Work health and safety policy

Work health and safety monitoring, evaluation and performance review implementation standard

1. Purpose

This implementation standard identifies the minimum requirements for work health and safety monitoring, evaluation and performance review that evidence the implementation of the work health and safety (WHS) policy. It also identifies the responsibilities of individual positions in relation to these requirements.

2. Scope

This implementation standard applies to all workers including staff, clients, contractors and others within the Department of Health divisions, agencies and Hospital and Health Services (HHSs) that are not prescribed services.

3. Supporting documents

Authorising policy and standard/s:

- QH-POL-401:2014 Work health and safety policy
- QH-IMP-401-1:2014 Work health and safety planning implementation standard
- QH-IMP-401-2:2014 Work health and safety governance, consultation and capability implementation standard
- QH-IMP-401-3:2014 Work health and safety risk management implementation standard

Forms and templates:

- Legislative Compliance checklist

4. Related documents

- Fire and Rescue Service Act 1990
- Electrical Safety Act 2002
- Work Health and Safety Act 2011
5. Requirements

5.1 Monitoring and evaluation activities

5.1.2 WHS monitoring and evaluation shall occur at system and operational levels and shall consider requirements prescribed in legislation.

5.1.3 At the system level monitoring shall include an audit program of the safety management system (SMS) in accordance with the Queensland Health safety assurance model and other relevant requirements (for example, Australian Health Service Safety and Quality Accreditation Scheme) (AHSSQAS). The audit program shall be conducted by a qualified third party auditor. Additional to routine third party audit programs, internal audits shall also be undertaken from time to time according to the internal audit program that may be established by the accountability area.

5.1.4 Organisational Health / WHS units shall regularly monitor and analyse injury, incident and hazard notification data to identify trends and emerging issues and establish processes for reporting these to the manager of the...
accountability area. The information shall also be used to evaluate and review suitability, relevance and effectiveness of WHS policy and performance indicators.

5.1.5 At the operational level, monitoring shall include routine safety inspections, and specific hazard monitoring (for example, noise) and health surveillance where required.

5.1.6 A process consistent with established WHS reporting requirements and setting out requirements for regular safety inspections shall be established. Inspection programs implemented by managers of functional areas shall incorporate information regarding:

- hazardous processes including the controls implemented (for example, dispensing cytotoxic medications, analysis of specimens, decanting of chemicals)
- plant and equipment to ensure regulatory requirements, safety standards and the *Queensland Health Asset Maintenance Task Specifications* are met (for example, electrical equipment, registrable plant)
- work areas to ensure safe work practices and instructions are being adhered to
- work sites to ensure controls remain appropriate and effective and to ensure that there have been no changes that impact on work flow and emergency procedures.

5.1.7 A process for testing and / or monitoring of specific identified hazards (for example, noise, chemical vapours) by a competent person shall be established and shall detail the actions to be taken:

- where there is uncertainty about a hazards
- where an exposure standard is likely to be exceeded
- when an incident has occurred or a complaint has been made concerning a potential hazard, known or unknown.

Testing and monitoring methods may include:

- environmental (for example, testing for gases in confined spaces)
- personal (for example, wearing pump for respirable dust sampling)
- biological (for example, blood tests for infectious agents).
Incident investigation and analysis

5.2.1. All incidents shall be followed up to determine whether existing controls remain adequate and to identify and implement corrective actions as required.

5.2.2. For complex or critical incidents investigation procedures shall be implemented that:
- define the purpose of incident investigation and analysis
- assign responsibilities and obligations of persons in relation to the investigation and analysis process
- describe reporting and recording requirements
- detail the requirements for evaluation of corrective actions implemented as a result of the investigation’s findings and recommendations.

5.2 Review and improvement

5.3.1. The manager of the accountability area shall be responsible for ensuring the SMS and WHS objectives, targets and performance indicators are regularly reviewed.

5.3.2. Monitoring and evaluation data shall be used to review performance:
- against the SMS
- against legislative requirements
- against industry and WHS objectives
- against targets and performance indicators
- to identify successes and undertake any corrective action required.

Organisational Health and WHS units shall provide the chief executive of the accountability area with accurate and transparent reports to enable an informed review.

5.3.3 There shall be a management review of the SMS framework at least every two years to ensure its continuing suitability, adequacy and effectiveness. Reviews shall consider monitoring and evaluation data, observations, and changes to legislation and industry standards.

5.3.4 The SMS shall be reviewed in whole or in part in accordance with the following:
- at the predetermined periods identified on each document
- when there are legislative changes
- when there is a serious incident or a deficiency is identified through an audit or other mechanism

Effective from: 01-July-2014
5.3.5 The evaluation and review process shall support continual improvement by:

- identifying opportunities for improvement in performance
- identifying causal factors of non-conformances and incidents
- addressing causal factors and identifying opportunities for preventive action
- validating data and verifying effectiveness of controls and corrective and preventive action
- maintaining accurate records and documenting procedures and instructions
- ongoing assessment of progress against objectives and targets
- reviewing how policy and other safety information is communicated to enhance awareness and promote a safety culture.

5.4 Performance reporting and records management

5.4.1 Reports based on the data of the relevant monitoring programs and associated recommendations shall be provided by the WHS unit of the accountability area to the accountability area’s manager and WHS committee. Reports shall clearly and accurately articulate criteria such as:

- compliance against legislative and other requirements, and identified deficiencies
- achievement against targets, objectives and performance indicators identified in the WHS plan, safety assurance model or other initiative
- where relevant—issues rectified, issues identified, issues escalated and issues that remain unresolved.

5.4.2 A procedure that identifies records required for the implementation and operation of the SMS shall be established and implemented. The procedure shall be in accordance with the requirements of the department’s policy for records management.
6. **Review**

This implementation standard is due for review on 01 May 2017 or subject to changes in legislation, organisational activities, or Occupational Health and Safety performance. Notwithstanding this policy remains in force until such time as it is revoked.

**Date of last review:** 30/04/2014  
**Supersedes:** *QH-IMP-274-8:2012 OHS Management System Implementation Standard*

**Business area contact**

Organisational Health, Human Resources Branch, System Support Services Division

7. **Responsibilities**

<table>
<thead>
<tr>
<th>Position</th>
<th>Responsibility</th>
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<tr>
<td>All workers</td>
<td>Compliance with this implementation standard.</td>
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</table>
| Deputy directors-general / HHS chief executives (managers of accountability areas) | Ensuring monitoring and review activities are implemented at both the operational and system level.  
Considering monitoring reports and report recommendations in reviews of the SMS and WHS. |
| Managers of functional areas | Undertake regular safety inspections for their functional area.  
Arrange for monitoring of specific hazards where applicable.  
Arrange for health surveillance with applicable.  
Maintain records of inspection and monitoring activities to support audits, risk management and safety reviews as required.  
Comply with incident investigations procedures.  
Provide reports to the WHS unit or others as required. |
| Senior director, HR Policy, Performance and Organisational Health | Receive, analyse, validate and report to the Director-General on Queensland Health, health and safety data to support monitoring responsibilities of the Director-General as the public sector health system manager.  
Manage reviews of the SMS.  
Provide support to HHS with systems audits where practicable. |
| WHS managers | Ensure safety inspections and other relevant monitoring is undertaken within functional areas.  
Ensure there is a process for documenting and communicating monitoring outcomes and it is followed.  
Prepare reports on the outcomes of monitoring programs for |
communication to the WHS committee and the manager of the accountability area.
Shall coordinate and lead incident investigations and analysis and make recommendations for corrective actions.
Shall coordinate reviews of policies and procedures of the accountability and functional areas.

8. Definitions of terms used in the policy and supporting documents

<table>
<thead>
<tr>
<th>Term</th>
<th>Definition / explanation / details</th>
<th>Source</th>
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<tbody>
<tr>
<td>Accountability area</td>
<td>A division, agency or HHS.</td>
<td>Department of Health</td>
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<td>Audit</td>
<td>A systematic examination against defined criteria to determine whether activities and related results conform to planned arrangements and whether these arrangements are implemented effectively and are suitable to achieve the organisation’s policy and objectives.</td>
<td>AS/NZS 4801:2012</td>
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<tr>
<td>Functional area</td>
<td>A work unit, category of services, or a work group.</td>
<td>Department of Health</td>
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<td>Hazard</td>
<td>A situation or thing that has the potential to harm a person.</td>
<td>How to Manage Health and Safety Risks Code of Practice 2011</td>
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<td>Health surveillance</td>
<td>Any procedure undertaken to assess, review or monitor an individual’s health in order to identify or detect any significant change from normality.</td>
<td>Australian Institute of Occupational Hygienists</td>
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<tr>
<td>Safety inspection</td>
<td>The process of identifying hazards and risks in the workplace</td>
<td>Department of Health</td>
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<td>Worker</td>
<td>A person is a worker if the person carries out work in any capacity for the person conducting a business or undertaking, (e.g. the department, agency or HHS), including work as: • an employee • a contractor or subcontractor • an employee of a contractor or subcontractor • an employee of a labour hire company who has been assigned to work in the person’s business or undertaking • an outworker • an apprentice or trainee • a student gaining work experience • a volunteer • a person of a prescribed class.</td>
<td>Work Health and Safety Act 2011 s 7</td>
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9. Approval and implementation

Policy custodian:
Senior Director, HR Policy, Performance and Organisational Health

Responsible executive team member:
Deputy Director-General, System Support Services Division

Approving officer:
Deputy Director-General, System Support Services Division

Approval date: 01 June 2014
Effective from: 01 July 2014

Version control

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<th>Version</th>
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<th>Prepared by</th>
<th>Comments</th>
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<td>1.0</td>
<td>30/04/2014</td>
<td>OHS</td>
<td>SMS review project 2013-2014</td>
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