Policy Directive

Work Health and Safety Audits

Summary NSW Health organisations must undertake work health and safety (WHS) audits in accordance with this Policy over a two-year cycle across their facilities/ services. Audits are conducted to determine the effectiveness of management systems, to identify the strengths and opportunities for improvements and to ensure compliance with the WHS legislation and NSW Health policies and procedures. This Policy provides a consistent, effective approach for gathering information on which a NSW Health organisation can plan and implement WHS improvements.

Document type	Policy Directive
Document number	PD2023_010
Publication date	11 April 2023
Author branch	Workplace Relations
Branch contact	(02) 9391 9373
Replaces	PD2016_017
Review date	11 April 2028
Policy manual	Not Applicable
File number	H23/20825
Status	Active
Functional group	Personnel/Workforce - Occupational Health and Safety, Security
Applies to	Ministry of Health, Local Health Districts, Board Governed Statutory Health Corporations, Chief Executive Governed Statutory Health Corporations, Specialty Network Governed Statutory Health Corporations, NSW Health Pathology, Public Health System Support Division, Community Health Centres, NSW Ambulance Service, Dental Schools and Clinics, Public Hospitals
Distributed to	Ministry of Health, Public Health System, NSW Ambulance Service, Health Associations Unions, Tertiary Education Institutes
Audience	Workforce, Human Resources, Risk Management, Work Health and Safety Directorates

NSW Health
POLICY DIRECTIVE

Work Health and Safety Audits

POLICY STATEMENT

A robust audit program is a key strategy for continuous improvement of Work Health and Safety Management Systems across NSW Health. NSW Health organisations must undertake work health and safety (WHS) audits over a two-year cycle across their facilities/ services.

WHS Audits provide a consistent, effective approach for gathering information on which a NSW Health organisation can act to comply with its legislative obligations and plan and implement improvements.

SUMMARY OF POLICY REQUIREMENTS

WHS audits are to be undertaken within a two-year audit cycle (audit cycle). The audit scope is relevant to activities for which the NSW Health organisation is responsible and should include all sections of the *Work Health & Safety Audit Tool* (WHS Audit Tool) that apply to that workplace.

Agreed arrangements for inclusion in audits are in place with other NSW Health organisations and businesses that are responsible for services within the scope of the audit. All hospitals are to be audited within the audit cycle. NSW Health organisations responsible for other types of facilities/ services are also required to adhere to the two-year audit cycle.

Audit programs are to include an adequate sample size of facility and service locations based on the level of risk where there are multiple facilities that have a similar function.

The Chief Executive of the NSW Health organisation will ensure that adequate resources are provided to support the audit program. This includes the time and resources to prepare, participate and complete the WHS audits.

Auditors need to be independent of the facility/ activity they are auditing. They need to have appropriate skills and qualifications to conduct and lead an audit.

NSW Health organisations must cooperate, communicate and consult with other health agencies onsite when auditing. This includes sharing relevant information and working together to rectify shared actions.

Plans must be developed to address the findings and recommendations of the audit. The plan must include risk-based approach with actions and timeframes for implementation and be approved by the relevant senior executive(s). The plan must be developed following consultation with workers and other stakeholders.

The results and recommendations of the audits, and the plan to address recommendations, must be provided to the Chief Executive and the relevant Board within the NSW Health organisation. Regular progress on actions included in the plans are to also be provided to the Chief Executive and the relevant Board within the Health organisation.

Key audit outcomes must be communicated to affected workers and their representatives where relevant.

NSW Health organisations need to report to the NSW Ministry of Health audit progress and outcomes as part of governance arrangements.

REVISION HISTORY

Version	Approved By	Amendment Notes
PD2023_010 April-2023	Deputy Secretary, People, Culture and Governance	• Updates to comply with the *Work Health & Safety Regulation 2017* (NSW). • Additional auditing criterion to meet the change in the risk structure for NSW Health • Updating to the scoring system with a three-tiered rating system of limited, partial, full compliance • Additional reporting requirements from NSW Health organisations to the Ministry of Health • Removal of duplication with the NSW Health Policy Directive *Security Improvement Audit* (PD2021_037) • Updating of training requirements of auditors • Clarification of responsibility for auditing on shared sites for NSW Health organisations.
May-2016 (PD2016_017)	Deputy Secretary, Governance, Workforce and Corporate	Updated to comply with *Work Health & Safety Act 2011* and *Work Health & Safety Regulation 2011*.
May-2007 (PD2007_030)	Director-General	Updated
January-2005 (PD2005_189)	Director-General	Updated

CONTENTS

1. BACKGROUND

This Policy Directive provides processes and procedures for NSW Health organisations to undertake work health and safety audits across their facilities/ services using the *Work Health & Safety Audit Tool* (WHS Audit Tool).

Audits are conducted to determine the effectiveness of management systems, identify the strengths and opportunities for improvements and to ensure compliance with the *Work Health and Safety Act 2011* (NSW) and *Work Health and Safety Regulation 2017* (NSW), the Safe Work Australia and NSW Codes of Practice, and NSW Health Work Health and Safety (WHS) policies and procedures.

Audits are to be undertaken within a two-year cycle (audit cycle). This Policy Directive and WHS Audit Tool aims for consistent information gathering and assessment of performance on which a NSW Health organisation can undertake to comply with its WHS legislative obligations and plan and implement WHS improvements.

1.1. About this document

The aim of the WHS Audit Tool is to provide a consistent, effective, and transparent approach for gathering information on which a NSW Health organisation can act to comply with its WHS legislative obligations and improve its performance. Undertaking the WHS audit every two years ensures NSW Health organisations are:

1. Identifying and assessing the quality of work health and safety programs, policies, systems and procedures

2. Assessing the extent of implementation of work health and safety programs, policies, systems and procedures in the NSW Health organisation's workplaces

3. Assessing the awareness of workers (including managers) about these work health and safety programs, policies, systems and procedures including the NSW Health Policy Directive *Work Health and Safety: Better Practice Procedures* (PD2018_013)

4. Providing a tool to improve consistency of implementation and compliance for WHS management systems across NSW Health organisations.

1.2. Key definitions

Affiliated Health Organisations	Not-for-profit religious, charitable or other non-government organisations which provide health services and are recognised as part of the public health system under the *Health Services Act 1997* (NSW).
Audit	Systematic, independent and documented process for obtaining audit evidence and evaluating it objectively to determine the extent to which the audit criteria are fulfilled.[1]

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[1] AS/NZS ISO 19011:2019 Guidelines for auditing management systems

Auditor	An independent person with the appropriate skills and experience to undertake an audit.
Audit Program	Arrangement for a set of one or more audits planned for a specific timeframe.[1]
Audit Scope	Extent and boundaries of an audit; it includes a description of the physical locations, service/ facility units, activities and processes, as well as the time period.[1]
Facility	A hospital, nursing home, residential care or any other NSW Health workplace that provides services. This includes surrounding buildings that form part of the complex. It also includes NSW Health workplaces that are standalone (don't form part of a Local Health District/ Specialty Health Network complex) such as ambulance stations, warehouses and collection centres.
NSW Health Organisation	Are considered persons conducting a business or undertaking (PCBU) under the *Work Health and Safety Act 2011* (NSW) and for the purpose of this Policy means Local Health Districts, HealthShare NSW, NSW Ambulance, Sydney Children's Hospitals Network, Justice Health and Forensic Mental Health Network and NSW Health Pathology.
Person conducting a business or undertaking (PCBU)	Under the *Work Health and Safety Act 2011* (NSW) NSW Health organisations are person(s) conducting a business or undertaking (PCBU) and are responsible for the primary duty of care for workplace health and safety, as far as is reasonably practicable
Worker	Anyone who carries out work for NSW Health is given the legal status of 'worker', workers include: • Employees • Contractors, including Visiting Practitioners • Sub-contractors • Sub-contractors and employees of contractors • Employees of a labour hire company e.g., Agency staff • Volunteers • Apprentices, cadets, or trainees • Students on clinical, work experience or other placements.

1.3. Legal and legislative framework

Audits are conducted to determine the effectiveness of management systems, to identify the strengths and opportunities for improvements and to measure compliance with the *Work Health and Safety Act 2011* (NSW) [WHS Act] and *Work Health and Safety Regulation 2017* (NSW) [WHS Regulation]*.*

Section 19 of the WHS Act specifically requires **primary duties of care** by a person conducting a business or undertaking (PCBU), so far as reasonably practicable, for a:

- safe working environment
- safe plant and structures
- safe systems of work
- safe use, handling and storage of plant, structures and substances
- adequate facilities for the welfare of workers at work
- information, training, instruction and supervision necessary to protect health and safety, and
- monitoring of workers and workplace conditions to prevent injury and illness.

The WHS laws create duties and obligations regarding management of risks in the workplace. These are to:

1. Identify hazards in the workplace
2. Assess the risks those hazards create
3. Then eliminate or minimise these as much as possible
4. Monitor and review.

Workers must be consulted at each stage of the risk management process.

NSW Health organisations have a legal duty to eliminate or minimise risks to health and safety of workers at work. The person with management or control of a workplace also has a legal duty to make sure, so far as is reasonably practicable, that there are no health and safety risks to anyone working in or visiting the workplace. This includes when people are entering or exiting the workplace.

Strategies that NSW Health organisations can adopt to manage their hazards and health and safety risks include:

- consulting with workers about safety, hazards, and risk control
- implementing a safety management system and a risk management process that are regularly reviewed
- consulting, cooperating and coordinating with any other duty holders who have a responsibility for health and safety
- maintaining the workplace and facilities in a safe condition
- ensuring safe systems of work
- providing appropriate training and supervision of workers

- implementing appropriate procedures for workers who work in remote or isolated worksites

- ensuring appropriate resources are avaliable

- providing first aid equipment and prepare, implement and practice emergency plans for evacuations in emergencies

- Encourage reporting and management of all WHS incidents, near misses and hazards.

For further information in relation to the WHS Act and duties refer to the NSW Health Policy Directive *Work Health and Safety: Better Practice Procedures* (PD2018_013) or visit the SafeWork NSW website.

2.   AUDIT PROCESS

2.1.   Auditors with appropriate expertise

NSW Health organisations must allocate the appropriate level of resources to undertake audits, which may involve the appointment of auditors from outside of the organisation (such as auditors from another NSW Health organisation or external providers, if the auditors meet the competencies required under this Policy). NSW Health organisation auditors' substantive positions may need to be resourced while they undertake auditing activities.

Auditors are to be independent of the activity/ facility they are auditing. This means an individual does not audit decisions they have made, for example they do not have any accountability for that facility. Independent auditors may be someone from:

- Another facility within the Local Health District/ Specialty Health Network/ or other NSW Health organisation

- Another Local Health District/ Specialty Health Network/ or other NSW Health organisation

- External to NSW Health.

Staff with a district wide role must ensure that their work/ decisions are audited by someone independent to that work (such as a NSW Health organisation wide procedure). They may audit how a facility implements that work/ decision.

Auditors are required to complete *BSBAUD512 Lead quality audits* or equivalent training to conduct and lead an audit. Auditors that meet the training requirements under previous policies and have maintained experience (completed two audits in the last audit cycle) still meet requirements and are able to continue to audit.

Auditors need to undertake at least two audits during the two-year audit cycle to maintain their skills and to keep up to date on current work health and safety requirements.

While auditors do not have to audit another NSW Health organisation to maintain their auditing qualifications, it is good practice to do so.

2.2.   Two-Year Audit Cycle

A two-year audit cycle is the timeframe which a NSW Health organisation complete audits of its facilities/ services.

In the audit cycle, all hospitals are to be audited, with a sample of departments selected based on the level of risk. For example, not every ward within a hospital will need to be audited, but a sample of different types of wards should be included within the scope of the audit. The sample should be large enough to reflect the implementation and effectiveness of the work health and safety (WHS) management systems.

NSW Health organisations responsible for other types of facilities/ services are required to adhere to the two-year audit cycle. Audit programs must include an adequate sample of facility and service locations based on the level of risk where there are multiple facilities that have a similar function such as warehouses, collection centres and community health centres. When determining the services/ facilities to audit you need to consider a sample size that reflects both governance arrangements and service provision.

2.3.   Auditing program requirements

Each NSW Health organisation must ensure an audit program is planned and implemented for the audit cycle. The NSW Ministry of Health (the Ministry) may request a copy of the audit program from the NSW Health organisation.

Organisations must allocate appropriate time and resources to prepare, participate and complete the audits.

The audit must include all sections from the WHS Audit Tool that apply to that workplace.

The audit scope is relevant to activities for which the NSW Health organisation is responsible, for example does not include activities for which another NSW Health organisation is responsible that may impact on the work health and safety of staff, such as security. Any safety issues arising from activities undertaken during the audit for which another NSW Health organisation is responsible is to be addressed with the other NSW Health organisation as an action arising from a non-compliance.

Agreed arrangements for inclusion in audits are in place with other NSW Health organisations and businesses that are responsible for services within the scope of the audit. These may include HealthShare NSW, NSW Health Pathology, a Private Public Partnership or retail businesses located in the audit site.

A plan is developed to address the findings and recommendations of the audit. A risk approach to the plan is to include actions and timeframes for implementation and be signed off by the relevant senior executive(s). Consultation on the plan must include workers, their representatives, including Health and Safety Representatives (HSR), and other stakeholders. The findings and recommendations may include the NSW Health organisation's senior executive(s)/ head office as well as the local facility/ service.

The results and recommendations of the audits are provided to the Chief Executive and the Board (where applicable) as officers under WHS legislation.

Outcomes of audits are reported to the Ministry outlined in the governance and reporting section of this Policy.

Information sheets, audit preparation supporting documentation for each section of the WHS Audit Tool, and other supporting documentation that is developed will be made available on the NSW Health Work Safety and Security Improvement intranet page *Work, Health and Safety*.

2.4. NSW Health organisations auditing their services on other NSW Health organisation sites

NSW Health organisations must cooperate, communicate, and consult with other NSW Health organisations onsite when auditing:

- Other NSW Health organisations that are tenants and require evidence for a specific criterion (such as asbestos plan, fire safety statements, etc.) applicable to their service but the service is provided by the NSW Health organisation with site control, the evidence or results is to be provided when requested

- Where there is shared duty with the tenant NSW Health organisation, the results of WHS audit must be provided to that NSW Health organisation

- For shared actions identified for both NSW Health organisations from the WHS audit they must work together to rectify.

3. GOVERNANCE AND REPORTING

Chief Executives are to ensure that:

- The results of audits and recommendations are reported to relevant Boards for the Health organisation (where applicable) and/or a committee of the Board (such as the Audit and Risk Committee) as required as part of established regular work health and safety (WHS) reporting mechanisms.

- The action being taken in response to the audit reports is appropriate and commensurate with the level of risk having regard to Work Health and Safety legislative obligations, and the action is reported to the Board (where applicable) as required.

- Reports are provided to the NSW Ministry of Health (Ministry) on a quarterly basis through the *Work Health & Safety Executive Reporting* process on the following:

  - Progress of their audits during the two-year audit cycle

  - Provision of significant outcomes of the audit. Significant outcomes are considered to be either:

    - Where there is 50% or greater non-compliance to a WHS Audit Tool section, or

    - Where there is 50% or greater non-compliance overall, for example non-compliance to each section is such that there is only 50% compliance overall

    - The non-compliance(s) identified is such that there is a possibility that:

- Legal or regulatory action may be taken against the facility/ service

- Workers and others may be seriously injured

- The matter may be a State-wide issue

- There may be media interest.

    o Provision of the WHS audit summary report and WHS results summary table for each facility/ service audited.

Affiliated health organisations in respect to its recognised establishment and services are to comply with this Policy Directive but do not need to report to the Ministry on a quarterly basis on the progress and outcome of audits.

NSW Health organisations are encouraged to provide information on any WHS initiatives identified through the WHS audit that can be shared as good practice with other NSW Health organisations.

Workers and representatives are to have key audit outcomes communicated to them if relevant to their work.

The NSW Health organisation shall ensure that audit reports and associated documents are available for review by the Ministry when requested from time to time.

4.   WORK HEALTH AND SAFETY AUDIT TOOL STRUCTURE

The Work Health and Safety (WHS) Audit Tool includes the worksheets:

- Contents Page

- Work Health & Safety Tool Summary Report

- Results - Summary Table

- Work Health & Safety Audit Report.

4.1.   Content Page

The contents page provides easy reference to the different criteria contained within the Work Health & Safety Audit Report.

The embedded links provide easy navigation to the section of the audit tool and criterion.

Criteria 1 to 8 are strategic and are generally audited at head office level with some auditing at facility/ service local level to verify implementation. For the strategic criteria you audit once during the audit cycle unless there are changes which require re-auditing. The audit includes verifying the implementation of the criteria at facility/ service level, where applicable.

Criteria 9 to 20 are hazard specific and would be audited at the facility/ service level.

Criterion 21 provides the NSW Health organisation with a section to include additional hazards for auditing. The specific hazard criteria covered in the tool is not exhaustive and other hazards are present as part of the facility/ service which may need review. The NSW

Health organisation's head office and/or local facility/ service would identify additional hazards by a review of WHS incidents or hazard/ risk assessment.

The NSW Ministry of Health may also direct the inclusion of a specific hazard as part of an audit cycle. If a NSW Health organisation decides not to use this section, a reason must be specified in the audit report.

For NSW Health organisations that are not required to undertake an audit the NSW Health Policy Directive *Security Improvement Audit* (PD2021_037) they are to assess security and aggression under Criterion 21 using the WHS Audit Tool.

Criteria 22 to 26 cover other activities that are part of a work health and safety system.

4.2. Work Health & Safety Summary Report

Auditors complete the WHS Audit Tool with details of the audit location, auditors' names (including lead auditor) positions, and the site contact.

The WHS Summary Report automatically updates to provide a summary of the overall audit findings. This includes a percentage score for criteria that are found to be substantially compliant from the audit.

4.3. Results – Summary Table

When auditors record their results in the WHS Audit Tool, the information automatically updates in the Results Summary table. For each section, the table displays the number of substantial, partial and limited compliance criteria and those not applicable. Automatically a combined total for substantially implemented criteria for each section is calculated.

4.4. Work Health & Safety Audit Report

The report is a detailed summary of the audit findings. The different sections of the audit report and their application is as follows:

First Column – provides the section number and criterion number connected with each criterion.

Criteria – sets out the requirements against which audit evidence is compared.

Compliance criteria – sets out the evidence required to determine compliance.

Compliance – This is the tab where auditors record their decision after evaluating the evidence. This can be either an outcome of Substantial Implementation/ Compliance, Partial Implementation/ Compliance, Limited implementation/ Compliance or Not Applicable (NA). This column includes a drop-down menu to record the decision. When choosing Not Applicable, a reason must be recorded. The audit tool will change colour based on the selection of a rating shown in the table below.

Rating	Explanation of Rating
Substantial Implementation/ Compliance	The evidence provided (documentation and/or implementation-questioning/ observation) meets the criteria.
	The NSW Health organisation will need to continue with ongoing review and monitoring to ensure the criteria continues to be met.
Partial Implementation/ Compliance	The evidence provided (documentation and/or implementation-questioning/ observation) partially meets the criteria.
	Further controls are required to improve operational effectiveness and consistency across a facility/ service.
Limited Implementation/ Compliance	The evidence provided (documentation and/or implementation-questioning/ observation) has significant gaps and does not meet the criteria.
	Additional resources and controls are required to ensure the requirements of a WHS system are met for legislative and policy compliance.
Not Applicable	The criteria do not apply to the facility/ NSW Health organisation/ service.

All drop downs listed for each criterion must be completed before issuing a final report to ensure the calculations are correct.

Evidence sighted during audit – All evidence including documentation, observations and/or questioning used to decide the level of implementation/ compliance must be recorded. The evidence included in this column must be verifiable and therefore needs to include a unique identifier, such as a title and a date or a document number or persons name and position or location/ ward/ unit relevant to the observation.

Audit Comments/ Recommendations – The auditor will provide recommendations to ensure further improvements (for partial/ limited implementation/ compliance) and positive feedback including observation of best practice during the audit.

Reference material for this section – The end of each section, the reference material in determining compliance rating to the relevant section.

5.   WORK HEALTH SAFETY AUDIT TOOL DOCUMENTATION

NSW Health organisations will be provided with an Excel workbook of the Work Health and Safety (WHS) Audit Tool and ongoing updates as they occur.

NSW Health organisations must not change the text and calculations contained within this Excel document. It should be the same as the document available on NSW Health Safety and Security Improvement intranet page *Audit*.

Additional columns can be added to the WHS Audit Tool to the right of the last column in the "Audit Tool" tab to assist with managing the outcomes from the audit process. An example could be adding columns containing the agreed actions/ controls and timeframes for partial or limited compliance criterion.

6.   SUPPORTING DOCUMENTATION

Evidence guides and other audit preparation supporting documentation for each section of the Work Health and Safety (WHS) Audit Tool are available on the NSW Health Safety and Security Improvement intranet page *Audit*.

Any additional tools created to support and standardise the audit process will be available on the NSW Health Safety and Security Improvement intranet page *WHS Evidence Guides*.