

# Procedure

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## Work Health Safety (WHS) Internal Audit Procedure

### Summary

Publication Date	25/11/2014
Review Date	30/10/2017
Related Legislation/Applicable Section of Legislation	<p><i>Work Health and Safety Act 2012</i></p> <p>AS 4801:2001 Occupational health and safety management systems – Specification with guidance for use</p> <p>AS/NZS ISO 19011:2014 Guidelines for auditing management systems</p>
Related Policies, Procedures, Guidelines, Standards, Frameworks	Work Health Safety and Injury Management Policy
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Executive Director Responsible (Name/Position/Office)	Phil O'Loughlin, Executive Director Human Resources and Workforce Development
Applies to	All DECD employees
Key Words	Work Health Safety WHS Internal Audit
Status	Current
Approved by	Senior Executive Group
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Version	1

## REVISION RECORD

Date	Version	Revision Description
30/10/2014	1	New procedure in line with new legislative requirements

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# 1. TITLE

Work Health Safety (WHS) Internal Audit Procedure.

## 2. PURPOSE

The purpose of this procedure is to define the process to be used in the verification of the effectiveness of the Department for Education and Child Development's (DECD's) WHS&IM System by establishing the responsibilities and requirements for planning and conducting WHS Internal Audits, reporting results, retaining associated records and the determination of audit criteria, scope, frequency and methodology.

The objectives of this procedure are to outline:

- The establishment of a 3 year WHS Internal Audit Schedule (audit schedule) in consultation with the State WHS Consultative Committee and approved by the DECD WHS Governance Committee.
- The roles and responsibilities of officers, Health and Safety Services, health and safety committees, auditors, directors, education directors, site managers and workers in the internal audit process.
- The internal audit process including scoping, interviews, validation processes, reports, recommendations, tools and templates.
- Expectations for corrective action to be implemented within defined timeframes using the hierarchy of risk controls and the risk prioritisation schedule in accordance with the [Hazard Management Procedure](#).
- Consultation occurs with workers, the health and safety representative (HSR) and other persons as part of the internal audit process.
- Consultation, cooperation and coordination occurs with other duty holders with whom DECD shares a duty regarding the internal audit process.

WHS internal audits will be undertaken in accordance with the AS/NZ ISO 19011:2014 Guidelines for Auditing Management Systems.

This procedure supports the [Work Health Safety and Injury Management Policy](#).

## 3. SCOPE

This procedure applies to all DECD officers, workers and others where WHS internal audits (audits) are undertaken at a DECD workplace.

## 4. PROCEDURE DETAIL

The Department for Education and Child Development's (DECD's) commitment to good governance, high performance and improvement is enshrined in a number of comprehensive business activities that effectively monitor, evaluate and report on the achievement of key strategies outlined in the DECD Strategic Plan 2014-2017. These include the DECD Governance Framework 2014-2018, Improvement and Accountability framework (DIAf), Integrated Planning, Management and Reporting Framework (IPMRF), Brighter Futures program and scheduling of independent operational audits.

The ability to monitor, measure, evaluate and review the effectiveness of DECD's WHS&IM System is critical to the achievement of DECD's strategic and work health safety and injury management objectives. This will be achieved through the establishment of a WHS Internal Audit Program and the implementation of accountable processes.

### 4.1 WHS Internal Audit Program

- 4.1.1 WHS Internal Audit Program is an integral part of DECD's WHS&IM System. It provides a systematic and objective review and assists in measuring performance against the achievement of system objectives, targets and performance indicators. It also supports compliance with legislative requirements and the identification of continuous improvement opportunities. It is undertaken as an open and transparent process that engages senior executives, officers, site managers and workers.

#### 4.1.2 The extent of the WHS Internal Audit Program will be influenced by the following:

- The scope, objective and duration of each audit to be conducted.
- The frequency of audits to be conducted.
- The number, importance, complexity, similarity and locations of the activities to be audited.
- Standards, statutory, regulatory and contractual requirements and other audit criteria.
- Conclusion of previous audits or results from previous WHS&IM System reviews.
- Injury statistical analysis.
- Concerns of interested parties and stakeholders.
- Significant changes within DECD, its strategic goals or operations.
- WHS priorities for the coming year, as determined in consultation with DECD WHS Governance Committee as part of their annual planning and management system review processes.
- The areas that may not have been audited in the previous year(s).
- Other relevant matters, as determined by DECD WHS Governance Committee.
- When directed by the Senior Executive Group.

#### 4.2 Audit Schedule

4.2.1 Health and Safety Services is responsible for developing a WHS Internal Audit Schedule (audit schedule) on an annual basis.

4.2.2 The audit schedule will include the following information:

- Identification of the locations to be audited (auditee).
- Key contact details for the auditee.
- Identification of policies, procedures or processes to be audited.
- Target date and duration for the audits.
- Any resource requirements or implications (eg. technical expertise).

4.2.3 Following approval by the Executive Director Human Resources and Workforce Development, the audit schedule will be:

- Provided to the State WHS Consultative Committee and the DECD WHS Governance Committee.
- Provided to Senior Executive.
- Published on Health and Safety Services website.

#### 4.3 Audit Planning

4.3.1 The Executive Director, Human Resources and Workforce Development will ensure competent resources are allocated to conduct the audit. This may include the engagement of external resources where necessary.

4.3.2 Health and Safety Services will ensure the WHS Internal Audit Plan (refer to Appendix 1) is developed in consultation with the site manager of the auditee and the auditor and is provided to the site manager within fourteen (14) days of the audit.

4.3.3 The assigned auditor will be authorised to have full, free and unrestricted access to all functions, premises, assets, personnel, records and other information and documentation necessary to perform the audit.

4.3.4 The site manager must ensure:

- (a) A copy of the audit plan is provided to all site personnel involved in the audit.
- (b) Documentation and personnel required for the audit will be available by communicating the timing of the audit to the relevant personnel where required.
- (c) Reasonable facilities, support and assistance is provided to the auditor during the audit eg. meeting room, desk, chair, access to a photocopier if required.

#### 4.4 Conducting the Audit

4.4.1 Audits will occur in accordance with the audit schedule and audit plan in order to verify conformance of the WHS&IM system and to measure the effectiveness of its implementation.

4.4.2 The auditor will use the audit plan and audit tool to gather evidence to determine the level of compliance and effectiveness of programs or procedures being audited. This may include any of the following:

- Examination of documentation.
- Interviews with site managers, workers, health and safety representatives (HSRs), union representatives, contractors, volunteers and health and safety committee members.
- Records of observation of activities and conditions (including electronic recording, photocopying and taking photographs if necessary).
- Testing and measuring samples and reports.
- Verification of safe work practices in line with procedural requirements.
- Observation of the relevance and/or suitability of elements contained within the policy or procedure being audited.
- Inspection of the site.

4.4.3 All records, documentation and information accessed during the course of the audit are to be used solely for the completion of the audit and will remain confidential and the property of DECD.

#### 4.5 Dispute Resolution

4.5.1 The site manager and auditor will resolve, through consultation, any disagreements around resources or access to records or interviewees.

4.5.2 Where resolution cannot be achieved, the auditor will refer the matter to the Director, Health and Safety Services who will liaise with the relevant Director to resolve the issue.

4.5.3 In the event that resolution is not possible, the matter will be referred to the Executive Director, Human Resources and Workforce Development for a decision.

#### 4.6 Identification of an immediate threat and/or risk to health and safety

4.6.1 Where the auditor identifies an immediate threat or risk to health and safety (whether in scope or not), the auditor will:

- (a) Cease the activity and leave the work area immediately.
- (b) Notify the site manager immediately of the threat and/or risk to health and safety.
- (c) Request the presence of the HSR (if relevant).
- (d) Ensure the site records the hazard on the Hazard Needs Attention form for immediate corrective action.
- (e) Issue a non-conformance report.

4.6.2 The Director, Health and Safety Services will notify the relevant Executive Director as soon as practicable but within four (4) hours of the activity that presented the immediate threat to health and safety and the corrective action taken.

#### 4.7 Audit Findings and Reporting

4.7.1 On completion of the audit, the auditor will convene a closeout meeting with the site manager and site personnel to discuss the audit findings. The closeout meeting will address the following:

- Acknowledge the cooperation of the site manager and others during the audit.
- Reconfirm the purpose and scope of the audit.
- Provide a verbal summary of outcomes and/or findings, including legislative breaches and content of any non-conformance reports.
- Review the status of any immediate threats and / or risks to health and safety that were identified during the audit process as per 6.6.
- Advise that the written WHS Internal Audit Report (audit report) and Observation and / or Non-conformance Report/s will be issued as soon as practicable but no later than seven (7) business days from the close out meeting.

4.7.2 The audit report will contain a summary of the results, details of conformances, opportunities for improvement (observations) and non-conformances.

#### 4.8 Observation and Non-conformance Reports

4.8.1 On receipt of the audit report and Observation and / or Non-conformance Reports, the site manager must:

- (a) Review the information.

- (b) Implement a corrective action plan to address any non-conformances using the hierarchy of risk controls and risk prioritisation schedule in accordance with the [Hazard Management Procedure](#).
- (c) Ensure appropriate corrective action is implemented in accordance with the corrective action plan.
- (d) DECD workers and the HSR are consulted.
- (e) Review the identified observations and consider any opportunities for improvement.
- (f) Ensure the Observation / Non-Conformance Reports, Internal Audit Report, details of all corrective actions and opportunities for improvement are discussed and minuted at the next local HS Committee meeting or staff meeting.
- (g) Ensure all corrective actions are recorded on the site's Corrective Action Register for monitoring and review of control measures so no other hazards are introduced into the workplace.

4.8.2 Health and Safety Services will provide appropriate advice to the site manager to ensure appropriate corrective action, based on the level of risk, the prioritisation schedule and the hierarchy of risk controls, is identified and implemented within specified timeframes.

4.8.3 Where the site manager is not able to rectify a non-conformance due to resource constraints or delegations, the site manager must refer the matter to the relevant Director or Education Director for further consideration immediately on receipt of the audit report.

4.8.4 Corrective actions arising from the audit will be recorded in the status log by the Health and Safety Services, to enable progress reporting of corrective action to validation.

4.8.5 A summary of the audit findings and WHS Internal Audit Status Log (status log) will be provided to the DECD WHS Governance Committee and the State WHS Consultative Committee in accordance with DECD's WHS&IM reporting processes.

4.8.6 A summary report of the WHS Internal Audit Program that includes the audit schedule, scope, findings and verification outcomes will be provided to the DECD WHS Governance Committee annually as part of the WHS&IM Management Review process.

#### 4.9 Verification of WHS Internal Audit Corrective Action

4.9.1 Health and Safety Services will ensure:

- (a) The DECD WHS Internal Audit Program is monitored to ensure corrective action is identified and implemented within the specified timeframes.
- (b) A follow up meeting is scheduled with the site manager to review and / or verify evidence showing that corrective actions have been implemented within the specified timeframes.
- (c) If the supporting evidence demonstrates compliance the corrective actions will be closed out.
- (d) If corrective action has not been implemented within the specified timeframe, a new timeframe will be negotiated with the site manager for implementation. Reasons for the delay will be reflected in the status log.
- (e) The status log is updated as soon as possible and forwarded to the DECD WHS Governance Committee and State WHS Consultative Committee in accordance with DECD's WHS&IM reporting processes.

#### 4.10 Records Management

4.10.1 Health and Safety Services will ensure:

- (a) Accurate records are maintained of each audit.
- (b) All records pertaining to each audit is placed in a corporate file.

4.10.2 The site manager must ensure copies of audit reports, corrective action plans and records regarding the implementation and monitoring of corrective actions are maintained.

4.10.3 Records and documentation will be maintained in accordance with the General Disposal Schedule No. 15.

## 5. ROLES AND RESPONSIBILITIES

### 5.1 Work Health and Safety Duties

Refer to 6.1.1 of the [Work Health Safety and Injury Management Policy](#).

### 5.2 Responsibilities

Role	Authority/Responsibility for
Auditor	An Auditor must have: <ul style="list-style-type: none"> <li>• Knowledge and competency in AS/NZ ISO 19011:2014 Guidelines for Auditing Management Systems.</li> <li>• Technical understanding of the risks associated with activities of an auditee.</li> <li>• Training as approved by Health and Safety Services (H&amp;SS).</li> <li>• Participation in at least three (3) complete audits as a competent auditor covering all steps in this procedure within the previous 3 years.</li> </ul>
Auditor in training	An Auditor in training will have: <ul style="list-style-type: none"> <li>• Developing knowledge and competency in AS/NZ ISO 19011:2014 Guidelines for Auditing Management Systems.</li> <li>• Developing technical understanding of the risks associated with activities of an auditee.</li> <li>• Is undertaking training as approved by Health and Safety Services (H&amp;SS).</li> <li>• Participating in an audit as part of a team under the guidance of a competent lead auditor.</li> </ul>
DECD WHS Governance Committee	Is responsible for: <ul style="list-style-type: none"> <li>• Reviewing and considering the findings of completed audits as part of the management review process.</li> <li>• Approving the annual Audit Schedule.</li> </ul>
Director, Health and Safety Services	Is responsible for: <ul style="list-style-type: none"> <li>• Coordinating the DECD WHS Internal Audit Program.</li> <li>• Developing the annual WHS Audit Schedule.</li> <li>• Ensuring audits are conducted in accordance with the agreed WHS Audit Schedule and in accordance with this procedure.</li> <li>• Ensuring audit results are provided in accordance with this procedure.</li> <li>• Monitoring the completion of corrective actions arising from completed audits.</li> <li>• Report audit findings to the DECD WHS Governance Committee and the State WHS Consultative Committee.</li> <li>• Maintaining records of internal audits.</li> <li>• Provide advice to auditees in the development and implementation of preventative and corrective action where findings indicate non-conformance with the WHS&amp;IM system, program or procedure.</li> <li>• The verification of evidence to support the implementation of corrective and preventative actions where required.</li> </ul>
Executive Director, Human Resources and Workforce Development	Is responsible for: <ul style="list-style-type: none"> <li>• Ensuring adequate resources are made available so the WHS Audit program can be completed.</li> <li>• Reviewing and considering the results of audits conducted, as part of the DECD WHS Internal Audit Program.</li> <li>• Consider and endorse the proposed annual Audit Schedule.</li> </ul>
Health and Safety Committee (HS)	In accordance with s.77 of the WHS Act, the functions of a health and safety committee are: <ul style="list-style-type: none"> <li>• To facilitate co-operation between DECD and workers in instigating, developing and</li> </ul>



Committee)	<p>carrying out measures designed to ensure the workers' health and safety at work.</p> <ul style="list-style-type: none"> <li>• To assist in developing standards, rules and procedures relating to health and safety to be followed or complied with at the workplace.</li> <li>• Any other functions prescribed by the regulations or agreed between DECD and the committee.</li> </ul> <p>In relation to this procedure:</p> <ul style="list-style-type: none"> <li>• Consider and review audit findings relevant to the site.</li> </ul>
Health and Safety Representatives (HSR)	<p>In accordance with s.68 of the WHS Act, Health and Safety Representatives have powers and functions. They are to:</p> <ul style="list-style-type: none"> <li>• Represent the workers in the work group in matters relating to work health and safety.</li> <li>• Monitor the measures taken by DECD in compliance with the WHS Act in relation to workers in the work group.</li> <li>• Investigate complaints from members of the work group relating to work health and safety.</li> <li>• Inquire into anything that appears to be a risk to the health or safety of workers in the work group, arising from the conduct of DECD.</li> </ul> <p>In relation to this procedure:</p> <ul style="list-style-type: none"> <li>• Be consulted and/or present during the internal audit process.</li> </ul>
Officers	<p>Must ensure reasonable steps are taken to comply with due diligence requirements in relation to the verification of the provisions and use of resources and processes referred to in s.27 (5) (c) to (e) of the <i>Work Health and Safety Act 2012</i> (WHS Act).</p>
Site Managers	<p>Must:</p> <ul style="list-style-type: none"> <li>• Participate in WHS Internal Audits as required.</li> <li>• Provide information, assistance and resources, as required to ensure audits can be completed, in accordance with set timeframes.</li> <li>• Ensure key personnel identified in the audit are available and receive a copy of the audit plan.</li> </ul>
State WHS Consultative Committee	<p>Is responsible for:</p> <ul style="list-style-type: none"> <li>• Considering the annual Audit Schedule.</li> <li>• Considering audit findings from completed audits.</li> <li>• Monitoring compliance with the completion of corrective actions arising from completed audits.</li> </ul>
Workers	<p>Must:</p> <ul style="list-style-type: none"> <li>• Participate in audits as required.</li> <li>• Provide information and assistance, as required to ensure audits can be completed.</li> </ul>

## 6. MONITORING, EVALUATION AND REVIEW

- 6.1 This procedure will be subject to review every 3 years by Health and Safety Services, in consultation with the DECD WHS Governance Committee and State WHS Consultative Committee or earlier if there has been a change in any legislation, Australian Standards or DECD specifications.
- 6.2 The effectiveness of this procedure and compliance findings will be reported to the Chief Executive, Senior Executive Group, DECD WHS Governance Committee and State WHS Consultative Committee annually as part of the WHS&IM Management Review process.

## 7. DEFINITIONS AND ABBREVIATIONS

Term	Meaning
Audit Criteria	Set of policies, procedures or requirements.
Auditee	The DECD directorate, business unit or workplace being audited.
Audit Evidence	Records, statements of fact or other information, which are relevant to the audit criteria and is verifiable.
Audit Findings	Results of the evaluation of the collected audit evidence against audit criteria.
Auditor	A person with the competence to conduct an audit.
Audit Plan	Description of the activities and arrangements for an audit.
Audit Report	Is a documented report of audit findings
Audit Schedule	Is the identification of sites and the scope for internal audits in a 3 year period.
Audit Scope	Extent and boundaries of an audit.
Audit Team	One or more auditors conducting an audit, supported if needed by technical experts.
Compliance	Meeting the requirements of the work health and safety and workers compensation legislation and supporting documentation
Conformance	Demonstrated implementation of all requirements of DECD's WHS&IM policies, procedures, guidelines and processes
Competence	Demonstrated personal attributes and demonstrated ability to apply knowledge and skills.
Competent Person	Is considered someone who: <ul style="list-style-type: none"> <li>• Is a qualified auditor or has met a the lead auditor requirements; or</li> <li>• Has experience with self-insurance or auditing a WHS or injury management system or a related workers compensation field;</li> <li>• Understands the work health and safety and workers compensation legislative requirements for self-insured employers; and</li> <li>• Has a sound understanding of AS 4801:2001.</li> </ul>
Corrective Action	Action taken to eliminate the cause of a detected non-conformance or other undesirable situation.
Corrective Action Log	A record established by a DECD workplace to effectively track and monitor the identification, implementation and effectiveness of corrective action to eliminate or minimise risks to health and safety.
DECD	The Department for Education and Child Development

Hierarchy of Risk Controls	<p>A formal process of applying control measures to achieve the most effective control of risks. The controls within the hierarchy must be applied in order, and as far as is reasonably practicable at each level of the hierarchy. The classifications of controls within the hierarchy are:</p> <ul style="list-style-type: none"> <li>• Elimination</li> <li>• Substitution</li> <li>• Isolation</li> <li>• Engineering Controls</li> <li>• Administrative Controls</li> <li>• Personal Protective Equipment</li> </ul>
IM	Injury Management
Must / Will	Indicates that a process is a legislative, Australian Standard or DECD specification requirement.
Non-conformance	Failure to meet the requirements of DECD's WHS&IM policies, procedures, guidelines and processes. This may be due to the inadequate implementation of a system or lack of supporting documentation
Observation	Implementation of the procedure partially satisfies conformance with noted opportunities for improvement
Officer	<p>In accordance with s.4 of the <i>Work Health and Safety Act 2012</i> and officer means—</p> <p>(a) an officer within the meaning of s.9 of the <i>Corporations Act 2001</i> of the Commonwealth other than a partner in a partnership; or</p> <p>(b) an officer of the Crown within the meaning of s.247; or</p> <p>(c) an officer of a public authority within the meaning of s.252.</p>
Other Persons	<p>Other persons who attend a DECD workplace include the following:</p> <ul style="list-style-type: none"> <li>• Student.</li> <li>• Young person.</li> <li>• Child.</li> <li>• Parent/Carer.</li> <li>• Any other person who attends a DECD workplace from time to time.</li> </ul>
Policy	<p>A policy is a concise, definitive statement of direction which is mandated and provides a framework for decision-making.</p> <p>Policies state WHAT the agency's position is on a specific topic or issue, WHY it has adopted that position and to WHOM it applies.</p> <p>A policy should demonstrate:</p> <ul style="list-style-type: none"> <li>• Legislative compliance and strategic alignment</li> <li>• Clear direction, accountability and transparency</li> </ul>
Procedure	<p>A procedure is a series of mandatory step-by-step instructions that states how a policy or decision by agency executive must be implemented.</p> <p>Procedures state WHO is responsible, WHAT they must do and HOW and WHEN they must do it.</p> <p>A procedure should demonstrate:</p>

	<ul style="list-style-type: none"> <li>• Mandatory operational actions to be followed</li> <li>• Reference to related legislation, policy or decisions by agency executive</li> </ul>
Site manager	Any person who has the responsibility, management or control of a DECD workplace or work unit. This includes but is not limited to Executive Directors, Education Directors, Directors, Principals, Pre-school Directors, Managers and Supervisors.
Technical Expert	A person who provides specific knowledge or expertise to the audit team.
WHS	Work Health and Safety
WHS Act	<i>Work Health and Safety Act 2012</i>
WHS Audit Program	A set of one or more audits planned for a specific time frame and directed towards a specific purpose.
WHS&IM System	The management system DECD has in place for determining how WHS&IM is managed to ensure that DECD meets its WHS and workers compensation legislative obligations
WHS&IM Policies and Procedures	The collection of documents that detail and define DECD's statement of intent and how WHS&IM activities are to be performed within DECD.
WHS Internal Audit	Is a systematic, independent and documented process for obtaining audit evidence and evaluating it objectively to determine the extent to which the audit criteria are fulfilled.
WHS Regulations	Work Health and Safety Regulations 2012
Worker	<p>s.7 of the <i>Work Health and Safety Act 2012</i> states: A person is a worker if the person carries out work in any capacity for a person conducting a business or undertaking, including work as—</p> <ul style="list-style-type: none"> <li>(a) an employee; or</li> <li>(b) a contractor or subcontractor; or</li> <li>(c) an employee of a contractor or subcontractor; or</li> <li>(d) an employee of a labour hire company who has been assigned to work in the person's business or undertaking; or</li> <li>(e) an outworker; or</li> <li>(f) an apprentice or trainee; or</li> <li>(g) a student gaining work experience; or</li> <li>(h) a volunteer; or</li> <li>(i) a person of a prescribed class.</li> </ul>

## 8. SUPPORTING DOCUMENTS

## 9. REFERENCES

[Work Health and Safety Act 2012](#)

[Work Health and Safety Regulations 2012](#)

[Work Health Safety and Injury Management Policy](#)

[DECD Risk Management Policy](#)

[Risk Management Framework](#)

[Hazard Management Procedure](#)

ISO 19011:2014 Guidelines for Auditing Management Systems

## APPENDIX

Appendix 1 – WHS Internal Audit Plan Template

Appendix 2 – WHS Internal Audit Tool Template

Appendix 3 – WHS Internal Audit Report Template

Appendix 4 – Observation / Non-conformance Report Template

Appendix 5 – WHS Internal Audit Status Log Template

## Appendix 1 WHS Internal Audit Plant Example

Date of Audit \_\_\_\_\_ Auditee \_\_\_\_\_ Site Manager \_\_\_\_\_

Address and contact Details \_\_\_\_\_

Auditor \_\_\_\_\_ Tel \_\_\_\_\_

<b>1 Policy and/or Procedure</b>	Specify the WHS Policy/Procedure to be assessed.
<b>2 Audit objective</b>	To test and evaluate conformance against the requirements of the above mentioned policy/procedure and to ascertain and report on the level of effectiveness using performance indicators to benchmark against procedural key elements.
<b>3 Scope</b>	Identify areas within the Educational Facility/Business Unit to be covered. Specify names of required participants and documentation requirements e.g. records to be made available by the auditees (this will vary according to the type of policy/procedure).
<b>4 Methodology</b>	Summarise the audit sequence and timeframes i.e. commencing date and time, auditor requirements, detail time required for audit events e.g. opening meeting, document review, workplace walk through observation, discussion/interview with employees, completion of reporting tool, close out meeting and distribution of reporting documents.
<b>5 Rating</b>	Conformance - 5 = Meets all essential criteria in policy/procedure Observation - 3 = Meets all essential criteria however planning, implementation and consultation needs improvement Non Conformance - 1 = No evidence of a process in place to meet performance criteria Risk Rating 0-30 = <b>Extreme</b> 31-50 = <b>High</b> 51-89 = <b>Medium</b> 90-100 = <b>Low</b>
<b>6 Verification</b>	Site Manager confirmation that employees and HSR notified, resources, facilities for examining documents and required participants are available.

DAY 1	SESSION	PARTICIPANT/S
9.00 am – 10.00 am	Entry Meeting: Discuss the aim of the audit and confirm the agenda	<ul style="list-style-type: none"> <li>• Site Manager</li> <li>• Business Manager</li> <li>• HSR (if relevant)</li> <li>• HSC Committee Chairperson (if relevant)</li> <li>• Selected Staff</li> </ul>
10.00 am – 12.00 pm	Documentation Review	<ul style="list-style-type: none"> <li>• Auditor</li> <li>• Business Manager</li> <li>• HSR</li> </ul>
12.00 pm – 1.00 pm	Lunch break	
1.00 pm – 1.30pm	Individual Interviews with site manager	<ul style="list-style-type: none"> <li>• Auditor</li> </ul>
1.30pm – 3.00pm	Interviews with selected staff	<ul style="list-style-type: none"> <li>• Auditor</li> </ul>
3.00pm – 4.00pm	Workplace Inspection	<ul style="list-style-type: none"> <li>• Auditor</li> <li>• Site Manager</li> <li>• Business Manager</li> <li>• HSR</li> </ul>
4.00pm – 4.30pm	Finalise documentation review and collate findings	<ul style="list-style-type: none"> <li>• Auditor</li> </ul>
4.30 pm – 5.00 pm	Exit meeting.	<ul style="list-style-type: none"> <li>• Site Manager</li> <li>• Business Manager</li> <li>• HSR (if relevant)</li> <li>• HSC Committee Chairperson (if relevant)</li> <li>• Selected Staff</li> </ul>

## Appendix 2 WHS Internal Audit Tool Example

DEPARTMENT FOR EDUCATION AND CHILD DEVELOPMENT

## WHS Internal Audit Tool

XXXXX PROCEDURE

Auditee \_\_\_\_\_

Date \_\_\_\_\_

Site Manager \_\_\_\_\_

HSR \_\_\_\_\_

Auditor \_\_\_\_\_

Tel \_\_\_\_\_

Scope	
Key Elements	
Audit Objective	To test and evaluate conformance against the requirements of the above mentioned key elements and report on the level of effectiveness using specified performance indicators to benchmark against identified key elements.

DEPARTMENT FOR EDUCATION AND CHILD DEVELOPMENT

Performance Indicator	
Target Question: 1 Officer; Site Managers	
Procedural References	
Verification Documents.	
<b>Rating and Summary of findings</b>	
<input type="checkbox"/> Conformance	Compliance and implementation has been verified by reference to:
<input type="checkbox"/> Observation	Partial compliance is evident but there are noted opportunities for improvement concerning:
<input type="checkbox"/> Non Conformance	No substantive evidence presented to confirm implementation of this procedural requirement and non-conformance is clearly apparent because:
<input type="checkbox"/> Non Verifiable	Inadequate documentation/records and/or inability to interview relevant personnel prevent appropriate assessment against this section of the policy. The following action is required: <input type="checkbox"/> Auditee to forward evidentiary information by (specify date _____). <input type="checkbox"/> Establish a specific date and time for interview with nominated personnel.
<input type="checkbox"/> Not applicable	This section of the policy is not relevant within the Business Unit because:

## Appendix 3 Observation / Non-conformance Report Example

DEPARTMENT FOR EDUCATION AND CHILD DEVELOPMENT																																																																																													
<div style="display: flex; justify-content: space-between;"> <div> <p><b>Observation / Non-conformance Report</b></p> <p> <input type="checkbox"/> <b>OBSERVATION</b> <input type="checkbox"/> <b>NON-CONFORMANCE</b> </p> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 20%;">Date</td> <td style="width: 30%;">Report Number</td> <td style="width: 50%;">Auditor's Name:</td> </tr> <tr> <td colspan="3">Auditee</td> </tr> <tr> <td colspan="3">Site Manager</td> </tr> <tr> <td colspan="3">Scope</td> </tr> <tr> <td colspan="3">Risk Rating (refer to Hazard Management Procedure for risk matrix and prioritising of corrective action)</td> </tr> <tr> <td colspan="3">Reason for the Observation / Non-conformance</td> </tr> <tr> <td colspan="3" style="height: 100px; vertical-align: top;">Comments</td> </tr> <tr> <td>Auditor Name</td> <td>Print Name</td> <td>Signature</td> </tr> <tr> <td>Date</td> <td></td> <td></td> </tr> </table> </div> <div style="width: 60%;"> <p style="font-size: small; color: blue;">TO BE COMPLETED BY THE SITE MANAGER AS SOON AS REASONABLY PRACTICABLE AFTER RECEIVING THIS OBSERVATION / NON-CONFORMANCE REPORT</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th colspan="4" style="background-color: #f2f2f2;">Action Plan</th> </tr> <tr> <th style="width: 45%;">Action Required</th> <th style="width: 15%;">Hierarchy of Control</th> <th style="width: 20%;">Who will do it</th> <th style="width: 20%;">Target Completion Date</th> </tr> </thead> <tbody> <tr><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td></tr> <tr> <td colspan="2">Date action completed</td> <td colspan="2"> </td> </tr> <tr> <td colspan="2">Site Manager</td> <td>Print Name</td> <td>Signature</td> </tr> </tbody> </table> <p style="font-size: small; color: blue;">TO BE COMPLETED BY HEALTH AND SAFETY SERVICES</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th colspan="3" style="background-color: #f2f2f2;">Verification</th> </tr> </thead> <tbody> <tr> <td style="width: 30%;">Details of verification evidence</td> <td colspan="2" style="height: 50px;"> </td> </tr> <tr> <td>Validating Auditor</td> <td>Print Name</td> <td>Signature</td> </tr> <tr> <td>Date</td> <td colspan="2"> </td> </tr> </tbody> </table> </div> </div>			Date	Report Number	Auditor's Name:	Auditee			Site Manager			Scope			Risk Rating (refer to Hazard Management Procedure for risk matrix and prioritising of corrective action)			Reason for the Observation / Non-conformance			Comments			Auditor Name	Print Name	Signature	Date			Action Plan				Action Required	Hierarchy of Control	Who will do it	Target Completion Date																																					Date action completed				Site Manager		Print Name	Signature	Verification			Details of verification evidence			Validating Auditor	Print Name	Signature	Date		
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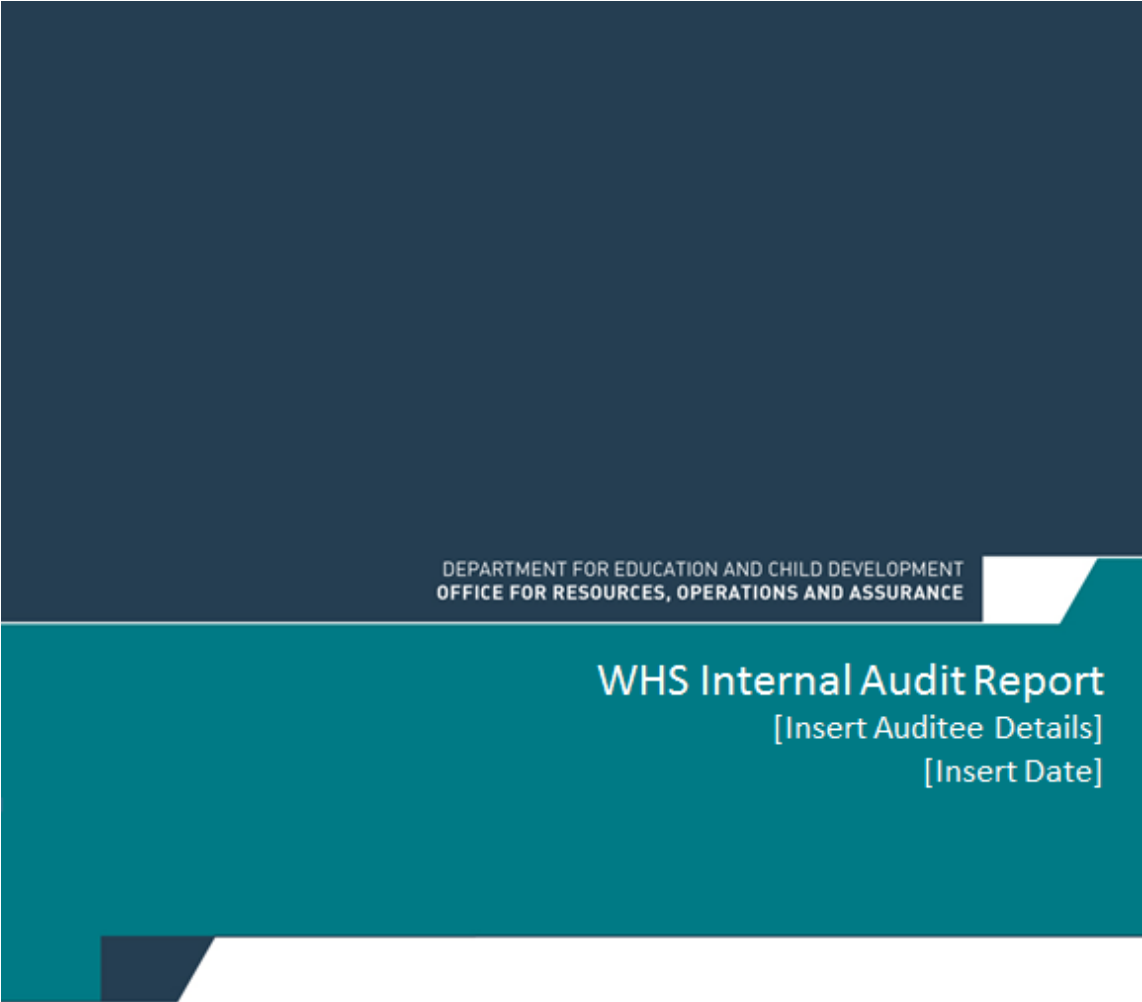
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Appendix 4 WHS Internal Audit Report Example



Document control

Managed by	
Contact person	
Contact position	
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Responsible position	
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Date approved	
Next review date	
Version	
File number	
Status	
Security classification	



Appendix 5 WHS Internal Audit Status Log Example

DEPARTMENT FOR EDUCATION AND CHILD DEVELOPMENT

### WHS Internal Audit Status Log

This status log is to be maintained by the Safety Consultant DECD HSS for the purpose of monitoring specified non-conformances as reported by Auditors and to consolidate status reports to Senior Executive Group, WHS Governance Committee and WHS Consultative Committee.

Date of Audit	Audit Report No	Auditee	Site Manager	Scope	Risk Rating	Status: Open/Closed	Target Completion Date