

HSW MANAGEMENT SYSTEM AUDIT STANDARD

SCOPE

This standard applies to all HSW Management System (HSWMS), including hazard specific audits conducted by, or on behalf of, Monash University.

For the purpose of this Standard, references to 'the University' includes activity at Monash University Australia, Monash University Malaysia, Monash University Indonesia, Monash Suzhou, the Monash University Prato Centre, Monash College Pty Ltd and World Mosquito Program Ltd (and its subsidiaries), unless indicated otherwise.

This standard sets out the processes for developing and conducting audit for the HSWMS and identified hazard at Monash University to ensure:

1. All facets of the University's activities are evaluated against the requirements established by the Monash University HSWMS and, where deficient, action is recommended.
2. Systems of work that represent best practice are identified.
3. Challenges arising as a result of the implementation of the HSWMS are identified and improvements recommended.

1. Abbreviations

B&P	Buildings and Property
MUM	Monash University Malaysia
MUOHSC	Monash University Occupational Health and Safety Committee
HSWMS	Health, Safety & Wellbeing Management System
HSW	Health, Safety & Wellbeing

2. HSWMS Audit Program

2.1 HSW Audit Programs

- HSW Audit Programs comprises HSW audit schedules, pre-audit documentation and audit report incorporating a set of HSW audit questions with a methodology for rating audit findings and recommendations where applicable.
- All HSW audit schedules are prepared and maintained by the Health, Safety & Wellbeing team or Monash University Malaysia (MUM) Occupational Health Safety and Environment (HSWE).

2.1.1 To ensure HSW audit schedules have incorporated all facets of the University's operations and activities, the areas will be selected based upon:

- The level of risk associated with the activities being undertaken in the area.
- The number of workers present in the area;
- The interval from the last audit conducted in that area;
- Previous audit results;
- Regulatory inspections or entry reports;
- Operational changes;

- Management reviews;
- Incidents; or Identified non-conformances.

2.1.2 All HSW audit programs must be approved by the Occupational Health, Safety and Wellbeing Leaders.

2.1.3 The set of HSW Audit questionnaires and HSW Audit templates must be approved by the Occupational Health, Safety and Wellbeing Leaders before commencing auditing.

2.1.4 The HSW Audit Programs may be adjusted by the Health, Safety and Wellbeing Leaders at any time, if there is additional information on any of the above criteria that warrants it.

2.1.5 When the HSW Audit Program is finalised the Health, Safety and Wellbeing Leaders will make the Audit Program publicly available, for example on the Monash intranet and table it at the Monash University HSW Committee (MUOHSC) or Occupational Health, Safety and Wellbeing Committee (OHSWC). The HSW Consultant/Advisor for the particular areas will also inform local stakeholders as appropriate.

2.2 Auditor Competency

2.2.1 The Health, Safety and Wellbeing Leaders must ensure that all HSW Lead Auditors are appropriately trained and experienced including:

- Completion of a recognised HSW Lead Auditor course.
- Sufficient understanding of the HSWMS, relevant legislation and standards applicable to the area being audited.
- HSW Lead Auditors are responsible for the selection and conduct of all personnel assisting in the audit.

2.3 Pre-audit Activities

2.3.1 Prior to each HSW audit, the relevant HSW Consultant/Advisor will:

- Prepare a list of stakeholder contacts and share the contacts with the Health, Safety and Wellbeing Leaders
- Prepare the area to be audited by providing ongoing consultation and advice prior to the audit regarding
- Attending to stakeholder questions and queries as they arise; and
- Ensure stakeholders have identified all relevant staff required to be involved for the audit and meeting facility has been arranged.

2.4 Pre-audit Meeting

2.4.1 Prior to each HSW audit, the Compliance Coordinator and MUM HSW Manager will notify relevant stakeholders via email at least four weeks prior to the audit, unless otherwise agreed upon.

2.4.2 The option to hold a pre-audit meeting will be provided to relevant stakeholders. Where the relevant stakeholders would like a pre-audit meeting, the pre-audit meeting may involve the:

- Head of academic/administrative unit (Australia) and School/Unit (Malaysia);
- Safety Officer/s and staff with safety roles;
- Health & Safety Representative/s;
- Resources manager/s;
- HSW Lead Auditor;
- Compliance Coordinator; and
- HSW Consultant/Advisor.

2.4.3 The pre-audit meeting should address:

- audit scope including the activities and workers to be assessed;
- audit method including the duration and teams assigned to be assessed and audit schedule;
- specified requirement to access certain areas such as keys and personal protective equipment;
- process followed when an immediate risk to health and safety is identified during audit;
- timelines to prepare and deliver the draft and the finalised HSWMS Audit reports;
- address any stakeholders' questions; and
- provide any documentation such as any relevant scoping documents that need to be completed and forwarded to the relevant Lead Auditor prior to the audit day and specify all timeframes and due dates.

2.5 Conducting an Audit

2.5.1 The HSW Lead Auditor must ensure that:

- The questions relevant to the audit are provided to the stakeholders.
- All observations, evidence sighted, findings, audit ratings, and any recommendations, are properly documented.
- The audit team is maintaining professional etiquette at all times.
- At the conclusion of the audit, participants:

- are provided with an overview of the preliminary findings;
- are given an opportunity to agree upon a final evidence collection date. This should be no greater than three business days from the date of the audit, or otherwise agreed on the day of the audit. Failure to provide evidence may affect the audit rating.
- are made aware of the next steps and timeframes of the reporting process;
- are provided with relevant resources which were loaned during the audit (e.g. keys); and
- are asked to provide feedback with respect to customer focus and process improvement.

2.6 Audit Report

- 2.6.1 The HSW Lead Auditor is responsible to prepare the audit report, within three weeks of the audit day closure.
- 2.6.2 Upon receipt of the draft report, the Health, Safety and Wellbeing Leaders must review the draft report within one week.
- 2.6.3 The draft report must be distributed to the nominated representatives of the area, unless otherwise agreed by the Health, Safety and Wellbeing Leaders.
- 2.6.4 The nominated representatives have two weeks to provide feedback, in writing. Failure to provide feedback will be taken to deem acceptance of the audit report. All feedback will be given due consideration and every opportunity will be undertaken to ensure customer satisfaction is given.
- 2.6.5 Once the audit report is finalised, it will be distributed to the nominated representatives within three business days.

2.7 Actions Management

- 2.7.1 Recommendations must be addressed in accordance with the [Management of HSW Actions Standard](#).

3. Records

For HSW Records document retention please refer to the University's: [Information Governance and Recordkeeping Procedure](#)

DEFINITIONS

Definitions specific to this standard are provided below.

Key word	Definition
Non-Conformance	A non-conformance is an activity or item that does not conform to the requirements established by the HSWMS.
Occupational Health, Safety and Wellbeing Leaders	Person or group of people who direct and are responsible and accountable for HSW at the highest level within each area of the Monash Group e.g. Director, Health Safety & Wellbeing, MUM HSW Manager, etc.
SWMS Audit	A systematic, independent and documented process for evaluating the level of conformance of current systems of work to the requirements of the HSWMS. There are 2 types of HSWMS Audit 1. Certification and an HSWMS audit conducted by a Joint Accreditation System of surveillance audits Australia and New Zealand (JAS-ANZ) accredited organisation with the authority to certify the University's HSWMS to ISO 45001:2018 Occupational Health and Safety Management Systems. 2. Internal HSW audit An HSWMS or hazard specific audit conducted under the direction of the Health, Safety and Wellbeing Manager by appointed auditor(s) independent of the area being audited.

HSW Audit ratings	An evaluation of conformance to the requirements established by the HSWMS that are broken up into the following rating classifications: 1. Exceed Conformance (XC): The assessment criteria of the HSWMS is being met and there is evidence to support this rating. The area has also implemented additional systems or processes that complement the HSWMS and enable a better proactive management of HSW. 2. Conformance (C): The assessment criteria of the HSWMS is being met and there is evidence to support this rating. 3. Opportunity for the assessment criteria of the HSWMS is being met and there is improvement (OFI): Evidence to support this rating. Improvement/s to the HSW management practices have also been identified. When identified: • This report will make recommendation/s; • While the recommendation is not mandatory, if it is not going to be actioned, an explanation is required to be made to the satisfaction of the auditor and the Occupational Health, Safety and Wellbeing Leaders; and • A documented management plan to adequately action the OFI is required within 1 month from the issuing of the final report. 4. Minor non-conformance: The assessment criteria of the HSWMS is not being adequately conformance (Minor met and HSW objectives are only partially effective and there is NC) evidence to support this rating. When identified: • This report will make recommendation/s; • A management plan to adequately action the MINOR NC is required to be documented within 1 month from the issuing of the final report; and • The Minor Non-conformance must be rectified in accordance with the Management of HSW Actions Standard. 5. Major non-conformance: The assessment criteria of the HSWMS is not being met or the conformance (MAJOR outcome is ineffective and there is evidence to support this rating. NC) When identified: • This report will make recommendation/s; • A management plan to adequately action the MAJOR NC is required to be documented within 2 weeks from the issuing of the final report; and • The Major Non-conformance must be rectified in accordance with the Management of HSW Actions Standard. • A follow-up audit may be required to verify the effectiveness of the corrective action/s. 6. Not applicable (N/A) The question relating to the assessment criteria of the HSWMS is not relevant to the area.
HSW Audit Report	An HSW audit report is a documented report of the audit findings.
HSW Audit Schedule	The planned upcoming HSWMS audits.
HSW Audit Timetable	The specific sequence of activities during an audit.

GOVERNANCE

Parent policy	HS&W Policy
Supporting documents	Monash HSW documents HSW Roles and Responsibilities Standard Management of HSW Actions Standard
Supporting schedules	N/A
Associated documents	Australian and International Standards ISO 45001:2018 Occupational Health and Safety Management Systems
Related Legislation	Occupational Health and Safety Act 2004 (Vic) Occupational Health and Safety Regulations 2017 (Vic) Occupational Safety and Health Act (Act 514) (Malaysia)
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DOCUMENT HISTORY

Version	Date Approved	Changes made to document
1.0	2026	Administrative changes due to: ● Conversion of Procedure to a HSW Standard ● Transition Procedure out of University Policy Bank on to HSW website

