SCOPE

This Procedure relates to all activities under the management and control of Monash University and applies to affected workers, students, contractors and visitors.

For the purpose of this procedure, references to ‘the University’ includes activity at Monash University Australia, Monash University Malaysia, Monash University Indonesia, Monash Suzhou and the Monash University Prato Centre, unless indicated otherwise.

PROCEDURE STATEMENT

The purpose of this document is to define the process that Monash University uses for the identification, assessment, control and review of Occupational Health and Safety (OHS) hazards and their associated risks.

1. Abbreviations

<table>
<thead>
<tr>
<th>Abbreviation</th>
<th>Description</th>
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<tbody>
<tr>
<td>MTLD</td>
<td>Monash Talent and Leadership Development</td>
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<tr>
<td>OH&amp;S</td>
<td>Monash Occupational Health &amp; Safety</td>
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<td>OHS</td>
<td>Occupational Health and Safety</td>
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<tr>
<td>SARAH</td>
<td>Safety and Risk Analysis Hub</td>
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</table>

2. Identifying the need to conduct an OHS risk assessment

2.1 Operational managers must ensure that Activity or Task based risk assessments are completed and controls are in place prior to commencement of the activity or task being undertaken when:

2.1.1 A hazard arising from an activity presents an unacceptable level of risk. The hazard must be documented in the online system SARAH in accordance with the Managing OHS Hazards and Incidents Procedure;

2.1.2 An incident occurs that identifies inadequacies in the existing control measures for an activity. The incident must be documented in the online system SARAH in accordance with the Managing OHS Hazards and Incidents Procedure;

2.1.3 New activities are being proposed that may present unknown risks (e.g. new requirements of a project, etc); or

2.1.4 Following a change of operational requirements.

2.2 Operational managers must ensure that a Risk Assessment is undertaken prior to the initial procurement of goods and services and that:

2.2.1 The affected workers are consulted on the procurement process in accordance with the OHS Consultation Procedure;

2.2.2 Where indicated, goods and services are procured from the University’s approved suppliers;

2.2.3 Where applicable, goods and services meet any relevant Australian or International Standards or follow the industry best practice;
2.2.4 The requirements of the OHS Contractor Management Procedure are met prior to engaging any contractors.

2.3 Following the procurement process, the Operations Manager must verify that equipment, installations and materials are safe for use by ensuring that:
- Equipment is delivered according to specifications and is tested to ensure it works as intended;
- Installations are commissioned to ensure they function as designed;
- Materials are delivered according to their specifications;
- Any usage requirements, precautions or other protective measures are communicated and made available to the relevant workers.

2.4 The verification process outlined in 2.3 must be recorded and the record maintained locally in accordance with the OHS Records Management Procedure.

2.5 Operational managers must ensure that Location or Facility Risk Assessments are completed and controls are in place before works are performed if:
- A space they control presents an immediate risk to health and safety. The risk must be documented in the online system SARAH in accordance with the Managing OHS Hazards and Incidents Procedure;
- An incident occurs that identifies inadequacies in the existing control measures for a location. The incident must be documented in the online system SARAH in accordance with the Managing OHS Hazards and Incidents Procedure; or,
- A space will be utilised in a novel way that may present unknown risks (e.g. events, renovations, etc).

2.6 Operational managers must ensure that Personal Risk Management Plans are completed and controls are in place if:

- A person entering the workplace may be unable to perform work safely due to personal factors. As these risk assessments are very likely to contain sensitive and personal information they must be entered as ‘Restricted Risk Assessments’.

2.7 Senior executives must ensure that their Faculty or Division has an OHS Risk Register that:
- Identifies and assesses risks that have the potential to impact the Faculty or Division;
- Details any strategies in place to eliminate or minimise identified risks;
- Details any proposed strategies to eliminate or minimise risk and specifies a person responsible and timeframe for implementation;
- Has been reviewed at least annually.

2.8 Any party may choose to initiate the Health & Safety Issue Resolution Procedure if there is any dispute as to whether:
- A risk is acceptable;
- There is the need for a risk assessment;
- Risks were adequately evaluated and sufficient controls were identified;
- The risk assessment owner or approver is appropriate.

3. OHS Risk Assessment Process

3.1 The Risk Owner must be competent in the process of risk assessment. Formal Risk Management training is available through myDevelopment. In addition, tutorial videos are available from the OH&S website.

3.2 The Risk Owner must ensure that:
- The appropriate Risk Approver is selected for the relevant activity, unless the risk assessment is centrally managed;
- All risk assessments are documented in the online system SARAH unless otherwise approved by the Manager, OH&S;
- Risk assessments that include confidential information (e.g. a person’s health condition, commercial in confidence) have been entered using the Restricted Risk Assessment option;
- A standard naming convention is used in the prefix of the Risk Assessment Name, which identifies their local business unit. The Naming Guide is available to assist with naming risk assessments;
- The scope of the risk assessment has been clearly defined and includes details of:
  - The activity being performed;
  - Any limitations (e.g. the assessment focuses only on specific elements of equipment or process);
- Verify that the correct Risk Approver is selected;
● Each potential risk factor is identified and described, including all mechanisms and associated agencies of injury and how the risk could be realised;

● The current level of risk has been assessed by:
  - Confirming the availability and suitability of all existing control measures in place;
  - Utilising the OHS Risk Matrix in SARAH (refer to 8.1) to assign most probable consequence and corresponding likelihood.

● Key stakeholders, e.g. Operational Managers and relevant subject matter experts have been invited to review the assessment using the ‘Peer Review’ command function in SARAH.

3.3 The Risk Owner may recommend or propose additional controls that could further reduce the risk level.

4. Approval

4.1 The Risk Approver must:

   4.1.1 Have a current training qualification in accordance with the OHS Training Requirements Matrix.

   4.1.2 Verify that:
   ● The scope of the risk assessment is appropriate;
   ● The mechanisms and agencies of injury are accurate;
   ● All existing controls are present;
   ● All proposed controls are valid and must be implemented; and
   ● The risks identified are:
     - Acceptable - in which case the risk assessment must be approved as soon as possible;
     - Unacceptable - in which case the risk assessment must be rejected and appropriate feedback provided to the Risk Owner as soon as possible.

5. Post-Approval

5.1 Once a risk assessment has been approved, it is the responsibility of the person assigned to each proposed control to action it in accordance with the Management of OHS Actions Procedure.

5.2 Approval of a risk assessment does not constitute approval to commence work, which may only be granted by the relevant Operational Manager.

5.3 Operational Managers must ensure that agreed control measures are present.

5.4 Operational Managers must ensure that all affected persons have access to the relevant risk assessments.

6. Review of Risk Assessments

6.1 Risk assessments must be reviewed:

   ● At least every three years;
   ● When there is a significant change to the process/activity;
   ● When a control may not be reasonably implemented;
   ● When the level of risk is no longer considered acceptable based on the current control measures (e.g. as identified by a hazard or incident report, changes to processes).

6.2 Risk assessments must:

   ● Be reviewed using the ‘Formal Review’ command button in SARAH and the effectiveness of current controls evaluated; or
   ● Archived using the ‘Archive’ command button in SARAH, if no longer required.

7. OHS Risk Management Plans

7.1 OHS Risk Management Plans can be created in SARAH using the Event Risk Management Planning Tool for activities such as Monash University organised events, off-campus activities and travel.

7.2 OHS Risk Management Plans must include:

   7.2.1 The types of activities and any associated risk assessments, and the locations and periods in which activities will be performed;
7.2.2 The owner of the plan and their contact details;
7.2.3 The approver of the plan, their contact details, and the date of approval.
7.2.4 OHS Risk Management Plans must be approved by the person in control of the activity.

8. Tools

8.1 SARAH Risk Matrix

8.2 The following guidance notes should be consulted when assessing risks arising from:

- Chemicals
- Biologicals
- Ergonomic/Manual handling
- Radiation

9. Records

9.1 Risk assessments must be kept in accordance with the OHS Records Management Procedure.

DEFINITIONS

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

<table>
<thead>
<tr>
<th>Key word</th>
<th>Definition</th>
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<tbody>
<tr>
<td>Activities</td>
<td>Any process which may involve the procurement of goods and/or services, travelling, using equipment, using chemicals and/or other hazardous items, conducting field work, engaging with other people, etc. For further details refer to the OHS Classifications page.</td>
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<tr>
<td>Acceptable level of risk</td>
<td>A level of risk that under the circumstances, is reasonably practicable to accept.</td>
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<tr>
<td>Agency of injury</td>
<td>The type of object, item, substance, material, or structure that can cause injury. For details refer to the <a href="#">OHS Classifications page</a>.</td>
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<tr>
<td>Consequence</td>
<td>The severity of the impact of a hazard on affected persons.</td>
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<tr>
<td>Controls</td>
<td>Steps taken to eliminate or reduce the risk of harm occurring to person/s exposed to a hazard.</td>
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<tr>
<td>Mechanism of injury</td>
<td>How an injury was, or may be, sustained. For details, refer to the <a href="#">OHS Classifications page</a>.</td>
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<tr>
<td>Operational Manager</td>
<td>The person in control of the activities that are being performed within a specific workplace. In some instances, the Operational Manager may also be the Risk Approver, e.g. laboratory supervisor, workshop manager.</td>
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<tr>
<td>Risk Approver</td>
<td>The person responsible for controlling the risks associated with the activities undertaken by the worker, student or contractor under their supervision. For example, the Performance Manager/Supervisor/Contractor Responsible Person.</td>
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<tr>
<td>Risk assessment</td>
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</tbody>
</table>
**Location or Facility Risk Assessment**
Risks that arise from a location (such as a facility or venue)

**OHS Risk Register**
Risks across an entire faculty or division

**Personal Risk Management Plan**
Risks unique to an individual (such as that result from a personal health condition)

**Centrally Managed Risk Assessment**
Risks managed centrally with controls that apply to the entire organisation

**Risk Owner**
The person documenting the risk assessment.

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**GOVERNANCE**

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<thead>
<tr>
<th>Parent policy</th>
<th>OHS&amp;W Policy</th>
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</table>
| Supporting procedures | Document Control & Retention Procedure  
Health & Safety Issue Resolution Procedure  
Management of OHS Actions Procedure  
Managing OHS Hazards and Incidents Procedure  
OHS Consultation Procedure  
OHS Contractor Management Procedure  
OHS Induction & Training Procedure  
OHS Roles, Responsibilities and Committees Procedure  
OHS Records Management Procedure |
| Supporting schedules | N/A |
| Associated procedures | Australian and International Standards  
| Legislation mandating compliance | Occupational Health and Safety Act 2004 (Vic)  
Occupational Health and Safety Regulations 2017 (Vic) |
| Category | Operational |
| Approval | Chief Operating Officer & Senior Vice-President  
March 2021 |
| Endorsement | Monash University OHS Committee  
18 March 2021 |
| Procedure owner | Manager, OH&S |
| Date effective | March 2021 |
| Review date | 2024 |
| Version | 8.3 (Minor amendments effective 4 October 2021) |
| Content enquiries | ohshelpline@monash.edu |
## DOCUMENT HISTORY

<table>
<thead>
<tr>
<th>Version</th>
<th>Date Approved</th>
<th>Changes made to document</th>
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</table>
| 5       | August 2015   | 1. Added exemption to the requirement for using S.A.R.A.H. when the risk assessment has confidential information.  
2. Changed the wording in some sections to improve clarity. |
| 5.1     | August 2017   | 1. Updated logos in header.  
2. Updated OHS Regulations to 2017. |
| 6       | September 2018| 1. Added mechanism and agency to the definitions section of the procedure.  
2. Improved the clarity around when a risk assessment needs to be done and made “acceptable level of risk” the key driver.  
3. Added the responsibility for OHS committees to review risk. Assessments that have a residual risk of high.  
4. Added Approval section.  
5. Confidential Risk Assessment template. |
| 7       | November 2019 | 1. Clarified when Risk Assessments are required.  
2. Included risk management planning.  
3. Included restricted risk assessment option.  
4. Added definitions for Likelihood and Consequence categories.  
5. Clarified that the OHS Risk Matrix in SARAH must be used for OHS risk evaluation.  
6. Clarified the responsibilities for Operational Managers.  
7. Added the requirement for evaluation of effectiveness of current controls using SARAH  
8. as part of the ‘Formal review’ process.  
9. Included requirement to ‘Peer review’  
10. Removed the Risk management flow chart.  
11. Updated references to current Monash University procedures.  
12. Changes to wording to improve clarity.  
13. Updated certification logo in header. |
| 8       | March 2021    | 1. Added risk management requirements for the procurement of goods and services to align with ISO 45001.  
2. Added the various risk assessment types and expanded on the times when these must be undertaken. |
| 8.1     | April 2021    | 1. Updated wording in section 4.1.1 to reflect changes to training requirements. |
| 8.2     | July 2021     | 1. Updated certification logo in footer to ISO 45001  
2. Updated the Standard to ISO 45001 under “Associated procedures” in the Governance table  
3. Updated OHS Policy under ‘Parent Policy’ to OHS&W Policy |
| 8.3     | October 2021  | 1. Updated Scope statement to include Monash University Malaysia, Monash University Indonesia, Monash Suzhou and the Monash University Prato Centre |