**Draft 1 – 12 April 2021**

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| **MEASUREMENT AND EVALUATION** | | | | | |
|  | **Aim**  To prescribe the responsibilities and actions required for development, implementation and monitoring of the Health Safety and Wellbeing (HSW) management system via internal audit and to ensure the University meets the requirements of the [Health, Safety and Wellbeing (HSW) policy](http://www.adelaide.edu.au/policies/153) and [ReturnToWorkSA Code of Conduct for self-insured employers](https://www.rtwsa.com/insurance/self-insurance/regulating-self-insured). | | | | |
|  | **1** | **Objectives** | | | |
|  |  | **1.1** | To conduct a systematic process of internal review against defined criteria. | | |
|  |  | **1.2** | To ensure that the HSW Management System is audited, system deficiencies are identified, recorded and actioned in consultation with workers or their representatives. | | |
|  | **2** | **Scope** | | | |
|  |  | **2.1** | **Inclusions**  This applies to audits undertaken through the University of Adelaide’s HSW internal audit program against relevant HSW Handbook chapters. | | |
|  |  | **2.2** | **Exclusions** | | |
|  |  |  | * Frequently asked questions associated with the HSW Handbook. * Audits initiated by Schools/Branches in local areas to provide information to the School/Branch. * Audit conducted by the University Internal Auditors (managed by Legal and Risk). | | |
|  | **3** | **Process: Planning the Internal Audit Cycle** | | | |
|  |  | **Person Responsible** | |  | **Actions** |
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|  |  | **3.1** | **Director Health, Safety and Wellbeing** |  | * Construct an internal audit schedule and ensure it is made available on the [web](https://www.adelaide.edu.au/hr/hsw/hsw-staff-intranet#plans-reports-and-audits). * Determine which topics (Handbook Chapters) will be audited in consultation with the HSW Senior Advisors and the Manager of HR/HSW Audit and Compliance based on (but not limited to): * incidents; * emerging hazards and issues; * feedback/suggestions and concerns from Faculty/Divisional staff; * overarching consolidated results (see section 6.1); and * audit topic which received less than 25% in more than 50% of Schools/Branches audited in a previous audit. | |

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| **HSW Handbook** | | **4.1 Internal Audit** | | | | | **Effective Date:** | **TBA** | **Version 3.0** | |
| **Authorised by** | | **COO and Vice-President (Services and Resources)** | | | | | **Review Date:** | **TBA** | **Page 1 of 9** | |
| **Warning** | | **This process is uncontrolled when printed. The current version of this document is available on the HSW Website.** | | | | | | | | |
|  | | **3** | | **Process: Planning the Internal Audit Cycle (Continued)** | | | | | | | |
|  | |  | | **Person Responsible** | |  | **Actions** | | | | |
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|  | |  | | **3.1** | **Director Health, Safety and Wellbeing** (Continued) |  | * Choose locations that are to be audited based on: * hazard rating (e.g. higher risk areas such as STEM areas or lower risk areas); * recommendations from HSW Faculty/Divisional staff; * hazard profile; and * safety issue and injury data. | | | | |
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|  | |  | | **3.2** | **Manager HR/HSW Audit and Compliance** |  | * Develop question sets based on the actions required within the chapter, performance measures and other legislative requirements, where applicable. * Determine the evidence required to be viewed by the auditors. * Ensure that the audit team have completed an accredited auditing course and have a Statement of Attainment (or equivalent competency). | | | | |
|  | | **4** | | **Process: Implementation of the Internal Audit Cycle** | | | | | | |
|  | |  | | **Person Responsible** | |  | **Actions** | | | |
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|  | |  | | **4.1** | **Manager HR/HSW Audit and Compliance** |  | * Conduct a pre-audit meeting with the audit team to discuss which of the following elements will be applied (depending on the audit questions). * Documentation review (where the auditors review records, documentation and systems). * An inspection of the audited area. * Formal interviews. * Communicate with the supervisor of the location, Head of School/Branch, HSW Hub Manager, Health and Safety Representative of the workgroup and HSW Senior Advisor. | | | | |
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|  | |  | | **4.2** | **Auditors** |  | * Schedule and conduct the audit at a mutually agreeable time with the supervisor.   Note: Where a supervisor does not comply with reasonable requests to complete the audit within the audit cycle then the matter is to be referred to the Director, HSW. | | | | |
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|  | |  | | **4.3** | **Supervisor** |  | * Meet with the Auditor(s) and provide objective evidence to demonstrate that the audit criteria have been met. | | | | |

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|  | **5** | **Process: School/Branch Measurement and Evaluation** | | | |
|  |  | **Person Responsible** | |  | **Actions** |
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|  |  | **5.1** | **Auditors** |  | * Document all outcomes and opportunities for improvement from the audit. This also includes any observations or out of scope findings. * Feedback to the supervisor for comment, giving them an opportunity to comment on the findings or to provide extra details. * Draft the report back to supervisor (to be proofed by Manager HR/HSW Audit and Compliance). * Send the results to the Executive Dean of the Faculty or Head of Division, Head of School/Branch, the HSW Hub Manager; the HSWOs of the Faculty/Division, the Senior HSW Advisor, Director of HSW and the supervisor, outlining the results and the deficiencies. * Request that the supervisor provide the corrective actions, discuss reasonable timeframes and nominate a person responsible for the action(s) to the Faculty HSW Hub to be recorded in the online system. * Ensure that the final report and all corrective actions are documented appropriately. * Close the audit once all actions are assigned. |
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|  |  | **5.2** | **Manager HR/HSW Audit and Compliance** |  | * Conduct quality control over the audit findings and contact the auditor and/or the supervisor if there is a dispute.   Should a dispute over audit findings occur:   * Consult with the auditor and the supervisor to obtain a summary of the dispute together with any objective evidence provided by the auditee where relevant. * Agree on the outcome (e.g. compliance or non-compliance) and either: * Amend the internal audit report, attach any additional evidence provided and amend the observations; or * Accept and save the report as applicable. |
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|  |  | **5.3** | **Supervisor** |  | * Consult with the HSW Hub regarding suitable actions to correct any findings or observations. * Ensure that all corrective actions are completed within the allocated agreed timeframe. |
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|  |  | **5.4** | **Senior HSW Advisors** |  | * Report the results to the Faculty/Divisional Head and HSW committees via the quarterly “HSW Senior Advisor” report. |
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|  |  | **5.5** | **Manager HR/HSW Audit and Compliance** |  | * Ensure that at the end of the audit cycle any trends/themes (primary issues) are identified and recorded in the overarching consolidated file. |

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|  | | **6** | **Process: University reporting, review and improvement** | | | | |
|  | |  | **Person Responsible** | | |  | **Actions** |
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|  | |  | **6.1** | **Manager HR/HSW Audit and Compliance** | |  | * Create a summary audit document for each audit round to be presented at University Risk Management Committee meeting or other relevant management committee after the audit round is completed.   **Improvement strategies**   * Analyse the audit findings and performance measures; and consolidate them into the overarching consolidated file (refer to HSW Operations Manual for details). * Ensure that these results are used in planning the internal audit (3.1) and where applicable HSW Community of Practice meetings. |
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|  | |  | **6.2** | **Faculty/Divisional HSW Hub Manager** | |  | * Ensure that the findings of audits are discussed within the Faculty/Division with consideration of whether there may be systemic issues. * Undertake reviews as appropriate to determine if the findings from an audit in one local area may be indicative of a broader problem. |
|  | **7** | | **Performance Measures** | | | | | |
|  |  | | |  | | --- | | The HSW Team will use performance measures to assist in identifying areas of success and/or where corrective action is required to meet the objectives and targets of this process.  The level of compliance with the chapter and effectiveness will be determined during the internal audit process. | | | | | | | |
|  | **8** | | **Useful information and resources** | | | | | | |
|  |  | | **8.1** | | **University related documents and policies**   * [HSW Policy](http://www.adelaide.edu.au/policies/153) | | | | |
|  |  | | **8.2** | | **Related Legislation**   * [Work Health and Safety Act (SA) 2012](http://www.safeworkaustralia.gov.au/sites/swa/model-whs-laws/model-whs-act/pages/model-whs-act) * [Work Health and Safety Regulations (SA) 2012](http://www.safeworkaustralia.gov.au/sites/swa/model-whs-laws/model-whs-regulations/pages/regulations) | | | | |
|  |  | | **8.3** | | **Useful Web-links**.   * [ReturntoWorkSA Self-insured work health and safety standards](https://www.rtwsa.com/insurance/self-insurance/regulating-self-insured) | | | | |
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|  | **9** | | **Definitions** | | | | | | |
|  |  | | A **supervisor**, for the purposes of this HSW Handbook chapter, refers to the supervisor of the location being audited. | | | | | | |