

Work Health and Safety & Injury Management System

Table of Contents

1. Governing Policy
2. Purpose
3. Scope
4. Work Health and Safety & Injury Management System Framework
5. Commitment – Policy and Procedures
 - 5.1. Policy
 - 5.2. Procedures
6. Planning
 - 6.1. WHS&IM System and Planning
7. Implementation
 - 7.1. WHS Risk Management
 - 7.2. Legal and other requirements
 - 7.3. Resources
 - 7.4. Responsibility and Accountability
 - 7.5. Training and Competence
 - 7.6. Consultation and Communication
 - 7.7. Reporting
 - 7.8. Documentation
 - 7.9. Document and Data Control
 - 7.10. Operational WHS Risk Management
 - 7.11. Emergency Management
8. Measurement and Evaluation
 - 8.1. Monitoring and Measurement
 - 8.2. Health Surveillance
 - 8.3. Incident Investigation and Corrective Actions
 - 8.4. Workplace Inspections
 - 8.5. Records and Record Management
 - 8.6. WHS&IM Audits
 - 8.7. Performance Measurement and Reporting
9. Management System Review
10. Supporting Procedures

1. Governing Policy

[Work Health and Safety Policy](#)

2. Purpose

This document defines the core elements of the continuous improvement model where the key components of the University's Work Health and Safety & Injury Management (WHS&IM) System include:

- i. commitment – policy and procedures
- ii. planning
- iii. implementation
- iv. risk management and legal compliance
- v. measurement and evaluation
- vi. management system review.

3. Scope

These procedures apply to all workplaces owned, managed or controlled by Flinders University and any place where work is performed on behalf of the University.

4. Work Health and Safety & Injury Management System Framework

The WHS&IM System framework is based on:

- a. The continuous improvement model as set out in AS/NZ 4804: 2001, Occupational Health, and Safety Management Systems – General Guidelines on Principles, Systems, and Supporting Techniques.
- b. The Code of Conduct for Self-Insurance Employers as set by Return-to-Work SA.



Diagram 1 – Based on the Continuous improvement model

5. Commitment – Policy and Procedures

5.1. Policy

- a. The University's [Work Health and Safety \(WHS\) Policy](#), demonstrates its commitment to Work Health Safety and Injury Management by the University.

Policy is developed in consultation with staff and approved by University Council and is the primary underpinning document of the WHS ManagementSystem.

- b. The policy reinforces the University's commitment to:
 - i. providing a safe and healthy environment for work and study
 - ii. recognising its duty of care to all persons in its workplaces

- iii. complying with work health and safety legislation
 - iv. adopting a continuous improvement approach
 - v. adopting a risk management approach
 - vi. consultation on safety matters
 - vii. effective processes for reporting health and safety issues
 - viii. using internal and external expertise to improve workplace safety and injury management where relevant
 - ix. specifying governance and management responsibilities and authorities
 - x. effective and equitable injury management through the Return-to-Work Policy.
- c. The policy is reviewed at least every 3 years, and more often in light of legislative and organisational changes.

5.2. Procedures

- a. Procedures are developed to meet specific hazards associated with particular workplaces or work practices.
- b. Procedures are reviewed at least every 3 years, or when required in light of new or changed legislation, new teaching or research activities, incident reports or audits, to ensure they remain current and effective.
- c. Consultation with the University community occurs during the development and review process via the various College/ Portfolio Health and Safety committees and where relevant stakeholder action groups.

6. Planning

6.1. WHS&IM System and Planning

- a. The University WHS&IM Plan comprises:
 - i. College/Portfolio WHS Planned Actions based on legislative requirements and the University's policies and procedures, and
 - ii. the WHS&IM Operational Plan.
- b. The University WHS&IM Plan is developed in accordance with the process documented in the [WHS Management System Planning Procedures](#).
- c. The WHS&IM Operational Plan seeks to continually improve work health and safety performance and manage risks. It includes objectives and performance indicators which are based on organisational and legislative requirements, the WHS operational risk profile and previous work health and safety and injury management performance.
- d. University Council regularly reviews a range of work health and safety and injury management performance indicators as documented in [WHS Management System Review Procedures](#).

7. Implementation

7.1. WHS Risk Management

- a. The University's WHS risk management approach is based on the Code of Practice How to Manage Health and Safety Risks and AS/NZS ISO 31000:2018 Risk Management – Guidelines.
- b. The University's methodology is documented in the [WHS Risk Management Procedures](#).

7.2. Legal and other requirements

- a. The University's Governance, Legal and Risk maintains a Register of Legislation, including legislative requirements applicable to work health and safety.
- b. Work health and safety legislative requirements are determined via the Work Health and Safety Act and Regulation 2012 and where relevant are incorporated into WHS systems, plans, policies and procedures.
- c. Injury Management legislative requirements are determined via the Return-to-Work Act and Regulations 2014.
- d. WHS& IM legislative requirements are kept up to date through membership of peak professional bodies and subscription to legislative updating services.

7.3. Resources

- a. The University identifies and allocates financial, human and physical resources to enable the effective implementation of the WHS&IM Management System. University Council and the Vice-Chancellor are responsible for ensuring that adequate resources are provided to meet the University's work health and safety and injury management objectives and strategies.
- b. Vice-Presidents and Executive Deans of College and Portfolio Heads are responsible for ensuring that there are adequate resources to implement, maintain and monitor relevant work health and safety programmes, policies and procedures in their College/Portfolio.

7.4. Responsibility and Accountability

WHS roles and responsibilities are documented in the University [WHS Policy](#), the [Return to Work Policy](#) and [Work Health and Safety Responsibilities](#), associated WHS procedures.

7.5. Training and Competence

- a. Training ensures that workers, students and others are inducted and have the necessary competencies to work safely.
- b. The [WHS Training and Induction Procedures](#) outline the requirements for WHS training, including induction, training needs and competencies.
- c. Training may be provided in a number of formats, including on-line, small group training both on and off campus, and training by in-house and external trainers.

7.6. Consultation and Communication

- a. Communication and consultation are required for creating and maintaining a positive health and safety culture. The University arrangements are described in the [WHS Management System Consultation and Communication Procedures](#).
- b. The University supports a team approach in addressing work health and safety matters, including where relevant supporting the recovery and return to work of injured staff.
- c. The University Health and Safety Committee is the principal forum for consultation on the management of health and safety across the whole University.
- d. College/Portfolio Health and Safety Committees are forums for staff and management to discuss issues affecting workers and others in Colleges/Portfolios.
- e. Health and Safety Representatives play an important role in the consultative process for the workgroup they represent.

- f. The University's [WHS Policy](#), procedures and other relevant information is communicated to staff, students, labour hire, contractors and workers, volunteers and visitors via various methods including but not limited to:
- i. the WHS website
 - ii. worker/student/visitor orientation/induction
 - iii. on-line learning resources
 - iv. electronic communication
 - v. contractor on-line safety induction
 - vi. WHS Unit staff
 - vii. student handbooks and publications
 - viii. safety manuals/safe operating procedures/safe work procedures
 - ix. safety signage.

7.7. Reporting

Health, safety and injury management performance is regularly measured and reported to University Council, the University Health and Safety Committee and College/Portfolios Health and Safety Committees, including:

- a. reporting of accidents, incidents and any associated trends
- b. audits
- c. corrective action status
- d. any statutory reporting requirements
- e. Workers' compensation claims management
- f. training
- g. health and wellbeing activities.

7.8. Documentation

- a. WHS documentation is available to staff and students and others on the University's WHS website.
- b. Injury Management and Return to Work information is available to staff only on the University's WHS website.
- c. Website documentation is extensive and covers a range of material including policies, procedures, guidelines, forms, checklists, training and links to external resources.

7.9. Document and Data Control

- a. WHS policies and procedures are developed, approved and reviewed in accordance with the University's [Policy Framework](#) and [Policy Development and Review Procedures](#).
- b. WHS&IM documents in the [University Policy Library](#) or [WHS&IM web site](#) are the most up to date version. Any hard copies of documents are considered to be uncontrolled, and users are directed to the website for the current version.
- c. Colleges/Portfolios need to follow University policy and procedures. Any specific operational documents required must not contradict the University WHS&IM Policy, Procedures or legislation.

7.10. Operational WHS Risk Management

The procedures for hazard identification, risk assessment, hazard control and evaluation of control measures is documented in the [WHS Risk Management Procedures](#).

7.11. Emergency Management

- a. The [Emergency Management Procedures](#) document the University's approach to emergency preparedness and response.
- b. In accordance with the [Emergency Management Procedures](#), potential emergency situations must be identified and Emergency Plans, and response procedures must be in place, including the testing of the effectiveness of emergency responses.

8. Measurement and Evaluation

8.1. Monitoring and Measurement

- a. The processes and information required to review the University's work health and safety and injury management performance against established performance indicators and goals, and to identify activities requiring corrective action and improvement are documented in the [WHS Performance Measurement and Reporting Procedures](#).
- b. College/Portfolio planned actions must include testing and monitoring requirements including aspects of the operation of buildings, plant/equipment/machinery, activities involving hazardous chemicals, animals, biological materials and radioactive substances and other sources as required by work health and safety and other relevant legislation and University policies and procedures.

8.2. Health Surveillance

- a. Health surveillance programmes undertaken at the University are developed based on risk assessments and/or legislative requirements.
- b. The WHS Unit coordinates these programmes where relevant for areas such as noise and exposure to substances in accordance with work health and safety and other relevant legislation.

8.3. Incident Investigation and Corrective Actions

- a. The [Accident, Incident and Hazard Reporting and Investigation Procedures](#) documents the procedures for reporting and investigating accidents/incidents and hazards. The WHS Unit maintains records in the FlinSafe system. The WHS Unit and the work area concerned review corrective actions to ensure completion and effectiveness.
- b. Accident/incident and injury data is reported quarterly to the University Health and Safety Committee, College/Portfolios Health and Safety Committees, and to University Council.
- c. The data is also used to identify areas requiring action in the University WHS Planning.

8.4. Workplace Inspections

- a. Colleges/Portfolios are required to undertake inspections of all workplaces, at least twice a year for high-risk areas, and at least annually for low-risk areas unless other arrangements have been defined. The procedures are documented in the [Workplace Safety Inspection Procedures](#).
- b. Records of completed inspections are maintained in FlinSafe or by local areas, and high to medium risk corrective actions are reported to College/Portfolios Health and Safety Committees where relevant.

8.5. Records and Record Management

WHS records are kept in accordance with the [Records Management Policy](#).

8.6. WHS&IM Audits

- a. WHS&IM is audited through the WHS&IM Audit Plan, covering elements of the system across the University. The audit process is documented in the [WHS Auditing Procedures](#).
- b. University Council approves the WHS Audit Plan which is risk based and may be modified following any incidents, the introduction of new risks, procedures or operations, or legislative change.
- c. WHS Audit results and progress with agreed actions that are medium to high risk are reported to the University Health and Safety Committee and University Council.

8.7. Performance Measurement and Reporting

The processes, information and reporting required to review the University's WHS performance outcomes against established performance indicators and goals, and to identify activities requiring corrective action and improvement are described in the [WHS Performance Measurement and Reporting Procedures](#).

9. Management System Review

University Council reviews the WHS &IM Management System via:

- a. quarterly reports, which includes information on:
 - i. the results of WHS&IM audits and actions taken by the University in response to the audit findings
 - ii. incidents reported, including notifiable incidents and progress of identified controls/corrective actions put in place to mitigate WHS risk
 - iii. changes in legislation
 - iv. emergency management
 - v. worker compensation performance
 - vi. training
 - vii. health and wellbeing program
- b. annual review of the WHS&IM Management System, includes:
 - i. an evaluation of whether implementation of the WHS&IM Management System is meeting the University's WHS&IM objectives as stated in the University's [WHS Policy](#)
 - ii. review of progress against the University WHS&IM Operational Plan including objectives, targets and performance indicators
 - iii. a review of WHS&IM internal and external audit findings and corrective actions
 - iv. an evaluation of the effectiveness of the WHS&IM Management System and any need for changes in the light of:
 - legislative changes
 - changes in the organisational structure and/or operations of the University
 - new or emerging risks
 - accident and incident investigation outcomes
 - consultation.
- c. The procedures for review and evaluation are documented in the [WHS Management System Review Procedures](#).

10. Supporting Procedures

Supporting procedures are part of this policy and provide additional detail to give practical effect to the policy principles.

[WHS Responsibilities](#)

[WHS Risk Management Procedures](#)

[WHS Management System Planning Procedures](#)

[WHS Management System Consultation and Communication Procedures](#)

[WHS Management System Review Procedures](#)

[WHS Performance Measurement and Reporting Procedures](#)

[Accident, Incident and Hazard Reporting and Investigation Procedures](#)

[Workplace Safety Inspection Procedures](#)

[WHS Auditing Procedures](#)

[WHS Training and Induction Procedures](#)

Work Health and Safety risk-specific procedures as listed in the [Flinders Policy Library](#)

| | |
|----------------------------|------------------------------|
| Approval Authority | University Council |
| Responsible Officer | Director, People and Culture |
| Approval Date | 20 May 2024 |
| Effective Date | 20 May 2024 |
| Review Date* | 2027 |
| Last amended | |
| CM file number | CF12/1744 |

* Unless otherwise indicated, this policy or procedures still apply beyond the review date.

Printed versions of this document are not controlled. Please refer to the [Flinders Policy Library](#) for the latest version.