

# Health and Safety Guidelines: HSG 9.1

## Records, Documents and Document Control



### 1. Purpose

This document describes the University's processes for managing the Health and Safety Management System Framework policies, elements, guidelines and related documentation.

### 2. Scope

This document applies to the Executive Committee, Leaders, Supervisors, Health and Safety Committees, the Health and Safety Team, and Workers.

### 3. Definitions

In the context of the Health and Safety Management System Framework:

- (a) **Dangerous Occurrence** means an event occurring in the course of work that exposes a Worker or any other person to a serious risk to a person's health or safety emanating from an immediate or imminent exposure to:
- (i) an uncontrolled escape, spillage or leakage of a substance;
  - (ii) an uncontrolled implosion, explosion or fire;
  - (iii) an uncontrolled escape of gas or steam;
  - (iv) an uncontrolled escape of a pressurised substance;
  - (v) electric shock;
  - (vi) the fall or release from a height of any plant, substance or thing;
  - (vii) the collapse, overturning, failure or malfunction of, or damage to, any plant that is required to be authorised for use in accordance with Regulatory requirements;
  - (viii) the collapse or partial collapse of a structure; or
  - (ix) the collapse or failure of an excavation or of any shoring supporting an excavation.

- (b) **Executive Committee** means the Vice-Chancellor, the Deputy Vice-Chancellors, the Pro Vice-Chancellors, the Chief Operating Officer and the Chief Financial Officer.
- (c) **Hazard** means a situation, condition, state of affairs or event that exposes a Worker to a risk to his or her health or safety during the course of work.
- (d) **Hazardous Chemicals** are substances, mixtures and articles that can pose a significant risk to health and safety if not managed correctly. Further information can be found at <https://www.safeworkaustralia.gov.au/chemicals>.
- (e) **Health and Safety Documentation** means the policies, elements, guidelines and related documentation which form the University's Health and Safety Management Framework.
- (f) **High Risk Plant means:**
  - (i) boilers categorised as hazard level A, B or C according to criteria in section 2.1 of *AS:4343:2005 (Pressure equipment-Hazard levels)*;
  - (ii) pressure vessels categorised as hazard level A, B or C according to the criteria in section 2.1 of *AS:4343:2005 (Pressure equipment-Hazard levels)*, except LP Gas fuel vessels for automotive use, serially produced vessels, lifts, including escalators and moving walkways; and
  - (iii) gas cylinders.
- (g) **Incident** means an unplanned event that caused, or could have caused, an illness or injury to a Worker.
- (h) **Leader/Supervisor** means Any member of the University who is responsible for supervising staff and/or undergraduate or postgraduate students and/or for leading research projects.
- (i) **Notifiable Incident** means an Incident which is notifiable to SafeWork NSW and includes:
  - (i) a Dangerous Occurrence; or
  - (ii) an incident that results in the death of a person; or
  - (iii) results in a Serious Injury or Illness,

- (j) **Record** means information and data relating to Workers, plant and equipment, facilities, processes and procedures relevant to health and safety (Refer to section 6.3 of this document):
- (k) **Regulatory requirements** means the legal obligations imposed upon the University, its officers and employees, and other Workers under:
  - (i) the [Work Health and Safety Act 2011 \(NSW\)](#); and
  - (ii) the [Work Health and Safety Regulation 2011 \(NSW\)](#).
- (l) **Serious Injury or Illness** means an injury or illness requiring a Worker to have:
  - (i) immediate treatment as an in-patient in a hospital;
  - (ii) immediate treatment for the amputation of any part of his or her body;
  - (iii) immediate treatment for a serious head injury;
  - (iv) immediate treatment for a serious eye injury;
  - (v) immediate treatment for a serious burn;
  - (vi) (immediate treatment for the separation of his or her skin from an underlying tissue (such as degloving or scalping);
  - (vii) immediate treatment for a spinal injury;
  - (viii) immediate treatment for the loss of a bodily function;
  - (ix) immediate treatment for serious lacerations; or
  - (x) Medical Treatment within 48 hours of exposure to a substance.
- (m) **Worker** includes an employee, conjoint, student on work experience, contractor, sub-contractor, and volunteer.
- (n) **Workplace Exposure Monitoring** means undertaking an assessment of the potential exposure to a Hazardous Substance or other hazard e.g. noise in the workplace, and includes sampling and analysis to determine the level of risk to Workers.

## **4. Responsibilities**

### **4.1 Executive Committee**

The Executive Committee should ensure that the University is complying with Regulatory requirements in relation to the maintenance of Records.

### **4.2 Leaders and Supervisors**

Leaders and Supervisors should:

- (a) Maintain Records that they are required within their areas of responsibility; and
- (b) Review and provide feedback on changes to Health and Safety Documentation.

### **4.3 Health and Safety Team**

The Health and Safety Team should:

- (a) Review the University Health and Safety Management System Framework and supporting documentation 3 yearly as a minimum, and more frequently where indicated, to ensure continuing compliance with Regulatory requirements and their suitability to University activities;
- (b) Identify and draft additional Health and Safety Documentation when the need arises as a result of a change in Regulatory requirements or in the University's operations;
- (c) Arrange for Workers to be consulted on revisions and new Health and Safety Documentation, via Health and Safety Committees;
- (d) Notify Leaders and Supervisors of changes to Health and Safety Documentation; and
- (e) Assist Leaders and Supervisors to identify Records that they are required to keep within their areas of responsibility to support health and safety activities.

## **5. Health and Safety Documentation management**

### **5.1 General requirements**

- (a) The Health and Safety Team will maintain the Health and Safety Documentation located on the Health and Safety Management System Framework intranet page. All documents are considered to be 'controlled'.
- (b) The Associate Director, Health and Safety will endorse and maintain all Health and Safety Documentation including all updates and changes.
- (c) Revisions to the Health and Safety Documentation will be processed in the same manner as originals and subjected to the same level of review and approval before issue:
  - (i) Policies require final approval by the Vice-Chancellor and/or Executive Committee;
  - (ii) Elements and Guidelines require approval by the Director, People & Workforce Strategy;
  - (iii) Key Risk Area documents require approval by the Associate Director, Health and Safety.
- (d) Health and Safety Documentation will be formatted in accordance with the templates which are controlled by the Associate Director, Health and Safety and administered by the Health and Safety Team.
- (e) Referenced documents will be attached or included as website hyperlinks.
- (f) Document versions will be tracked with the version number recorded in the footer as a whole number and the date of the versions e.g. v1-31.3.15.
- (g) All 'Controlled' copies of the Health and Safety Documentation will be maintained as current versions on the Health and Safety website. Once printed a document is to be considered 'UNCONTROLLED' and is not to be relied upon as source material.

### **5.2 Amendments**

- (a) Review of Health and Safety Documentation and requests for amendments will be processed by a member of the Health and Safety Team.

- (b) Amendments to “Controlled” Health and Safety Documentation will only be made by the Associate Director, Health and Safety or by a member of the Health and Safety Team following approval by the Associate Director, Health and Safety.

### **5.3 Raising Document Change Requests (DCRs)**

- (a) To request an amendment to Health and Safety Documentation, a Document Change Request (DCR) may be initiated by any UON employee, the Initiator, and provided to the Health and Safety Team.
- (b) Upon receipt of a DCR, the Health and Safety Team will:
  - (i) Review the DCR and may endorse the request;
  - (ii) If the request is endorsed, consider if requested amendments are likely to impact on training requirements;
  - (iii) Draft an updated version of the relevant Health and Safety Documentation;
  - (iv) Forward a draft copy of the revised version to the Initiator for review.
- (c) The Initiator will be requested to:
  - (i) Review the revised Health and Safety Documentation;
  - (ii) If acceptable, return the revised Health and Safety Documentation to the Health and Safety Team.
- (d) The Health and Safety Team will not release the revised Health and Safety Documentation until it is agreed with the Initiator.
- (e) The Health and Safety Team member dealing with the DCR will provide details of the DCR to the Associate Director, Health and Safety.
- (f) The Associate Director, Health and Safety may endorse the proposed changes to the Health and Safety Documentation.
- (g) If the DCR is not accepted, feedback will be provided to the Initiator.

### **5.4 Consultation**

- (a) Revised and new Health and Safety Documentation will be submitted to Health and Safety Committees for consultation.
- (b) Following the consultation process the Health and Safety Team will finalise the draft Health and Safety Documentation.

## **5.5 Obtaining approval to make amendments**

- (a) When the draft Health and Safety Documentation has been finalised, the Associate Director, Health and Safety will present the revised or new documents to the Director, People & Workforce Strategy for review and authorisation.
- (b) Health and Safety Documentation requiring final approval by the Vice-Chancellor and/or Executive Committee, will be sought following review by the Director, People & Workforce Strategy.

## **5.6 Implementation and communication**

The Associate Director, Health and Safety will:

- (a) Remove the superseded Health and Safety Documentation from the Health and Safety website and post the revised Health and Safety Documentation;
- (b) Communicate the posting of the revised Health and Safety Documentation to Leaders, Supervisors and Health and Safety Committees.

## **5.7 Audits**

- (a) Internal and external audits of the Health and Safety Management System Framework will include review of compliance with Health and Safety Documentation.
- (b) Any corrective actions arising from an audit will be implemented by the relevant area and monitored for closure by the Associate Director, Health and Safety and the Health and Team.

# **6. Records management**

## **6.1 General requirements**

Leaders and Supervisors have the responsibility to ensure appropriate Records are maintained by making reference to these Guidelines and Attachment 2 to determine:

- (a) what Records are required to be kept;
- (b) how Records should be kept;
- (c) the time period Records must be maintained; and
- (d) how Records can be accessed, subject to confidentiality obligations.

## 6.2 Maintenance of records

Processes for maintaining health and safety records should take into account:

- (a) **Responsibility:** who will be responsible for ensuring that the document is kept;
- (b) **Accessibility:** who will have access to the documents;
- (c) **Storage:** where documents will be stored and the level of access control;
- (d) **Disposal:** length of period the document will be kept before disposal. See Attachment 2 for a table of Regulatory Document Record Retention.

## 6.3 Examples of Records to be maintained

- (a) Employee qualifications, skills, knowledge, competency and certifications;
- (b) Induction and training;
- (c) Asbestos register;
- (d) Workplace exposure monitoring;
- (e) Emergency plans and procedures;
- (f) Plant and equipment inspection, test and maintenance;
- (g) Health and Safety inspections and audits;
- (h) Reviews of the Health and Safety Management system Framework;
- (i) Incident reports, investigations and analysis of the data;
- (j) Minutes of Health and Safety Committee meetings;
- (k) Health and Safety action plans;
- (l) Hazardous substances and dangerous goods inventories and chemical Safety Data Sheets (SDS);
- (m) Design reviews and approvals;
- (n) Risk management documentation e.g. Hazard Registers, risk assessments, Standard Operating Procedures (SOPs);



- (o) Contractor health and safety management and compliance with health and safety requirements e.g. pre-qualification questionnaires, induction, Safe Work Method Statement for the work, permits to work.

## **7. References**

[UON Health and Safety Management System Framework](#)

## **8. Attachments**

Attachment 1: Document Change Request Form

Attachment 2: Document Regulatory Record Retention Table

# Attachment 1: Document Change Request Form

Document Change Request (DCR) Form – UON HSMSF Documents	
Name of Document:	
Description of Change requested:	
Reason for Change:	
Name of person requesting change:	
Area:	
Contact Telephone number:	
Date:	
Consultation (detail endorsement received from relevant personnel e.g. Area Leader).	

<p><b><u>Health and Safety Team:</u></b></p> <p>Name of person making change: _____ Date: Approval: _____</p> <p>Associate Director Health and Safety    Y / N    Date: Date Draft Version _____</p> <p>sent to initiator:</p> <p>Date Draft forwarded to Health and Safety Committee/s: _____</p> <p>Date forwarded to Director, PAWS,HRS for approval: _____ Date: _____</p> <p>Date Approved Version uploaded on 'the Source': _____ Date: _____</p>	
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## Attachment 2: Document Regulatory Record Retention Table

DOCUMENT REGULATORY RECORD RETENTION TABLE					
RECORD	RESPONSIBILITY	ACCESSIBILITY	LOCATION	STORAGE	DISPOSAL
Medical records	Relevant Area Leader &/or HRS	Confidential / Employee	UON Health Service	restricted	Retain a minimum of <b>75 years</b> after action completed. (GA28-14.04.03)
Audiometric Test Results	Relevant Area Leader &/or HRS	Confidential / Employee	Relevant Area & UON Health Service	restricted	Retain a minimum of <b>75 years</b> after action completed. (GA28-14.04.03)
Noise Assessments	Relevant Area Leader &/or HRS	Employees & H&S Team	At Work Area	restricted	Retain a minimum of <b>30 years</b> after action completed. (GA28-14.13.03)
Asbestos Assessments	Infrastructure and Facilities Services (IFS)	Employees & H&S Team	At Work Area	open	Retain a minimum of <b>30 years</b> after action completed. (GA28-14.13.03)
Plant Register & Registration Certificates.	Infrastructure and Facilities Services (IFS)	Employees & H&S Team	At Work Area	open	Retain a minimum of <b>75 years</b> after action completed. (GA28-14.04.01)
Plant Risk Assessments	Relevant Area Leader	Employees & H&S Team	At Work Area	open	Retain a minimum of <b>7 years</b> after action completed. (GA28-16.23.01)
Incident Reports and Records	Relevant Area Leader & H&S Team HRS	Injured person, Area Leader, H&S Committee.	At Work Area	restricted	Retain a minimum of <b>75 years</b> after action completed. (GA28-14.01.01)
Notice of Incidents & Notices of Dangerous Occurrences	Relevant Area Leader & H&S Team HRS	Employees & H&S Team	At Work Area & H&S Team HRS	restricted	Retain a minimum of <b>75 years</b> after action completed. (GA28-14.01.01)
Manual Handling Risk Assessments.	Relevant Area Manager	Employees & H&S Team	At Work Area	open	Retain a minimum of <b>5 years</b> after action completed. (GA28-14.13.03)
Hazard reports	Relevant Area Leader & H&S Team HRS	Employees & H&S Team	At Work Area & H&S Team HRS	open	Retain a minimum of <b>75 years</b> after action completed. (GA28-14.13.01)
Workplace safety inspection reports	Relevant Area Leader & H&S Team HRS	Employees & H&S Team	At Work Area	open	Retain a minimum of <b>75 years</b> after action completed. (GA28-14.13.01)
Other Risk Assessment Reports	Relevant Area Leader	Employees & H&S Team	At Work Area	open	Retain a minimum of <b>75 years</b> after action completed. (GA28-14.13.01)

RECORD	RESPONSIBILITY	ACCESSIBILITY	LOCATION	STORAGE	DISPOSAL
Dangerous Goods Manifest	Infrastructure and Facilities Services (IFS) or relevant Area Leader	Employees & H&S Team, local Emergency Fire service	At Work Area	open	Retain a minimum of <b>75 years</b> after action completed. (GA28-14.04.04)
Dangerous Goods Risk Assessment Documentation.	Relevant Area Leader	Employees & H&S Team	At Work Area	open	Retain a minimum of <b>75 years</b> after action completed. (GA28-14.13.01)
Dangerous Goods Licence	Infrastructure and Facilities Services (IFS) or relevant Area Leader	Employees & H&S Team, local Emergency Fire service	At Work Area	open	Retain a minimum of <b>75 years</b> after action completed. (GA28-14.04.01)
Dangerous Goods Emergency Plans	Infrastructure and Facilities Services (IFS) or relevant Area Leader	Employees & H&S Team, local Emergency Fire service	At Work Area	open	Retain a minimum of <b>5 years</b> after plan is superseded. (GA28-14.07.01)
Dangerous Goods Incident Reports.	Relevant Area Leader & H&S Team HRS	Employees & H&S Team	At Work Area	restricted	Retain a minimum of <b>75 years</b> after action completed. (GA28-14.01.01)
Emergency equipment and Fire protection equipment inspection and Maintenance Reports.	Infrastructure and Facilities Services (IFS) or relevant Area Leader	Employees & H&S Team	At Work Area	open	Retain until plan or equipment is disposed of. (GA28-05.14.01)
Hazardous substances Register	Relevant Area Leader	Employees & H&S Team	At Work Area	open	Retain a minimum of <b>75 years</b> after action completed. (GA28-14.04.04)
Material Safety Data Sheets	Relevant Area Leader	Employees & H&S Team	At Work Area	open	Retain until materials are disposed of. (GA28-14.05.02)
Dangerous Goods CFA/ MFB Recommendation Reports	Relevant Area Leader	Employees & H&S Team	At Work Area	restricted	Retain a minimum of <b>7 years</b> after action completed. (GA28-14.10.01)
Notices and Written Directives from inspectors	Relevant Area Leader & H&S Team HRS	Employees & H&S Team	At Work Area	restricted	Retain a minimum of <b>7 years</b> after action completed. (GA28-14.10.01)
Workers Compensation Records	H&S Team HRS	Confidential / Employee	H&S Team HRS	restricted	Retain a minimum of <b>75 years</b> after date of birth or minimum of 7 years after action completed, whichever is longer. (GA28-03.02.01)
Rehabilitation case notes	H&S Team HRS	Confidential / Employee	H&S Team HRS	restricted	Retain a minimum of <b>75 years</b> after action completed. (GA28-03.02.01)
Workplace Environmental reports	Relevant Area Leader	Employees & H&S Team	At Work Area	open	Retain a minimum of <b>30 years</b> after action completed. (GA28-14.13.04)
H&S Committee minutes	Relevant Area Leader & H&S Team HRS	Employees & H&S Team	At Work Area	open	Retain a minimum of <b>10 years</b> after action completed, (GA28-01.00.06)

RECORD	RESPONSIBILITY	ACCESSIBILITY	LOCATION	STORAGE	DISPOSAL
Training Register	Relevant Area Leader	Employees & H&S Team	At Work Area	restricted	Retain a minimum of <b>75 years</b> after action completed. (GA28-18.11.09)
Training Matrix (Inc. employee licences & certificates )	Relevant Area Leader	Employees & H&S Team	At Work Area	restricted	Retain a minimum of <b>75 years</b> after action completed. (GA28-18.11.09)