



# 4.1 HSW Internal Audit

## 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](#) and [ReturnToWorkSA Code of Conduct for self-insured employers](#).

### 4.1.1 Objectives

- 4.1.1.1 To conduct a systematic process of internal review against defined criteria.
- 4.1.1.2 To ensure that the HSW Management System is audited, system deficiencies are identified, recorded and actioned in consultation with workers or their representatives.

### 4.1.2 Scope

#### 4.1.2.1 Inclusions

This applies to relevant HSW Handbook chapters and HSW Management Systems developed and controlled by the University of Adelaide.

#### 4.1.2.2 Exclusions

- Information sheets within the HSW Handbook.
- Audits initiated by Schools/Branches in local areas to provide information to the School/Branch.
- The following Handbook chapters:
  - Smoke-free University;
  - Preventing and Responding to Bullying at Work;
  - Management Systems Review; and
  - HSW Policy Review.
 which will be monitored by alternative methods outlined in the HSW Operations Manual.

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

Person Responsible	Actions
4.1.3.1 Associate Director, HR Compliance and Improvement Services	<ul style="list-style-type: none"> <li><input type="checkbox"/> Construct (and review annually) an internal audit plan which includes (over the life of the plan) relevant HSW Handbook chapters (see scope).</li> <li><input type="checkbox"/> Ensure that the HSW Internal <a href="#">Audit plan</a> is communicated to the University Health and Safety Committee and made available on the web.</li> <li><input type="checkbox"/> Determine which topics will be audited in consultation with the Manager Safety and HR Compliance based on (but not limited to):               <ul style="list-style-type: none"> <li><input type="checkbox"/> the <a href="#">audit plan</a>; and</li> <li><input type="checkbox"/> emerging hazards and issues.</li> </ul> </li> </ul> <p style="text-align: right;">(Continued)</p>

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4.1.3 Process: Planning the Internal Audit Plan and Cycle (Continued)

Person Responsible		Actions
4.1.3.1	<b>Associate Director, HR Compliance and Improvement Services</b> (Continued)	<ul style="list-style-type: none"> <li><input type="checkbox"/> Choose at random the Schools/Branches that are to be audited based on:                             <ul style="list-style-type: none"> <li><input type="checkbox"/> the areas hazard rating;</li> <li><input type="checkbox"/> the <a href="#">audit plan</a>; and</li> <li><input type="checkbox"/> areas, which have scored less than 25% in the previous audit cycle.</li> </ul> </li> </ul>
4.1.3.2	<b>Manager, Safety and HR Compliance</b>	<ul style="list-style-type: none"> <li><input type="checkbox"/> Ensure that question sets are created, based on the actions required within the chapter, performance measures and other legislative requirements, where applicable.</li> <li><input type="checkbox"/> Determine the evidence required to be viewed by the auditors.</li> <li><input type="checkbox"/> Nominate the audit team from Human Resources staff who have completed an accredited Work Health and Safety (WHS) Management System auditing course (or equivalent) and have a Statement of Attainment (or equivalent competency).</li> <li><input type="checkbox"/> Assign auditors to areas where they do not have regular involvement (to ensure impartiality).</li> </ul>

4.1.4 Process: Implementation of the Internal Audit Cycle

Person Responsible		Actions
4.1.4.1	<b>Manager, Safety and HR Compliance</b>	<ul style="list-style-type: none"> <li><input type="checkbox"/> Conduct a pre-audit meeting with the audit team to discuss which of the following elements will be applied (depending on the audit questions).                             <ul style="list-style-type: none"> <li><input type="checkbox"/> Documentation review (where the auditors review records, documentation and systems).</li> <li><input type="checkbox"/> An inspection of the audited area.</li> <li><input type="checkbox"/> Formal interviews.</li> </ul> </li> </ul>
4.1.4.2	<b>Auditors</b>	<ul style="list-style-type: none"> <li><input type="checkbox"/> Schedule and conduct the audit at a mutually agreeable time with the School/Branch representative/s.  <i>Note:</i> Where a School/Branch does not comply with reasonable requests to complete the audit within the audit cycle then the matter is to be referred to the Associate Director, HR Compliance and Improvement Services.)</li> <li><input type="checkbox"/> Forward the audit scope to the audit areas at least two weeks before each internal audit.</li> </ul>
4.1.4.3	<b>School/Branch representatives</b>	<ul style="list-style-type: none"> <li><input type="checkbox"/> Meet with the Auditor(s) and provide objective evidence to demonstrate that the audit criteria has been met by the School/Branch.</li> </ul>

4.1.5 Process: School/Branch Measurement and Evaluation

Person Responsible		Actions
4.1.5.1	<b>Auditors</b>	<ul style="list-style-type: none"> <li><input type="checkbox"/> Document all positive and negative observations (i.e. findings) from the audit.</li> </ul>
4.1.5.2	<b>Manager, Safety and HR Compliance</b>	<ul style="list-style-type: none"> <li><input type="checkbox"/> Conduct quality control over the audit findings and contact the auditor and/or the School/Branch if there is a dispute.                             <ul style="list-style-type: none"> <li><u>Should a dispute over audit findings occur</u> <ul style="list-style-type: none"> <li><input type="checkbox"/> Consult with the auditor and the School/Branch to obtain a summary of the dispute together with any objective evidence provided by the School/Branch where relevant.</li> <li><input type="checkbox"/> Agree on the outcome (e.g. compliance or non-compliance) and either:                                     <ul style="list-style-type: none"> <li><input type="checkbox"/> Amend the internal audit report, attach any additional evidence provided and amend the observations; or</li> <li><input type="checkbox"/> Accept and save the report as applicable.</li> </ul> </li> </ul> </li> <li><input type="checkbox"/> Send the results to the Head of School/Branch and the participants of the audit area, outlining the results and the deficiencies.</li> <li><input type="checkbox"/> Request that the audited area provide the corrective actions, discuss reasonable timeframes and nominate a person responsible for the action(s).</li> <li><input type="checkbox"/> Document any comments, extra information and corrective actions received from the School/Branch.</li> <li><input type="checkbox"/> Ensure that corrective action timeframes are in accordance with the rating of deficiencies defined within 4.1.6.1.</li> <li><input type="checkbox"/> Ensure that the final report and all corrective actions are documented appropriately.</li> <li><input type="checkbox"/> Close the audit once all actions are assigned.</li> </ul> </li> </ul>
4.1.5.3	<b>Head of School/Branch</b> (Any or all of these tasks can be delegated to School/Branch staff (i.e. Health and Safety Officer/Co-ordinator), however the Head of School/Branch must monitor the tasks on a regular basis to ensure they occur.)	<ul style="list-style-type: none"> <li><input type="checkbox"/> Ensure that the report findings are communicated to relevant workers in the School/Branch.</li> <li><input type="checkbox"/> Supply the Manager Safety and HR Compliance and the responsible person with suitable corrective actions to correct any deficiencies.</li> <li><input type="checkbox"/> Ensure that all corrective actions are completed the allocated agreed timeframe.</li> </ul>

4.1.5 Process: School/Branch Measurement and Evaluation (continued)

Person Responsible	Actions								
<p>4.1.5.4 <b>Manager, Safety and HR Compliance</b></p>	<ul style="list-style-type: none"> <li><input type="checkbox"/> Ensure that the Faculty/Divisional HSW Managers obtains evidence that the actions from the audit have been completed.</li> <li><input type="checkbox"/> Ensure that during the audit cycle any trends are identified and strategies are discussed with the Associate Director HR Compliance and Improvement Services.</li> <li><input type="checkbox"/> Rate each audit according to:                             <table style="margin-left: 20px; border: none;"> <tr> <td>Poor (remedial action required &amp; reaudit)</td> <td>25% and lower</td> </tr> <tr> <td>Unsatisfactory (monitored action required)</td> <td>26%-50%</td> </tr> <tr> <td>Satisfactory (requiring improvement)</td> <td>51%-75%</td> </tr> <tr> <td>Good</td> <td>76%-100%</td> </tr> </table> </li> <li><input type="checkbox"/> Conduct a full re-audit on all poor performers (25% and lower) within the next audit round.</li> </ul>	Poor (remedial action required & reaudit)	25% and lower	Unsatisfactory (monitored action required)	26%-50%	Satisfactory (requiring improvement)	51%-75%	Good	76%-100%
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4.1.6 Process: University review and improvement

Person Responsible	Actions								
<p>4.1.6.1 <b>Manager, Safety and HR Compliance</b></p>	<ul style="list-style-type: none"> <li><input type="checkbox"/> Analyse the results of each audit and send the executive summary to the Executive Deans, Deputy Vice Chancellors &amp; Vice-President and the convenors of Faculty/Divisional Committees for wider discussion with the relevant leadership and committees.</li> <li><input type="checkbox"/> Create a consolidated University HSW Internal Audit report and submit it to the Associate Director HR Compliance and Improvement Services as soon as possible after the completion of each audit cycle.</li> <li><input type="checkbox"/> Rate the overall University results according to:                             <table style="margin-left: 20px; border: none;"> <tr> <td>Poor (remedial action required &amp; reaudit)</td> <td>25% and lower</td> </tr> <tr> <td>Unsatisfactory (monitored action required)</td> <td>26%-50%</td> </tr> <tr> <td>Satisfactory (requiring improvement)</td> <td>51%-75%</td> </tr> <tr> <td>Good</td> <td>76%-100%</td> </tr> </table> </li> </ul> <p><b>Deficiencies</b></p> <ul style="list-style-type: none"> <li><input type="checkbox"/> Rate any 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><input type="checkbox"/> <u>High (Immediate)</u> – serious deficiency which will affect the ability for the University to achieve corporate safety objectives or legislative breach.</li> <li><input type="checkbox"/> <u>Medium (3-6 months)</u> – a deficiency which could undermine the HSWMS (Health, Safety and Wellbeing Management System) or Policy or HSW Handbook objectives.</li> <li><input type="checkbox"/> <u>Low (6-12 months)</u> – a deficiency which is unlikely to have an adverse effect on the University’s safety objectives or the HSWMS.</li> <li><input type="checkbox"/> <u>Opportunity for improvement</u> (no timeframe required) – This is a minor 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> <p style="text-align: right;">Continued</p>	Poor (remedial action required & reaudit)	25% and lower	Unsatisfactory (monitored action required)	26%-50%	Satisfactory (requiring improvement)	51%-75%	Good	76%-100%
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4.1.6 Process: University review and improvement (Continued)

Person Responsible	Actions
<p>4.1.6.1 <b>Manager, Safety and HR Compliance</b> (Continued)</p>	<p><b>Improvement strategies</b></p> <ul style="list-style-type: none"> <li><input type="checkbox"/> Identify any strategies from overall results and trends.</li> <li><input type="checkbox"/> Ensure that time frames are determined using the timeframes outlined in “<a href="#">Determining timeframes for HSW Improvement Strategy Actions</a>” (Appendix A)</li> <li><input type="checkbox"/> Link any strategies and deficiencies 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).</li> <li><input type="checkbox"/> Ensure all strategies and deficiencies, not associated with another planning document or assigned as a University Health and Safety Committee (UHSC) action, are monitored until complete.</li> <li><input type="checkbox"/> Disseminate the consolidated University audit report at the next available UHSC.</li> <li><input type="checkbox"/> Monitor strategies and deficiencies to ensure completion.</li> <li><input type="checkbox"/> Revise and improve the audit plan where necessary.</li> </ul>

4.1.7 Performance Measures

Human Resources will use the performance measures listed below 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 its effectiveness will be determined during the internal audit process.

4.1.8 Useful information and resources

4.1.8.1	<p><b>University related documents and policies</b></p> <ul style="list-style-type: none"> <li>• <a href="#">HSW Policy</a></li> </ul>
4.1.8.2	<p><b>Related Legislation</b></p> <ul style="list-style-type: none"> <li>• <a href="#">Work Health and Safety Act (SA) 2012</a></li> <li>• <a href="#">Work Health and Safety Regulations (SA) 2012</a></li> </ul>
4.1.8.3	<p><b>Useful Web-links</b></p> <ul style="list-style-type: none"> <li>• <a href="#">ReturnToWorkSA Code of Conduct for self-insured employers.</a></li> </ul>

## DETERMINING TIMEFRAMES FOR HSW IMPROVEMENT STRATEGY ACTIONS

(For use by the HSW Team only.)

The following methodology is to be used for assigning timeframes to any Health, Safety and Wellbeing actions which are related to Improvement strategies (i.e. not a hazard or a HSW system deficiency) from consolidated audit actions, management reviews, external audits, client surveys etc.

**Process**

- For each strategy consider the benefit to the HSW system and what the resource impact might be using the tables below.
- Apply the risk matrix and corresponding timeframes.
- Record this outcome and corresponding timeframe with the action

**Example**

Reference: Consolidated Audit [insert year]  
 Action: [add in action details]  
 Strategy Rating: Slight x negligible = Category 1  
 Timeframe: Should align with a category 1 timeframe (see below)

**Benefit to the system**

CATEGORY	DESCRIPTION
Transformational	There is an expectation that there will be a transformational benefit to the system; or One or more core elements of the HSW system/Self-Insurance Performance Standards have not been implemented.
Major	There is an expectation that there will be a major benefit to the system.
Slight	There is an expectation that there will be a slight benefit to the system.
Minor	There is an expectation that there will be a minor benefit to the system.
Nil	There is an expectation that there will be no benefit to the system.

**Resources Impact**

Please note that the impact refers to financial; human resources; changes to handbook or operational procedures; changes to current or additional training; communication strategies; or formation of projects to manage the change.

CATEGORY	DESCRIPTION
Negligible	Negligible impact on resources.
Minor	Minor impact on resources.
Moderate	Moderate impact on resources.
Major	Major impact on resources.
Severe	High impact on resources.

**Risk matrix**

Benefit to the system	Resource Impact				
	Severe	Major	Moderate	Minor	Negligible
Transformational	4	3	2	1	1
Major	4	4	3	2	1
Slight	4	4	3	2	1
Minor	5	5	4	2	1
Nil	5	5	5	5	5

## DETERMINING TIMEFRAMES FOR HSW IMPROVEMENT STRATEGY ACTIONS

### Action timeframes

Note that all timeframes maybe altered by external requirements/factors or organisational priorities.

Category	Action
1	<p>Actions required:</p> <ul style="list-style-type: none"> <li>Schedule immediately.</li> <li>Nominate a responsible person to complete the task.</li> <li>Where required, consult with the resource owner (i.e. if the resource is outside of HSW).</li> <li>Time frame for completion is 1 - 6 months.</li> </ul>
2	<p>Action required:</p> <ul style="list-style-type: none"> <li>• Planning to commence immediately</li> <li>• Nominate a responsible person to complete the task.</li> <li>• Where required, consult with the resource owner (i.e. if the resource is outside of HSW).</li> <li>• Time frame for completion is 6 months -1 year.</li> </ul>
3	<p>Action required:</p> <ul style="list-style-type: none"> <li>• Planning to commence.</li> <li>• The strategy is incorporated into HSW action plan and/or Human Resources staff are allocated to a working party.</li> <li>• Where required, consult with the resource owner (i.e. if the resource is outside of HSW).</li> <li>• Time frame for completion is 1-2 years.</li> </ul>
4	<p>Action required:</p> <ul style="list-style-type: none"> <li>• Project is scheduled for planning.</li> <li>• The strategy is incorporated into HSW action plan and/or Human Resources staff are allocated to a working party and/or formation of a business case (and project manager), or other equivalent action</li> <li>• Where required, consult with the resource owner (i.e. if the resource is outside of Human Resources).</li> <li>• Time frame for completion is 1-5 years.</li> </ul>
5	<p>Parked: to be added to the Human Resources Branch issues list for future planning.</p>