



# ACC Workplace Safety Management Practices Programme

AUDIT STANDARDS  
EFFECTIVE FROM 1 APRIL 2002

## RENEWAL AUDIT REPORT FOR MASSEY UNIVERSITY Q1062913, Q7182293 FEBRUARY 2009

We include the following disclaimer in the introduction to the audit standards:

“Conformance to the programme standards set out in the audit tool should not be relied on to satisfy compliance with legal and other obligations of the employer. It is the responsibility of the individual employer to be satisfied that these legal and other obligations are met.”

Within the standard there are three measurable levels of performance:

<b>primary</b> = Programme entry level requirements	
<b>secondary</b> = consolidation of good practice	
<b>tertiary</b> = continuous improvement, best practice framework	no shading

Shading used throughout the standards indicates the levels as above.

The employer needs to meet the primary level requirements as detailed in each section of the standard to gain entry to the ACC Workplace Safety Management Practices Programme, and continue to meet these requirements in subsequent annual audits to remain in the ACC Workplace Safety Management Practices Programme.

## Independent audit summary

<b>Name of company or organisation:</b>	Massey University
<b>Contact person:</b>	Doug Pringle, Manager, Health and Safety
<b>Telephone:</b>	06 3569099 x2638
<b>Email:</b>	D.R.Pringle@massey.ac.nz
<b>Address:</b>	Private Bag 11222, PALMERSTON NORTH
<b>Date(s) of audit:</b>	10 & 11 February 2009
<b>Audit completion date:</b>	11 February 2009
<b>Location(s) of audit:</b>	Massey University, Tasman Street, Wellington

**NOTE: The final decision regarding the level of conformance to the Workplace Safety Management Practices audit standard will be made by ACC following consideration of all relevant information.**

It is my recommendation that the above named employer:

meets the audit requirements of the ACC Workplace Safety Management Practices Programme to the following level

Primary       Secondary       Tertiary

does not meet the audit requirements of the ACC Workplace Safety Management Practices Programme

### Summary of workplace information:

Massey University is a tertiary education facility with the main campus in Palmerston North, and a smaller campus in Wellington, and in Albany, Auckland. The Wellington campus was selected as the site for this renewal audit.

The organisation employs approximately 3000 staff nationwide and the Wellington site has approximately 500 staff. The Wellington campus has four Colleges represented: Creative Arts, Science, Business and Humanities. Most staff are represented by the Association of University Staff (which has recently combined with ASTE), with some minor representation by PSA, Service and Food Workers Union.

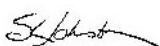
The main hazards for the site relate to trips and slips, workstation set up and some needle stick injuries. There have been some serious harm events in the last 2 years, but were related to tripping events and the Department of Labour has taken no further action in any of the events.

Evidence was seen that there has been continuous improvement in a number of areas of Health and Safety Management – including development of new procedures for health monitoring, new safety procedures, improvement in document control, and in incident investigation – but there are still some key areas where Secondary level has not been demonstrated (in particular: performance review of managers against specific H&S accountabilities, and in contractor monitoring) and therefore it is recommended that Primary level has been demonstrated for this audit.

***N.B. At the request of the employer, Tertiary level was not assessed for this audit, and so all Tertiary level criteria have been marked as "No".***

<input type="checkbox"/> Is this an initial audit? (tick as appropriate)	<input checked="" type="checkbox"/> Is this a renewal audit? (tick as appropriate)
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### ACC Approved Auditor Details:

<b>Name:</b> Mrs Sherry Johnston	
<b>Date:</b> 18 February 2009	
<b>Address:</b> 21 Joseph Banks Drive, Whitby, WELLINGTON	
<b>Phone:</b> 04 2347879	<b>E-mail:</b> sherry.johnston@xtra.co.nz
<b>Auditor signature:</b> 	<b>Date:</b> 18 February 2009

Summary of results	Level Demonstrated
<b>Safety Management Practices</b> <ol style="list-style-type: none"><li>1. Employer commitment to safety management practices</li><li>2. Planning, review and evaluation</li><li>3. Hazard identification assessment and management</li><li>4. Information, training and supervision</li><li>5. Incident and injury reporting, recording and investigation</li><li>6. Employee participation in health and safety management</li><li>7. Emergency planning and readiness</li><li>8. Protection of employees from on-site work undertaken by contractors and sub-contractors</li><li>9. Workplace Observation</li><li>10. Focus Group Interviews</li></ol>	Primary Secondary Primary Secondary Secondary Secondary Primary Primary Primary Primary
Number of focus groups:	2

## Critical element one

### – Employer commitment to safety management practices

#### (AS/NZS 4801:2001 Section 4.2, 4.4 and 4.6)

#### OBJECTIVE

The employer is able to demonstrate an active, consultative commitment to all areas of health and safety management in the workplace.

Details of requirements	Verified by	Achieved Yes/No
1. There is a documented health and safety policy.	1. Policy document.	Yes
2. The policy is authorised by current CEO or other senior management* representatives.	1. Appropriate signature, position and date.	Yes
	2. Process for senior management* to review policy document at least every two years.	Yes
3. The policy incorporates management commitment to comply with relevant legislation, regulations, codes of practice and safe operating procedures.	1. Policy document includes statement of commitment to comply with relevant standards.	Yes
4. The policy includes specific understanding of management responsibilities for health and safety.	1. Policy document includes management commitment to health and safety.	Yes
	2. Specific health and safety co-ordination roles are designated at senior management* level.	Yes
	3. Management positions are reviewed against the performance of designated health and safety responsibilities.	No
	4. Evidence that individual management performance has been reviewed against health and safety responsibilities.	No
5. The policy includes an outline of individual employee responsibilities for health and safety.	1. Policy document states individual responsibilities for health and safety in the workplace.	Yes
6. There is commitment to consultation with union* and other nominated employee representatives* regarding participation in health and safety management.	1. Policy document includes statement of support for employee consultation and participation.	Yes
7. There is specific management commitment to accurate reporting and recording of workplace incidents and injuries.	1. Health and safety documents include a specific statement requiring accurate reporting and recording.	Yes
	2. Records of this requirement included in performance review of management roles.	No

8. There is commitment to continuous improvement in health and safety.	1. Indicative statement in policy document.	Yes
	2. Evidence that a system exists for the review of health and safety related policies by senior management* to ensure their ongoing effectiveness (for example records of reviews or a documented review procedure or checklist).	Yes
	3. Evidence that excellence in health and safety management and innovation by staff is formally recognised (e.g. recognition in staff newsletter, reward for innovative ideas).	No
9. There is specific commitment to ensure managers (including senior management*) have an understanding of health and safety management relative to their positions.	1. Evidence of this commitment in policy statement, position descriptions (or similar).	No
	2. Evidence that senior management* have been involved in health and safety (e.g. seminars, briefings, conferences, training sessions) within the previous two years.	No
10. There is specific commitment by management to support the safe and early return to work of their injured employees.	1. Health and safety documents that include a statement of commitment.	Yes
	2. Information provided to management staff on how to support safe and early return to work.	Yes
	3. Evidence of management involvement in supporting safe and early return to work (where applicable).	No

\* Please refer to the definitions in the ACC Workplace Safety Management Practices audit standards.

<b>Employer commitment to safety management practices</b>
<b><i>N.B. At the request of the employer, Tertiary level was not assessed for this audit, and so all Tertiary level criteria have been marked as "No"</i></b>
<b>Standard achieved: PRIMARY STANDARD DEMONSTRATED FOR THIS ELEMENT</b>
<b>Comments:</b>
<p>Massey University has a documented Health and Safety Policy which is recorded on the intranet, and is also laminated and displayed within the work areas. The Policy is signed by the Vice Chancellor and dated January 2009. It contains all appropriate commitment statements, requirements for accurate reporting and recording, staff and student consultation and participation, individual responsibilities for health and safety.</p> <p>All University policies include an identified "authorising person" who has key responsibility for reviewing the policy, and the dates for reviews are recorded on the intranet. Evidence was seen to confirm that during 2008 the H&amp;S policy was sent to the Vice Chancellor Executive Committee for approval, and was then signed off by the Vice Chancellor.</p> <p>The Health and Safety intranet page includes links to documented H&amp;S procedures, forms etc, and there are a documented responsibilities on the website for identified management positions e.g. Deputy Vice Chancellor, Pro Vice Chancellor, Regional managers etc. In addition health and safety responsibilities are included in management Position Descriptions, as well as for the H&amp;S Manager and Regional H&amp;S Advisers.</p> <p>While some information was provided which stated that some management positions had been reviewed against H&amp;S responsibilities, no formal evidence of the performance review process was able to be seen, nor was it able to be confirmed that all Management positions are held accountable in the performance review process for H&amp;S responsibilities, or for accurate reporting and recording of incidents and injuries.</p>

There is a separate Rehabilitation Policy which identifies commitment to safe return to work for injured employees. Evidence was seen that information on the rehabilitation process and responsibilities was provided to all staff in the "Staff Update" newsletter in 2008.

**Critical issues:** None

**Recommendations for improvement:**

- In order to achieve Secondary level it will be necessary to ensure that there is evidence that all Management positions have performance review against specific health and safety accountabilities, including accurate reporting and recording of incidents and injuries

## Critical element two

### – Planning, review and evaluation

#### (AS/NZS 4801:2001 Section 4.3, 4.4 and 4.5)

#### OBJECTIVE

The employer is able to demonstrate a focus on continuous improvement through a systematic approach to occupational health and safety that includes setting specific objectives, establishing and supporting systems or programmes to achieve objectives, regular review of progress and evaluation of outcomes.

Details of requirements	Verified by	Achieved Yes/No
1. There is a process to ensure that health and safety management for the workplace is reviewed.	1. Process to review health and safety management annually.	Yes
	2. Process to review health and safety management that occurs after a critical event and/or if there is a change in work procedures or health and safety policy.	No
2. Health and safety objectives are set that are appropriate to the size and type of business, relevant to each level within the business and related to identified hazards (where relevant).  (NB: Objectives set should be "SMART" – Specific – Measurable – Achievable – Realistic – Time-bound.)	1. Documented objectives and management plan to achieve objectives.	Yes
	2. Procedure to review objectives annually.	Yes
	3. Evidence that health and safety objectives have been reviewed.	Yes
	4. Evidence that senior management* and union* and other nominated employee representatives* have been included in annual review and setting of objectives.	No
3. There is an established consultative process to review and evaluate the effectiveness of hazard management.	1. Process or planning documents (or similar).	No
	2. Minutes, schedules (or similar) to show there is annual review of the effectiveness of hazard management processes.	No
4. The employer is able to demonstrate knowledge of current health and safety related information including legislation, regulations, current codes of practice, and other health and safety standards relevant to the particular workplace.	1. Process to identify the health and safety information specific to the employer's business.	Yes
	2. Process in place to ensure compliance or conformance with relevant requirements.	Yes
	3. Evidence of regular review to identify and accommodate any changes in requirements.	Yes
5. A procedure to undertake an annual self-assessment to ensure the programme audit standards can be met and maintained. The procedure involves management, union* and other nominated employee representatives*.	1. Self-assessment procedure.	Yes
	2. Evidence that a self-assessment has been undertaken within the previous 12 months (may be immediately prior to initial entry audit).	Yes

\* Please refer to the definitions in the ACC Workplace Safety Management Practices audit standards.

<b>Planning, review and evaluation</b>
<b>Standard achieved:</b> <i>SECONDARY STANDARD DEMONSTRATED FOR THIS ELEMENT</i>
<b>Comments:</b>
Health and safety management for the workplace is reviewed on an annual basis and this is reported in the Annual report from each regional H&S Adviser, and collated into a corporate review by the Manager H&S. This report reviews H&S objectives and plans, statistics and performance, and evidence was seen of the 2007 report, and that the 2008 report is currently being collated.  This report is provided to the HR Manager and is summarised to the University Council.
There are documented requirements for the University planning process, and this includes development of an annual H&S Plan. Evidence was seen of the 2009 H&S plan which included objectives relating to biohazards and radiation hazards, training, incidents, H&S communications etc. The Wellington campus has developed their H&S Program into a local plan with timeframes and actions, and this was viewed.  Records were seen to confirm that the annual H&S plan is reviewed as part of the annual report by the H&S manager, as well as local reviews of the Wellington plan.
Updates on legislation and codes of practice come through the H&S Manager who maintains links with Department of Labour, Tertiary Institution contacts, NZ Institute of Safety Management etc. This information is then shared with Regional Managers and Regional H&S Advisers to ensure that required changes are implemented. Evidence was seen to confirm that recent changes in Department of Labour guidelines for managing contractors have resulted in a review of all contract documents.
There is a documented requirement for an annual self-assessment audit which includes consultation with management and employee representation. Records were seen to confirm that self-assessments were completed in 2007 and 2008. However, the current process does not necessarily ensure that all sites complete a self-assessment audit, as one site appears to have been missed out each year (not the same site each time).
<b>Critical issues:</b> None
<b>Recommendations for improvement:</b>
<ul style="list-style-type: none"><li>• Recommend ensure that a self-assessment process is carried out at each site on an annual basis to ensure that the whole organisation is consistently meeting the audit standards</li></ul>



## Critical element three

### – Hazard identification, assessment and management

#### (AS/NZS 4801:2001 Section 4.3 and 4.4)

#### OBJECTIVE

The employer has an active method that systematically identifies, assesses and manages the actual and potential hazards in the workplace, over which the employer has authority or influence.

Details of requirements	Verified by	Achieved Yes/No
1. There is a systematic procedure to identify and record actual and potential hazards in the workplace.	1. A procedure that covers an understanding of the range of hazards including (for example) work organisation, job design and hazards facing employees working off-site.	Yes
	2. Review of hazard registers to support process in action.	Yes
	3. Records of regular review of the hazard identification and recording process.	Yes
2. There is a process to assess identified hazards to determine which hazards are significant* according to the definition in the health and safety in employment legislation.	1. Documented definition of significance.	Yes
	2. Process to demonstrate the identification of significant hazards* and evidence of implementation of this process.	Yes
	3. The hazard register (or similar) identifies which hazards are significant.	Yes
3. There are appropriate controls in place for each significant hazard based on the hierarchy in the health and safety in employment legislation to either:  (a) Eliminate the hazard completely;  (b) Isolate the hazard to prevent the exposure to that particular hazard; or  (c) Minimise the impact of the hazard.	1. Procedure for developing appropriate controls.	Yes
	2. Details of controls developed for significant hazards*.	Yes
	3. Process for the issue, renewal and maintenance of safety equipment related to significant hazards* including personal protective equipment.	Yes
	4. Evidence that controls developed for significant hazards* are based on appropriate documentation or advice (where applicable).	Yes
4. There are appropriately trained and/or experienced people leading the identification and management of hazards.	1. Records of training, and/or skills and experience for people leading hazard management.	Yes
	2. Evidence of ongoing training or increased experience for people leading hazard management that has occurred within the previous two years.	No

5. There is a procedure for obtaining specialist advice for managing specific hazards, where this competency is not available through internal staff.	1. Procedure to support the appropriate use of specialist advice (e.g. the management of hazardous substances, monitoring of noise levels or assessment of workstations).	Yes
	2. Accessibility of reference information for all staff (e.g. hard copy or electronic) that includes relevant legislation, regulations, codes of practice, safe operating procedures, MSDS etc.	Yes
	3. List or information about availability of internal or external health and safety specialist advice (where applicable).	Yes
6. There is a schedule documenting the minimum review timetable to monitor significant hazards* that have been isolated or minimised.	1. Hazard review timetable appropriate for particular identified hazards.	No
	2. Responsibilities assigned for ensuring timetable is met and signed off at each period.	No
7. There is active management of hazards associated with any new or modified equipment, material, services or work processes introduced into the workplace.	1. Hazard identification and management documents.	Yes
	2. A process for consultation with relevant health and safety personnel in the purchase or implementation of new or modified equipment, material, services or processes.	Yes
	3. Evidence of health and safety issues incorporated into purchasing and design decisions (where applicable).	No
8. There is an ongoing opportunity for the active involvement of union* and other nominated employee representatives* in identifying and managing hazards in the workplace.	1. Evidence of employee consultation or active involvement in hazard management, or the provision of ongoing opportunities for involvement (process document accepted for new applications).	Yes
9. There is a process to identify and manage any areas of the workplace requiring specific health monitoring in relation to tasks being undertaken (where applicable).	1. Process to identify tasks requiring monitoring and ongoing regular testing.	Yes
	2. Process to undertake baseline monitoring of health in relation to identified tasks and to notify results to employees (e.g. hearing tests, lung function tests).	Yes
	3. Process for post-critical event testing and exit testing.	No
	4. Process to manage sub-optimal test results that includes consideration of individual medical and vocational needs.	No
	5. Process to feed back sub-optimal results into hazard management.	No
10. There is a process to identify tasks where significant hazards* may make pre-employment health screening appropriate to ensure that the potential for work injury or work-related illness through exposure to those particular tasks is minimised.	1. Process documents.	Yes
	2. Documented rationale and process for pre-employment health screening that is linked to specific significant hazards* (where applicable).	No

11. Work areas, over which the employer has control or influence, are planned, so that the exposure of visitors and the general public to workplace hazards is minimised.	1. Clear marking of designated areas as appropriate.	Yes
	2. Signage, security logbooks or visitors' registers available as appropriate to specific areas of the workplace or escorting restrictions and induction for site visitors.	Yes
	3. Evidence that emergency procedures are covered with site visitors.	Yes
	4. Provision of appropriate personal protective equipment for visitors to the site (e.g. goggles, "hi-viz." vests).	Yes

\* Please refer to the definitions in the ACC Workplace Safety Management Practices audit standards.

<b>Hazard identification, assessment and management</b>
<b>Standard achieved:</b> <i>PRIMARY STANDARD DEMONSTRATED FOR THIS ELEMENT</i>
<b>Comments:</b>
<p>There is a documented online procedure for Managing hazards that includes identified responsibilities for managers and staff, in relation to identification, assessment and control of hazards. This is supplemented by the Hazard Management System document which includes the definition of significant hazard, and the process for recording, assessing and controlling hazards.</p> <p>Evidence was seen to confirm that there is a hazard register for each area of the Wellington campus e.g. each School/College, workshop, laboratory etc; and that these hazard registers include an appropriate range of hazards, identification of significance, and controls in place. Records were seen to confirm that hazard registers for each area of Wellington campus had been updated in 2008 on a cyclic basis, and the H&amp;S Adviser coordinates with the local H&amp;S representative and manager to ensure that the register is reviewed and updated.</p>
<p>Hazard management training has been provided for H&amp;S representatives and for H&amp;S committee members who were involved in the hazard identification process e.g. H&amp;S representative training and in-house hazard management training.</p>
<p>Provision of Personal protective equipment is covered in a documented procedure, and this is issued and managed at department level. The hazard register identifies what protective clothing is required to be provided, and this is often supplemented by the Department information manual which specifies what protective equipment is required to be worn by staff and students in the area e.g. laboratories and workshops. Evidence was seen to confirm that appropriate protective clothing has been provided to staff, and in some cases to students (in other cases the student is responsible for providing their own personal protective equipment but the lecturer/manager ensures that all students wear appropriate protective clothing at all times) e.g. safety boots, earmuffs, safety glasses in the workshops, and lab coats, safety glasses and gloves in the laboratories.</p>
<p>There are documented requirements for consultation with specialist advice in relation to significant hazards and controls, and some of this advice is provided by internal experts. Evidence was seen to confirm that specialist advice has been sought in relation to environmental monitoring for laboratory chemicals, atmospheric monitoring, sound level testing, and workstation assessments.</p>
<p>All employees have ready access to reference information e.g. the intranet and Internet, as well as the University library, and reference information held by the Regional H&amp;S Adviser.</p> <p>The intranet identifies appropriate internal specialist advice, and any external specialist advice would be coordinated by the Regional H&amp;S Adviser or H&amp;S Manager.</p>
<p>Information was provided that some checks are carried out in relation to significant hazard controls e.g. HSNO checks, building compliance checks etc, but there does not appear to be a documented schedule or responsibility allocated for regular checks or inspections in other areas.</p>
<p>The hazard management procedure includes requirements for review of hazards associated with new and modified equipment and processes. These procedures are identified on the H&amp;S intranet page and are linked to the Procurement procedures. The requirements include specific reference to seeking H&amp;S Specialist advice in relation to reviewing hazards.</p>

<p>Records were seen to confirm that health and safety representatives are closely involved in hazard identification and reviewing the hazard register. H&amp;S committees also regularly discuss hazards and controls.</p>
<p>The procedures have recently been developed outlining requirements for health monitoring, e.g. hearing testing for workshop staff, Regional Facilities Management staff etc. However there was insufficient evidence to confirm that these procedures had been fully implemented in relation to the secondary level requirements e.g. for management of sub optimal test results, feed back into hazard management, and the rationale and process for pre-employment health screening.</p>
<p>Evidence was seen throughout the University of security measures in place for access to restricted areas e.g. signage, key pad locks, swipe card access for access to workshops, laboratories, plant rooms etc. As a public location it is not feasible to require a visitor register for completion by all students and visitors, however a visitor register is in place for contractors, and escorting restrictions and emergency information are clearly signposted throughout the University.</p> <p>In the laboratory areas protective clothing is provided for visitors e.g. dust coats, safety glasses and gloves; and safety glasses in the workshops.</p>
<p><b>Critical issues:</b> None</p>
<p><b>Recommendations for improvement:</b></p>
<ul style="list-style-type: none"><li>• In order to achieve Secondary level and it is recommended that a formal Hazard review timetable, schedule and responsibilities are allocated for checks or inspections to confirm that hazard controls are in place in all areas</li><li>• Ensure that the newly developed health monitoring procedures are fully implemented</li></ul>

## Hazard management observation summary table – Design Workshop

Significant hazard identified by the workplace	*Basic method of control selected by the workplace to	Details of controls recorded by the workplace	*Auditor's observation of controls in practice
1. Machinery	<ul style="list-style-type: none"> <li>✓ Isolate</li> <li>✓ Minimise</li> </ul>	<ul style="list-style-type: none"> <li>▪ Secured machinery areas – restricted access</li> <li>▪ Safety guards and push sticks</li> <li>▪ Instructions and training</li> </ul>	✓ Mostly observed
2. Welding	<ul style="list-style-type: none"> <li>✓ Isolate</li> <li>✓ Minimise</li> </ul>	<ul style="list-style-type: none"> <li>▪ Separate area</li> <li>▪ Extraction ventilation</li> <li>▪ Instructions and training</li> </ul>	✓ Mostly observed
3. Chemicals	<ul style="list-style-type: none"> <li>✓ Isolate</li> <li>✓ Minimise</li> </ul>	<ul style="list-style-type: none"> <li>▪ Clearly label all containers</li> <li>▪ Material Safety Data Sheets</li> <li>▪ Respirators and filters</li> <li>▪ Store substances over 1 litre in the separate store</li> </ul>	✓ <b>Partially</b> observed – some bottles of chemicals not labelled
4. Noise	<ul style="list-style-type: none"> <li>✓ Isolate</li> <li>✓ Minimise</li> </ul>	<ul style="list-style-type: none"> <li>▪ Separate areas for machinery</li> <li>▪ Hearing protection</li> </ul>	✓ Mostly observed
5. Dust	<ul style="list-style-type: none"> <li>✓ Minimise</li> </ul>	<ul style="list-style-type: none"> <li>▪ Extraction ventilation</li> <li>▪ Dust masks</li> <li>▪ Keep workshop clean</li> </ul>	✓ Mostly observed

(\*delete the non-applicable options)

### Recommended outcome

Overall it was observed at the time of the workplace review that the above-identified significant hazards were being managed in accordance with the management systems documented in the workplace.

**YES**

## Critical element four

### – Information, training and supervision

#### (AS/NZS 4801:2001 Section 4.4)

#### OBJECTIVE

The employer will ensure that all employees are informed of their own responsibilities and the employer's responsibilities for health and safety in the workplace. The employer will ensure that employees have specific knowledge concerning management of the hazards to which they are exposed through workplace procedures, environment, equipment and materials.

Details of requirements	Verified by	Achieved Yes/No
1. There is appropriate health and safety induction training for new employees and employees transferring to a new environment, role or task.	1. Evidence of staff health and safety induction training that includes consideration of the following needs (where appropriate): <ul style="list-style-type: none"> <li>– Emergency procedures</li> <li>– Incident and injury reporting</li> <li>– Hazard identification</li> <li>– Employer and employee responsibilities</li> <li>– The process for employee health and safety representation</li> <li>– Information about the health and safety forum/s</li> <li>– Designated roles for health and safety and rehabilitation</li> <li>– Work injury claims process</li> <li>– Rehabilitation responsibilities</li> <li>– Use and maintenance of relevant health and safety equipment, including personal protective equipment (eg, checklist, training information).</li> </ul>	Yes
	2. Signed employee induction training records (or similar individual verification).	Yes
2. There is identification of health and safety training needs in relation to hazards associated with specific roles, tasks or areas of work.	1. Procedure to identify training needs for specific roles, tasks, or areas of work (e.g. training needs assessment or training plan linked to hazard management).	Yes
3. All health and safety information and training is delivered so that the key messages are clearly understood, taking into account language, literacy, vision, hearing or other variables.	1. A process to determine that health and safety information and training have been understood.	Yes
	2. Signed employee training records (or similar individual verification).	Yes
	3. Evidence that task-specific training has occurred (e.g. certification, training records or similar where applicable).	Yes
	4. A process for “bring-up” reminder facility for recurring training or certification requirements including assignment of responsibilities for this process.	Yes

	5. Evidence to demonstrate that competency has been achieved following specific health and safety training (e.g. written or oral tests, certifications, practical skill demonstrations including on-the-job assessments).	No
4. There is access to internal staff members with the relevant skills, experience or qualifications to undertake training.	1. Guideline document (or similar) outlining health and safety trainer selection criteria.	Yes
	2. Records of internal trainer's skills, experience or qualifications.	Yes
5. There is a process to determine the relevant skills, experience or qualifications of external trainers used for specific training requirements.	1. Selection criteria or similar for use of external trainers (where applicable).	Yes
6. There is a system for controlling health and safety related documents and information including the dissemination of applicable information to staff and notification of outdated documents.	1. Document control system (paper based or electronic).	Yes
	2. Dates on health and safety documents at operational sites.	Yes
	3. Role-specific responsibilities to review health and safety documentation control.	Yes
7. Health and safety information specific to the workplace is available to all employees.	1. Access to further information is included in health and safety information available in the workplace (e.g. posters, signs, training, Intranet, briefings, meeting schedules or similar).	Yes
8. Supervision for employees undergoing on-the-job training is provided by experienced and skilled staff to ensure the employee's newness to the task or role does not endanger themselves, others or equipment.	1. A process that requires assessment of relevant experience and skills for the supervision of employees undergoing on-the-job training.	Yes
	2. A process for the clear designation of responsibility for supervision of new employees.	Yes

### Information, training and supervision

**Standard achieved:** *SECONDARY STANDARD DEMONSTRATED FOR THIS ELEMENT*

#### Comments:

Induction for new and transferred employees is covered as part of the recruitment process implemented by Human Resources, and includes attendance at the "Big Picture" seminar at which H&S information for the University is covered, and attendees at this session are recorded and entered into the HR database. In addition the recruitment process includes requirements for the manager to complete an induction checklist which is signed by both parties and returned to HR for filing on the personal file. Records of completed induction checklists were viewed on the personal files of recent staff members.

Part of the induction process includes provision of the H&S Handbook which includes information on all the audit requirements.

Training needs analysis is carried out by the manager in relation to the tasks that the employee will perform. Task specific training includes the "Move at work" course, lab manager training, fire warden training, first aid training. Some of this training has competency assessment e.g. laboratory managers, radiation registration etc, while others have feedback evaluation on the effectiveness of the course. Signed training records were seen to confirm attendance at appropriate task specific training, and evaluation and confirmation of understanding.

There are documented trainer selection guidelines which cover selection of internal and external trainers based on their qualifications, and knowledge, adult education skills, NZQA registration etc. Records were seen of skills and experience for internal H&S trainers.

The University has detailed document control requirements and records storage obligations. Evidence

was seen to confirm that the intranet identifies responsibilities for review and update of specific H&S documents, and dates for review. Documents seen at each location had appropriate dates on them.

Current health and safety information is readily available to all employees e.g. through the Staff Update newsletter, regular "Massey-all" e-mails, plasma televisions screens displayed throughout the Wellington campus which display H&S information, notice boards, intranet, library etc. In addition, at the Wellington campus, each Department has a red folder that contains current H&S information and procedures e.g. hazard register, emergency procedures, incident and accident flowchart etc.

There are requirements for the Head of Department to be responsible for supervision of new and untrained employees. The procedures include appointment of a mentor role at the time of induction and this is documented on the Department induction checklist. There is also detailed responsibility for supervision and training e.g. in relation to performance-based research funding for researchers, and professional supervision requirements e.g. in laboratory situations.

**Critical issues:** None

**Recommendations for improvement:** Nil



## Critical element five

### – Incident and injury reporting, recording and investigation

#### (NZS/AS 4801:2001 Section 4.4 and 4.5)

#### OBJECTIVE

The employer has an active reporting, recording and investigation system that ensures incidents and injuries are reported and recorded, and the appropriate investigation and corrective actions are taken. The terms incidents and injuries in this context include all "near miss" or "near hit" events, work-related illnesses and injury events that harmed or might have harmed any employee during the course of their work.

Details of requirements	Verified by	Achieved Yes/No
1. There is a system for reporting, recording and analysing incidents, injuries and work-related illnesses.	1. Documented procedure.	Yes
	2. Incident and injury (accident) reporting forms.	Yes
	3. On-site incident and injury (accident) registers.	Yes
	4. Procedures requiring early and prompt attention to all reported incidents and injuries.	Yes
	5. Collation of all injury and incident data into a central record for analysis.	Yes
2. Employees understand their specific responsibilities to report incidents, injuries and workplace illnesses that have or might have harmed anyone in the workplace.	1. Reporting systems available in all work areas (e.g. forms in hard copy or on-line).	Yes
	2. Staff communications, team briefings, health and safety meeting minutes.	Yes
	3. Examples of completed incident and injury reports (where applicable).	Yes
3. When a serious harm injury occurs to an employee the Occupational Safety and Health Service (OSH) of the Department of Labour is notified as soon as possible and a written report is sent within seven days.  (NB: There are other agencies that the employer may also need to notify to meet regulatory obligations, in the event of a serious harm injury.)	1. Procedure to notify OSH including documented responsibility for notification.	Yes
	2. Example(s) of notification within required timeframe when a serious harm injury has occurred (where applicable).	Yes
4. The employer has a procedure to investigate incidents and injuries that harmed or might have harmed an employee.	1. Incident and injury investigation procedure.	Yes
	2. Designated incident and injury (accident) investigators.	Yes
	3. Incident and injury (accident) investigation forms (forms in hard copy or on-line).	Yes
	4. Incident and injury (accident) investigation example reports (where applicable).	Yes

5. There is a procedure to ensure corrective action is undertaken in relation to any deficiencies identified during an investigation.	1. Procedure for corrective action to be undertaken when deficiencies are identified in an investigation.	Yes
	2. Feedback into hazard management included in the process.	Yes
	3. Responsibility for corrective action is assigned, time-bound, signed and dated as part of an incident and injury investigation and includes training and injury prevention feedback (where applicable).	Yes
	4. Evidence of senior management* involvement and follow-up (e.g. management minutes or communications).	No
6. Injury and incident data is reviewed to identify trends and provide information to managers and employees that can be used in injury prevention initiatives.	1. Process for at least annual review of collated data (e.g. minutes of meetings, distribution of findings to management and employees).	Yes
	2. Evidence of at least six monthly review of collated data (e.g. minutes of meetings, distribution of findings to management and employees).	No
	3. Evidence of injury prevention initiatives implemented where relevant (e.g. changes in work practices, specific training).	No

\* Please refer to the definitions in the ACC Workplace Safety Management Practices audit standards.

### Incident and injury reporting, recording and investigation

**Standard achieved:** *SECONDARY STANDARD DEMONSTRATED FOR THIS ELEMENT*

**Comments:**

The University has an incident/accident flowchart, documented procedure and checklists. These are contained in procedures on the intranet, and are generally also held in hard copy in the building/Department red folder.

Incidents and accidents are required to be promptly reported on the internal incident report form which includes completion of the initial event report as well as initial investigation by the manager. This form is available online and is generally completed in hard copy and forwarded to the Regional H&S Adviser.

Completed copies of the incident report form were seen for appropriate incidents and accident events. The Regional H&S Adviser retains a copy of these forms and forwards the report to the H&S Administrator at the Palmerston North campus for central collation into the computer database.

The Department Manager is responsible for notifying the Department of Labour of any event of serious harm, and in practice this is generally done in association with the Regional H&S Adviser. Records were seen to confirm that two serious harm events at the Wellington campus were appropriately notified e.g. a fall in 2007 and a broken toe in 2008. It was confirmed that the Department of Labour took no further action in either event.

Initial investigation of each event is completed by the local manager using the incident report/investigation form. This investigation may also be completed in conjunction with the H&S representative and/or the H&S Adviser. Any serious harm event requires completion of an additional full investigation by the Regional H&S Adviser, and records were seen of completed investigation forms for the serious harm events.

The investigation portion of the incident report form includes room for identification of corrective actions, allocation of responsibility and dates; as well as cross-referencing with the hazard register to ensure that there is feedback into hazard management. Review of the incident reports for the Wellington campus indicated that there is an appropriate level of investigation, identification of corrective actions,

and closeout.
Incident data is collated by the Palmerston North -based H&S Administrator, and incident trends are reported back to the Regional H&S Advisers and committees. In addition the collated data is reported in the annual report, and to the Safety Consultative Committee and the local H&S committee.
<b>Critical issues:</b> None
<b>Recommendations for improvement:</b> Nil

## Critical element six

### – Employee participation in health and safety management

#### (AS/NZS 4801:2001 Section 4.4)

#### OBJECTIVE

The employer will ensure that all employees have ongoing opportunities to be involved and to have their interests represented in the development, implementation and evaluation of safe workplace practices.

Details of requirements	Verified by	Achieved Yes/No
1. There is a forum (or series of forums) to enable communication between the employer, employees and union and other nominated employee representatives* on issues of interest and concern related to health and safety. (For a large or multi-site employer the number of forums should be appropriate to the size, type and geographic spread of the business, so that all employees have a "voice" through to management.)	1. Evidence of health and safety forum(s) that include the participation of management and employee representatives (e.g. minutes of meetings).	Yes
	2. Evidence of frequency of forum(s) at least quarterly (not applicable for new applications).	Yes
	3. Evidence of ongoing opportunity for joint involvement in injury prevention initiatives and, where applicable, injury management initiatives (e.g. planning notes, outcomes of joint initiatives).	Yes
	4. Evidence of consultative development, monitoring and review of health and safety policies, processes and performance at least annually (e.g. minutes of meetings, action plans, review documents).	No
2. There is a process agreed to by employees, to support union* and other nominated employee representative* involvement in health and safety development, monitoring and review.	1. Process for health and safety management that specifically supports employee involvement.	Yes
	2. Evidence of agreed process to elect or endorse union* and other nominated employee representatives* to support health and safety.	Yes
	3. Evidence that information on this process is readily available and communicated to all staff.	Yes
3. Health and safety training is provided to employees actively involved in health and safety management to assist in the development and establishment of safe workplace practices.	1. Evidence that health and safety training has been undertaken within the last two years.	No

\* Please refer to the definitions in the ACC Workplace Safety Management Practices audit standards.

<b>Employee participation in health and safety management</b>
<b>Standard achieved:</b> <i>SECONDARY STANDARD DEMONSTRATED FOR THIS ELEMENT</i>
<b>Comments:</b>
<p>The University has a number of structures for employee involvement in health and safety. There is a university-wide Safety Consultative Committee which meets on an annual basis and is made up of 50% management and 50% employee representatives (including union representation). This committee is set up in accordance with the 2008 employee participation agreement which has been negotiated with all the representative unions for the University. This high-level committee is responsible for review of injury prevention and injury management initiatives from the collated data, as well as discussion on processes and performance in relation to H&amp;S. Records were seen of the June 2008 meeting for this committee.</p>
<p>In addition, there is a site H&amp;S committee at each campus. The Wellington site H&amp;S committee generally meets on a two monthly basis and records were seen to confirm that five meetings were held over the last 12 months. This committee includes management and health and safety representatives from each area as well as union representation.</p> <p>Review of the minutes of the Wellington H&amp;S committee indicated that at present their focus is mainly on issues that need to be fixed, rather than analysis of information and trends to enable continuous improvement for the site.</p>
<p>Employees confirmed that the A is an agreed structure and role for the H&amp;S committees and H&amp;S representatives, and that staff are provided with opportunities to be directly involved in H&amp;S - although in practice there is generally a need for strong encouragement for employees to take up the role of H&amp;S representative.</p>
<b>Critical issues:</b> None
<b>Recommendations for improvement:</b>
<ul style="list-style-type: none"><li>• Continue to work on the Wellington site H&amp;S committee developing their role to consider planning and issues etc, rather than items that need to be fixed</li></ul>

## Critical element seven

### – Emergency planning and readiness

#### (AS/NZS 4801:2001 Section 4.4)

#### OBJECTIVE

The employer has an effective general emergency plan to manage emergencies likely to occur within any part of the organisation's operation and to comply with legislative requirements.

Details of requirements	Verified by	Achieved Yes/No
1. There is a documented emergency plan that identifies potential emergency situations and meets relevant emergency service requirements.	1. Evidence of identification of the range of potential emergency situations in the workplace that considers the type and location of the employer (e.g. chemical spills, earthquakes, management of emergency situations for employees working alone).	Yes
	2. Evidence of consideration of emergency service requirements.	Yes
	3. An emergency plan that includes the response required for the relevant identified emergency situations.	Yes
2. Emergency procedures have been implemented and communicated to all employees and contract staff.	1. Evidence that the emergency procedures have been implemented and communicated (e.g. signage, communications, training).	Yes
3. Designated employee/s or wardens for each work area trained to take control in an emergency.	1. List of designated employees known to all staff.	Yes
	2. Training schedules and records.	Yes
	3. Evidence that review or refresher emergency training has been undertaken with designated employees within the previous year.	No
	4. Evidence of specific emergency training for designated staff according to identified potential emergencies in the workplace (e.g. civil defence emergency training, advanced first aid certificates).	No
4. There is periodic testing of emergency evacuation procedures at regular intervals – of no greater than six months apart.	1. Record of emergency evacuation drills.	Yes
5. There is a consultative review of emergency response procedures, after any practice drills and after any actual emergency event.	1. Minutes of review meetings, particularly post-critical event.	Yes
	2. Evidence of update to procedures and plans (where applicable).	Yes

<b>Emergency planning and readiness</b>
<b>Standard achieved:</b> <i>PRIMARY STANDARD DEMONSTRATED FOR THIS ELEMENT</i>
<b>Comments:</b>
<p>There are documented emergency procedures for dealing with earthquake, fire, spills, bomb threat, terrorism, utility failure etc. These procedures are included in each building/department red folder, as well as overarching procedures for the University which outline roles and responsibilities for response. There are also campus emergency procedures included online under "Ready Net" and these procedures are updated weekly.</p> <p>Evidence was seen to confirm that emergency notices and plans are displayed throughout the University, and that Fire Service approval has been gained for the evacuation scheme for each building. Emergency evacuation plans and quick reference flip charts are displayed on the walls throughout the campus, and emergency information is provided to students by the lecturer at the first lecture each semester.</p> <p>Names of emergency wardens are recorded on the intranet and are regularly updated as necessary. Records were seen to confirm that emergency wardens have received training in their roles and responsibilities, however there was insufficient evidence to confirm that this refresher training is provided on an annual basis to wardens.</p> <p>Evidence was seen to confirm that evacuation drills are scheduled on a six monthly basis for each building, and that these are consistently completed at the required intervals. An assessment report is completed after evacuation drills and forwarded to all wardens, in addition to the post-drill review meeting which is held at the time of the event. Records were also seen to confirm the debrief meeting held after a bomb threat event which identified gaps in response, and actions required to remedy this.</p>
<b>Critical issues:</b> None
<b>Recommendations for improvement:</b>
<ul style="list-style-type: none"><li>• Ensure that there is evidence of review or refresher emergency training on an annual basis for fire wardens e.g. records of training undertaken at the time of a fire drill</li></ul>

## Critical element eight

### – Protection of employees from on-site work undertaken by contractors and subcontractors

#### (AS/NZS 4801:2001 Section 4.4)

#### OBJECTIVE

The employer has a systematic approach to ensure that contractors, subcontractors and their employees do not cause harm to the employees of the principal while undertaking the work required by the contract.

(NB: There are other specific duties required of the employer as a principal under the terms of the health and safety in employment legislation that are not part of this programme's requirements.)

Details of requirements	Verified by	Achieved Yes/No
1. Induction to on-site health and safety procedures is co-ordinated by a designated person(s) for all contracted staff, including one-off maintenance contractors or similar.	1. Process for the induction of contractors and their staff, according to their level of involvement with employees in the workplace, and including sign-off by employer and contractor or subcontractor.	Yes
	2. Designated person(s) to co-ordinate health and safety induction for contractors.	Yes
	3. Evidence of completed contractor induction (where applicable).	Yes
2. Criteria to select and manage contractors include assessment of health and safety performance.	1. Documented procedures (e.g. selection checklist or similar).	Yes
	2. Contractor plans include: <ul style="list-style-type: none"> <li>– Staff training and competencies</li> <li>– Current certification and permits</li> <li>– Declaration of the above signed by contractor.</li> </ul>	Yes
3. Health and safety expectations and responsibilities are written into contracts.	1. Evidence that health and safety responsibilities are written into contracts (e.g. procedures, signed contracts).	Yes
4. There is a process to actively monitor the health and safety performance of the contractor at agreed regular intervals for the duration for the contract where relevant.  (NB: Only applies to contract work undertaken on a site where there are employees of the principal present.)	1. Evidence of review of work site health and safety performance including dates and responsibilities.	No
	2. Evidence of feedback from the contractor into hazard identification and incident and injury reporting (where applicable).	Yes
5. Post-contract evaluations include health and safety as part of the evaluation.	1. Process for post-contract evaluation.	No
	2. Evidence of completed post-contract evaluations (where applicable).	No



<b>Protection of employees from on-site work undertaken by contractors and sub-contractors</b>
<b>Standard achieved:</b> <i>PRIMARY STANDARD DEMONSTRATED FOR THIS ELEMENT</i>
<b>Comments:</b>
<p>There are documented procedures for the selection, induction, assessment, monitoring and evaluation of contractors in the Contractor Policy and Procedures.</p> <p>There is a list of preferred contractors utilised by the Wellington campus and records were seen to confirm that these contractors have been provided with an induction, and they have signed the induction form. The majority of contractors are engaged by the Regional Facilities Management unit.</p> <p>Contractors are provided with a site specific induction booklet and are required to sign the induction checklist to demonstrate that they understand and agree to abide by the requirements. In addition contractors are required to sign in to the visitor register on a daily basis, and there are requirements for obtaining work permits and notification of any new hazards to the University.</p>
<p>Contractors are required to be selected based on their competency and provision of site-specific H&amp;S plans. In a major project or contract tender situation this is carried out by completion of a prequalification questionnaire by the contractor. Records were seen to confirm that contractors have completed appropriate pre-selection questionnaires, and have provided evidence of their qualifications, training, H&amp;S plans etc.</p> <p>Evidence was seen of signed contracts which include H&amp;S requirements e.g. in relation to projects, or signed agreements in relation to minor maintenance work.</p>
<p>While records were provided to demonstrate that there are regular meetings e.g. weekly or fortnightly with the contractor for major building projects, and that these include a review of H&amp;S performance; there was insufficient evidence that there were records of on-site H&amp;S performance review for any other contracts e.g. maintenance, electrician, plumbing, cleaning etc.</p>
<b>Critical issues:</b> None
<b>Recommendations for improvement:</b>
<ul style="list-style-type: none"><li>• In order to demonstrate secondary level ensure that there are procedures and evidence to demonstrate that there is on-site review of H&amp;S performance of ALL contractors</li></ul>

## Critical element nine

### - Workplace observation; Confirmation of safe systems in action

#### OBJECTIVE

Under this section, there are a few systems-related requirements that need to be observed on each selected site that is visited as part of the independent audit. This will provide some indication of how the documented systems work in practice.

(NB: This is NOT a detailed site inspection and should not be relied on to satisfy legal compliance with other health and safety obligations.)

Details of requirements	Verified by	Achieved Yes/No
1. The auditor is able to observe some selected audit standard requirements in practice.	1. Hazard registers.	Yes
	2. Evidence of assessment of hazards to determine their significance.	Yes
	3. Current safety information on display.	Yes
	4. Incident and injury (accident) registers available in the workplace (hard copy or electronic).	Yes
	5. Forms completed (where applicable).	Yes
	6. Evidence of personal protective equipment in use according to what is appropriate for the area visited.	Yes
	7. Restricted areas of work are clearly marked.	Yes
	8. Escorting and signing requirements are in place for restricted areas of work.	Yes
	9. Emergency evacuation procedures are clearly outlined (e.g. signs, posters, designated listed employees trained to take control in an emergency e.g. Wardens, first-aiders).	Yes
	10. Emergency exits are clearly marked.	Yes
	11. Emergency equipment is clearly marked and current.	Yes
	12. Security logbooks, visitor registers (or similar) are provided.	Yes
	13. Personal protective equipment is available for site visitors (where applicable).	Yes

<b>Workplace observation</b>
<b>Standard achieved:</b> <i>PRIMARY STANDARD DEMONSTRATED FOR THIS ELEMENT</i>
<b>Comments:</b>
A walk through observation was carried out through out the Wellington campus – including office areas and lecture rooms, with particular attention to some of the high risk areas e.g. Industrial Design area, Institute of Food, Nutrition and Human Health, and Engineering and Technology. Hazard management observation was also carried out at the Industrial Design workshop, and the laboratory areas for Food, Nutrition and Human Health.
Hazard registers were viewed for each area visited, as well as for other Departments. Each hazard register included identification of significant hazards, and controls in place. The hazard register was generally held in the Department Red folder with emergency information, contacts etc.
Current safety information was generally displayed (see recommendation below for Engineering and Technology) e.g. emergency flipcharts and plans, hazard notices and protective equipment requirements, restricted access areas, biological hazard, laser hazard and chemicals warning signs etc. Material Safety Data sheets were held in appropriate areas, and current safety information booklets and laboratory manuals were also displayed.
Incident report forms are available on line to all staff, and in some places hardcopy forms are held for students to have access. Completed forms were seen covering injuries and incidents.
Appropriate personal protective equipment was provided and used as appropriate e.g. hearing protection, safety boots, masks and glasses in the workshop, and gowns/coats, gloves, safety glasses etc in the laboratories.
There is a visitor register for contractors, and also registers in key areas – e.g. the Food, Nutrition and Human Health laboratories. In other areas restricted areas are clearly sign posted, and in most cases are secured by electronic locks or keypads which are restricted to individual users e.g. trained students only, or university staff.
Emergency evacuation notices, plans, equipment and exit signs were seen throughout the University buildings and were all current.
Protective clothing is provided for students and visitors at appropriate locations e.g. laboratories – such as safety glasses, coats, gloves etc.
However a few issues were noted during the observation that need to be addressed: In the Design Workshop there were a number of unlabelled containers of chemicals (see comments after Element 3 in Hazard Management Observation Table). Also a number of chemicals were stored in a filing cabinet in the office area – including flammables, oxidisers and oils within close proximity – this needs to be reviewed. In the Engineering and Technology area it was noted that there did not appear to be any information in any of the computer labs and classrooms on safe workstation set up or techniques for students or staff.
<b>Critical issues:</b> None
<b>Recommendations for improvement:</b>
<ul style="list-style-type: none"> <li>• Design workshop – ensure that all containers of chemicals are labelled, and that there is appropriate storage and separation of incompatible chemicals</li> <li>• Engineering and Technology – recommend ensure that there is ready access to information on safe workstation set up and techniques – for students and staff</li> </ul>

## Critical element ten

### – Focus group interview; Confirmation of safe systems in action

#### OBJECTIVE

The employer is able to confirm and validate hazard management systems through management and employee focus groups.

Details of requirements	Achieved Yes/No
1. There is an understanding of what constitutes a hazard in the workplace.	Yes
2. There is an understanding of the process for hazard identification.	Yes
3. There is an awareness of respective responsibilities in the identification of hazards.	Yes
4. #There is an understanding of the term "significant hazard" and the hierarchy of controls in the management of these hazards.	Yes
5. There is an understanding of injury and incident reporting and recording requirements.	Yes
6. There is an understanding of injury or incident investigations including designated responsibilities and the role of the injured employee and the manager concerned.	Yes
7. There is an understanding of the responsibilities for corrective action resulting from an injury or incident investigation.	Yes
8. #There is an understanding of how to initiate rehabilitation support and assistance for any injured employees.	Yes
9. There is an understanding of the process for union* and other nominated employee representation* and the way in which to raise health and safety issues.	Yes
10. There is an understanding of the emergency procedures in the workplace.	Yes
11. #There is an understanding of how to initiate rehabilitation, and of the support available from management for the early return to work of injured employees.	Yes

# While these questions may be asked at the management and employee focus groups, primary responsibility for understanding rests with the management focus group.

\* Please refer to the definitions in the ACC Workplace Safety Management Practices audit standards.

<b>Focus group interview summary</b>
<b>Standard achieved:</b> <i>PRIMARY STANDARD DEMONSTRATED FOR THIS ELEMENT</i>
<b>Number of focus group interviews undertaken:</b> 2 – 1 employee group and 1 management group
<b>Positions and interests represented in the <u>employee</u> focus group(s):</b>
8 staff, including: Librarian, Student Welfare, Projects Officer, Laboratory technician, Design Workshop, IT, Administration – including union representation from AUS
<b>Positions and interests represented in the <u>management</u> focus group:</b>
7 managers, including: Operations Manager, Manager Facilities Management, Manager Contact Centre, Director of College of Science, Head of Department – Engineering and Technology, H&S Manager, Student Learning Services Coordinator
<b>Summary comments from focus group interviews:</b>
Both focus groups were familiar with the fact that there is a hazard register in each Department which is updated at least annually by the H&S representative in the Department. Examples of relevant hazards were provided by each group – and included: workload, workspace, trips and slips, workstation set up, chemicals, machinery, traffic etc.
It was confirmed that staff were all responsible for raising any hazards they find at any time, and if possible to eliminate or isolate them if possible e.g. trip and slip hazards. If this was not possible then it should be reported to the manager, H&S representative, H&S Adviser or Facilities Management as appropriate for dealing with.
Both groups confirmed that health and safety issues were accepted as important, and managed as quickly as possible, although it was recognised that some issues were not able to be dealt with due to the age/state of the buildings and lack of resources e.g. workspace, air conditioning etc.
Both groups were able to confirm that significant hazards are those with the potential to cause serious harm, and appropriate examples of elimination of trip hazards, isolation of machinery, and minimisation through training, protective equipment and signage were discussed.
Each group confirmed the processes for incident reporting and investigation using the on-line internal report form, and that the H&S representative may be initially involved in the investigation, but that this was required to be signed off by the manager before being forwarded to the H&S Adviser for review and collation. Corrective actions were seen as the responsibility of the manager to confirm and follow up to make sure that they were completed – and this was also monitored by the H&S Adviser.
While there have been very few work related injury events requiring time off work, examples were given in each group of situations where the manager had initiated contact with HR and the ACC case manager to assist in graduated return to work or part time duties.
Both groups confirmed that there are regular reminders for all staff of their ability to be directly involved in H&S by becoming a representative, and/or attending the campus H&S committee. In most cases people have volunteered or shoulder-tapped for the Departmental positions – but it was confirmed that there is plenty of information and opportunity to all staff to be involved.
Emergency procedures were discussed and there was a good understanding of the procedures for fire, earthquake, bomb threat and spill – and examples were discussed of evacuation trials and events for fire and bomb. It was confirmed that wardens are in place, and that notices are displayed.
<b>Critical issues:</b> None
<b>Recommendations for improvement:</b> Nil

## Hazard management observation summary table – Institute of Food, Nutrition and Human Health

Significant hazard identified by the workplace	*Basic method of control selected by the workplace to	Details of controls recorded by the workplace	*Auditor's observation of controls in practice
1. Blood and Body Fluids	<ul style="list-style-type: none"> <li>✓ Isolate</li> <li>✓ Minimise</li> </ul>	<ul style="list-style-type: none"> <li>▪ Use all practicable precautions when handling</li> <li>▪ Refer Lab Manual</li> <li>▪ Dispose of in biohazard bags</li> <li>▪ Disinfect equipment after use</li> </ul>	✓ Mostly observed
2. Chemicals	<ul style="list-style-type: none"> <li>✓ Isolate</li> <li>✓ Minimise</li> </ul>	<ul style="list-style-type: none"> <li>▪ Restraints on shelves</li> <li>▪ Store in separate labelled areas, labelled areas and containers</li> <li>▪ Minimum stocks kept</li> <li>▪ Use approved carrier to carry chemicals</li> <li>▪ Only authorised people can access store</li> <li>▪ Fume cupboards</li> <li>▪ Protective clothing and glasses</li> </ul>	✓ Mostly observed
3. OOS from prolonged use of computers	<ul style="list-style-type: none"> <li>✓ Minimise</li> </ul>	<ul style="list-style-type: none"> <li>▪ Regular breaks and exercises.</li> <li>▪ Management controls as detailed on health and safety website to be followed for prevention and monitoring.</li> <li>▪ Training and information on H&amp;S web site for OOS prevention for computer users.</li> <li>▪ Information in Floppy ergonomist/Habit at work</li> <li>▪ Early reporting and assessment of discomfort.</li> </ul>	✓ Mostly observed
4. Manual handling	<ul style="list-style-type: none"> <li>✓ Minimise</li> </ul>	<ul style="list-style-type: none"> <li>▪ Lifting aids or assistance used as required</li> <li>▪ Heavy items stored at waist level for easier handling</li> <li>▪ Trolleys</li> </ul>	✓ Mostly observed
5. Glassware	<ul style="list-style-type: none"> <li>✓ Isolate</li> <li>✓ Minimise</li> </ul>	<ul style="list-style-type: none"> <li>▪ Warn of danger</li> <li>▪ Sweep up immediately</li> <li>▪ Protective clothing</li> <li>▪ Separate bins</li> </ul>	✓ Mostly observed

(\*delete the non-applicable options)

### Recommended outcome

Overall it was observed at the time of the workplace review that the above-identified significant hazards were being managed in accordance with the management systems documented in the workplace.

**YES**