link to “OHS cyclic checklist”  
3. Changed heading from “References” to “Compliance” |
| 3.3            | July 2015     | 1. Updated hyperlinks throughout to new OH&S website. |
| 3.4            | July 2017     | 1. Updated hyperlinks throughout document.  
2. Minor formatting changes. |