

## MEASUREMENT AND EVALUATION

## 4.1 INTERNAL AUDIT

## 4.1.1 Objective

- To conduct a systematic process of internal review against defined criteria to ensure that the University's Health Safety and Wellbeing (HSW) policy objectives are being met;
- To ensure that system deficiencies are identified, recorded and actioned in consultation with personnel or their representatives;
- To ensure continuous improvement of the HSW Management System;
- To meet the requirements of the [Health Safety and Wellbeing \(HSW\) policy](#).

## 4.1.2 Scope

This applies to health, safety and wellbeing systems developed and controlled by the University of Adelaide.

## 4.1.3 Process: Planning the Internal Audit Plan and Cycle

Person Responsible		Actions
4.1.3.1	Health Safety & Wellbeing Team	<input type="checkbox"/> Construct (and review annually) a five year internal audit plan which includes all Schools/Branches and all HSW processes. <input type="checkbox"/> Determine the HSW processes that are to be included in the annual cycle based on (but not limited to): <ul style="list-style-type: none"> <li>• the five year audit plan;</li> <li>• emerging hazards and issues; and</li> <li>• areas which have scored less than 25% in the previous audit cycle.</li> </ul> <input type="checkbox"/> Ensure that the Audit plan is communicated to all Health and Safety committees and made available on the web.
4.1.3.2	Manager HSW	<input type="checkbox"/> Nominate the lead auditor from the HSW team members who have completed a recognised OH&S Audit training course. <input type="checkbox"/> In consultation with the lead auditor determine which topics will be audited or surveyed.
4.1.3.3	Lead Auditor	<input type="checkbox"/> Ensure that question sets are created, based on the performance measures (contained under sections in the HSW Handbook) and other legislative requirements, where applicable. <input type="checkbox"/> Determine the structure of the annual audit, either; a University-wide or; a cross sectional sample approach. <input type="checkbox"/> Nominate the audit team from HSW Team members who have completed a recognised OH&S Audit training course. <input type="checkbox"/> Assign auditors to areas where they do not have regular management involvement (to ensure impartiality).

## 4.1.4 Process: Implementation of the Internal Audit Cycle

Person Responsible	Actions
4.1.4.1 Lead Auditor	<input type="checkbox"/> Conduct a pre-audit meeting with the audit team to decide which of the following elements will apply: <ul style="list-style-type: none"> <li>• Documentation review where the auditors review records, documentation and systems.</li> <li>• An inspection of the audited area.</li> <li>• Formal interviews with:               <ul style="list-style-type: none"> <li>• Head of School/Branch, HSR, HSO (where applicable);</li> <li>• at least three staff and/or students; and</li> <li>• other individuals where relevant.</li> </ul> </li> </ul>
4.1.4.2 Auditors	<input type="checkbox"/> Forward the audit scope (elements and documentation requirements) to the audit areas at least two weeks before each internal audit. <input type="checkbox"/> Schedule and conduct the audit at a mutually agreeable time.

## 4.1.5 Process: School/Branch Measurement and Evaluation

Person Responsible	Actions
4.1.5.1 Auditors	<input type="checkbox"/> Record all observations and deficiencies during the audit and enter the results into the Risk Management Safety System (RMSS). <input type="checkbox"/> Ensure that corrective action timeframes are based on a <a href="#">risk assessment tool</a> . <input type="checkbox"/> Forward the draft report to the area within one month of completion, so the School/Branch has the opportunity to comment on: <ul style="list-style-type: none"> <li>• the findings;</li> <li>• the corrective actions assigned;</li> <li>• the action timeframe; and</li> <li>• a suitable person to complete the actions, where applicable.</li> </ul> <input type="checkbox"/> Ensure that comments or extra information from the School/Branch are incorporated into the final report and all corrective actions are assigned in RMSS. <input type="checkbox"/> Submit a final written report to the Head of School/Branch, HSR and HSO (where applicable) after consultation is completed.
4.1.5.2 School/Branch Head (Any or all of these tasks can be delegated to School/Branch staff (ie Health and Safety Officer), however the Head of School/Branch must monitor the tasks on a regular basis to ensure they occur.)	<input type="checkbox"/> Ensure that the report findings are communicated to the School/Branch (e.g. areas of success and corrective actions). <input type="checkbox"/> Ensure that all corrective actions are completed within the allocated timeframe.

## 4.1.5 Process: School/Branch Measurement and Evaluation (Continued)

Person Responsible	Actions
4.1.5.3 Lead Auditor	<ul style="list-style-type: none"> <li><input type="checkbox"/> Ensure that during the audit cycle that trends are identified and strategies are discussed with the Manager, HSW.</li> <li><input type="checkbox"/> Rate each audit according to: <ul style="list-style-type: none"> <li>- Poor (remedial action required &amp; reaudit) 25% and lower</li> <li>- Unsatisfactory (monitored action required) 26%-50%</li> <li>- Satisfactory (requiring improvement) 51%-75%</li> <li>- Good 76%-100%</li> </ul> </li> <li><input type="checkbox"/> Conduct a full re-audit on all poor performers (25% and lower) within 6 months of completion of the original audit.</li> </ul>

## 4.1.6 Process: University Review and Improvement

Person Responsible	Actions
4.1.6.1 Lead Auditor	<ul style="list-style-type: none"> <li><input type="checkbox"/> Analyse results of each audit and create a consolidated university audit report and submit it to Manager of HSW within two months from the completion of each audit cycle.</li> <li><input type="checkbox"/> Rate the overall University results according to: <ul style="list-style-type: none"> <li>- Poor (remedial action required &amp; reaudit) 25% and lower</li> <li>- Unsatisfactory (monitored action required) 26%-50%</li> <li>- Satisfactory (requiring improvement) 51%-75%</li> <li>- Good 76%-100%</li> </ul> </li> <li><input type="checkbox"/> Identify strategies from overall results and trends.</li> <li><input type="checkbox"/> Rate the found deficiencies according to the following criteria (to allow management of the University to understand the urgency for rectification of the issues): <ul style="list-style-type: none"> <li>- High (Immediate) – serious deficiency which will affect the ability for the University to achieve corporate safety objectives or legislative breach.</li> <li>- Medium (3-6 months) – a deficiency which could undermine the HSWMS or Policy or HSW Handbook objectives.</li> <li>- Low (6-12 months) – a deficiency which is unlikely to have an adverse effect on the University's safety objectives or the HSWMS (normally administrative in nature).</li> <li>- Opportunity for improvement (no timeframe required) – This is a small deficiency which requires correction but will have a negligible effect on policy or HSW Handbook objectives; or an idea which has a potential improvement opportunity.</li> </ul> </li> </ul>

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## 4.1.6 Process: University Review and Improvement (Continued)

Person Responsible	Actions
4.1.6.1 Lead Auditor  (Continued)	<input type="checkbox"/> Link all strategies identified from the consolidated audit to the policy, HSW handbook, or an appropriate plan e.g. training, action register, and University HSW action plans (where applicable). <input type="checkbox"/> Enter all strategies into RMSS ensuring that time frames are determined using the "Corrective Action Information Sheet – determining timeframes for HSW strategy actions" contained in the HSW Operations manual. <input type="checkbox"/> Disseminate consolidated University audit report to UHSC by December each year. <input type="checkbox"/> Monitor strategies to ensure completion. <input type="checkbox"/> Revise and improve the audit plan, where necessary.

## 4.1.7 Performance Measures

	Measures	Objective Evidence	Accountable Person(s)
4.1.7.1	All Internal Audits are linked to legislation and/or policy and/or performance measures contained in the sections of the HSW handbook.	Legislation or sections of the handbook are referenced in internal audit documentation.	Manager, HSW
4.1.7.2	All Internal Audits are consolidated and the findings analysed to determine if the policy objectives have been met.	Consolidated audit document	Manager, HSW
4.1.7.3	All internal audit corrective actions are entered into RMSS	RMSS Action Report	Manager, HSW
4.1.7.4	All internal audit results are analysed (against policy objectives) and strategies identified where deficiencies are identified.	Consolidated audit document	Manager, HSW
4.1.7.5	All strategies identified are fed into review of the policy/HSW handbook or linked to the most appropriate plan (e.g. University action plans, training plan, and corrective action register).	HSW Policy/HSW Handbook, action plan, training plan or RMSS actions register.	Manager, HSW

## 4.1.8 Useful information and resources:

4.1.8.1	<b>University related documents and policies</b> <ul style="list-style-type: none"> <li>• <a href="#">HSW Policy</a></li> <li>• <a href="#">HSW Handbook : Performance measures in all sections</a></li> </ul>
4.1.8.2	<b>Related Legislation and Australian Standards</b> <ul style="list-style-type: none"> <li>• <a href="#">Occupational Health, Safety and Welfare Act 1986 Sections 19, 20</a></li> </ul>
4.1.8.3	<b>Useful Web-links</b> <ul style="list-style-type: none"> <li>• <a href="#">WorkCover Performance standards for Self-Insurers</a></li> </ul>

## 4.1.9 Definitions

**Audits**

Tools to determine implementation of handbook processes. They are mapped against Legislation and/or Handbook Chapter and are rated to determine effectiveness of policy objectives. From the results actions and strategies are assigned to allow improvement to the HSW Management System of the University.

**Surveys**

Tools to determine local business practices; allowing the HSW Team to implement strategies to align the Schools/Branches on a particular program and where necessary correct practice drift. Surveys are aligned to either legislation or Handbook chapter requirements. The surveys will not be given a rating but will have strategies or actions which will allow improvement to the HSW Management System of the University.

**Authorised by**

**12 October 2012**

**Gerald Buttfeld**  
Manager, Health Safety and Wellbeing

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