



# **Health and Safety Guideline**

## **HSG 7.1 Health and Safety Records and Document Control**

### **1. Purpose**

This document outlines the health and safety requirements for document control and retention of health and safety records under the University's Health and Safety Management System Framework.

### **2. Scope**

This Guideline applies to all health, safety and wellbeing activities of staff, students, visitors (including volunteers and contractors), Council members, and other persons interacting with the University of Newcastle (workers); the operations of staff of University aligned Research Centres and controlled entities; and all activities conducted by or on behalf of the University of Newcastle on and outside of the University's campuses.

### **3. Guidelines**

#### **3.1. Health and Safety Management System (HSMS) Framework**

The Health and Safety Management System (HSMS) Framework outlines responsibilities for health and safety to specific roles related to an Element, Guideline or Key Risk Area. The Health, Safety and Wellbeing team is responsible for developing, regular review, supporting implementation and communication of the University's HSMS Framework and associated controlled documents.

Vice-Chancellor operational sub-delegations under the University [Policy Framework](#) Schedule C facilitates approval of a policy relating to workplace health and safety by the roles specified below:

- Vice-Chancellor: Subject to the recommendation of Executive Committee.
- Chief People and Culture Officer: Minor/administrative amendments and supporting documentation (ie Guidelines).
- University Secretary: Minor/administrative amendments.

### **3.1.1. Document identification**

Every HSMS controlled document must be identified by a document title, which includes the type of document (Element, Guideline etc.) and have a document footer with the following items:

- document name;
- document reference;
- version number;
- date of issue;
- uncontrolled document when printed statement; and
- page number

Referenced documents will be in the Appendices or included as website hyperlinks.

### **3.1.2. Document review and approval**

Revision and approval of documents within the HSMS Framework will be processed consistent with the processes and delegations required by the University Policy Framework and Delegations of Authority.

HSMS documentation and any associated tools, e.g. guidelines, checklists, forms or posters must be reviewed and managed in accordance with the University's [Records and Information Management Policy](#). HSMS Guidelines may need to be reviewed prior to their allocated review date due to changes to legislation, review of procedures following incidents and to ensure continuous improvement.

Consultation must occur during the development of new HSMS documentation and major changes to existing documents communicated in accordance with the Guideline [HSG 2.1: Consultation and Communication](#).

Superseded HSMS documentation will be removed from University website locations and archived, and the revised documentation posted.

### **3.1.3. Version control of documents**

Every HSMS document must be identified as version 1 when it is a new document or if the document type changes, e.g. from a Guideline to a KRA. A document must be given the next consecutive number following a major change, e.g. version 1, version 2, etc. For minor changes such as formatting or changing a hyperlink, a decimal point is added following the version number, e.g. version 1.0 to version 1.1, etc.

Document versions will be tracked with the version number recorded in the footer as a whole number and the date of issue of the version. All 'controlled' copies of the Health and Safety documentation will be maintained as current versions on University website locations. Once printed a document is to be considered 'uncontrolled' and is not to be relied upon as source material.

#### **3.1.4. Document history**

When a HSMS document undergoes a minor or major change, the changes that were made must be recorded in the Amendment History on the final page of the document as follows:

Version	Date of Issue	Approval	Section(s) Modified	Details of Amendment
(Version Number)	(Date of Version Issue)	(Role not name)	(Specific section or All)	(Details of amendment including section reference)

#### **3.1.5. Document register**

A HSMS document register must be maintained by the Health, Safety and Wellbeing Team to monitor the status of all HSMS documents and ensure that reviews are conducted and recorded as required. The HSMS document register must include:

- document title, reference and type;
- document current version number;
- date of issue for current version;
- date of next review;
- details of last amendment;
- role responsible for approval; and
- date system and websites were updated.

#### **3.1.6. Access to documents**

Electronic versions of all HSMS documents must be accessible on the University [website](#). Hard copies of documents must be made available for persons not having ready access to the web site and at other times (e.g. at training courses).

### **3.2. Request for HSMS document amendment**

To request an amendment to HSMS documentation, the [Health and Safety Management System - Consultation and Amendment Request Form](#) must be completed and

provided to the Health, Safety and Wellbeing Team.

Upon receipt of a Health and Safety Management System Framework - Consultation and Amendment Request Form, the Health, Safety and Wellbeing Team will:

- review the requested change;
- consider if requested amendments are likely to impact on training requirements or other HSMS framework documentation;
- if required, draft an updated version of the relevant HSMS documentation;
- provide details of the requested change to and draft amended documentation to the Associate Director, Health, Safety and Wellbeing for review.

### **3.3. Communication of HSMS document change**

All revised and new HSMS documentation will be submitted to Health and Safety Committees for consultation for a minimum of two weeks in accordance with Guideline [HSG 2.1: Consultation and Communication](#). Following the consultation process the Health, Safety and Wellbeing Team will finalise the draft HSMS documentation.

The Associate Director Health, Safety and Wellbeing will communicate the posting of the revised HSMS documentation to leaders and Health and Safety Committees.

### **3.4. Locally managed health and safety documents**

When a HSMS document is used directly by a business unit e.g. use of a form or checklist, the document footer must not be changed. However, when a HSMS document is adapted for local implementation, e.g. modification of a checklist for local contextualisation, the footer must be updated with local information as set out in section 3.1.1.

Locally managed Health and Safety documents can be developed at the College, Division, business area, or work group level and include but are not limited to procedures, guidelines, Standard Operating Procedures (SOP), posters and checklists. All documents must follow the documentation requirements and equivalent approvals as in section 3.1.

### **3.5. Health and safety records management**

Health and safety records must be managed in accordance with the University's [Records and Information Management Policy](#) and detail provided in Appendix 1 to determine:

- what health and safety records are required to be kept;
- how and where health and safety records must be kept;
- the time period health and safety records must be maintained;

- how health and safety records can be accessed, subject to confidentiality obligations; and
- authorised destruction and disposal of health and safety records.

### 3.6. Consultation

Revised and new Health and Safety Documentation will be submitted to Health and Safety Committees for consultation. Following the consultation process the Health, Safety and Wellbeing Team will consider feedback provided and finalise the relevant HSMS documentation as appropriate.

## 4. Definitions

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

Controlled document	Documentation within the Health and Safety Management System (HSMS) that is subject to a process that ensures content integrity. A controlled document is uniquely identified, and its location is known and documented.
Executive Committee	Consisting of the Vice-Chancellor, the Deputy Vice-Chancellors, the Pro Vice-Chancellors, the Chief Operating Officer, Chief People and Culture Officer and the Chief Financial Officer, the University Secretary and the President of Academic Senate.
Leader / Supervisor	Any member of the University who is responsible for supervising staff and/or undergraduate or postgraduate students and/or for leading research projects.
Worker	Includes an employee, conjoint, student on work experience, contractor, sub-contractor, and volunteer. A person is a worker if the person carries out work in any capacity for the University or another person conducting a business or undertaking, including work as: <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>
Uncontrolled document	Documentation within the Health and Safety Management System (HSMS) that is not subject to a process that ensures content integrity and its location might not be known or documented.

## 5. Responsibilities

A comprehensive list of health, safety and wellbeing responsibilities is provided in Guideline [HSG 1.2: Roles and Responsibilities](#).

Specific responsibilities under this Guideline include:

**Associate Director Health, Safety and Wellbeing**

- Responsible and accountable for the HSMS documents and associated record management requirements.
- Oversight and management of development, maintenance, review and evaluation of all HSMS framework documents.

**Health, Safety and Wellbeing Team**

- Formulation and implementation of improvement strategies for HSMS documents.
- Review of locally managed health and safety documents to encourage consistent processes and continuous best practice.
- Responsible for recordkeeping requirements of the HSMS framework.

**Leaders and Supervisors**

- Responsible for the local implementation of local document control and record keeping requirements in areas under their control.

## 6. References & Related Documents

The following documentation is referenced in, or applicable to this Guideline:

[HSG 1.2: Roles and Responsibilities](#)

[HSG 2.1: Consultation and Communication](#)

[Health and Safety Management System - Consultation and Amendment Request Form \(FRM-EL02.01\)](#)

[University of Newcastle Policy Framework](#)

[University of Newcastle Records and Information Management Policy](#)

[Privacy and Personal Information Protection Act](#)

[Health Records and Information Privacy Act](#)

## 7. Amendment History

Version	Date of Issue	Approval	Section(s) Modified	Details of Amendment
1, 2, 3	July 2019	Manager Health and Safety	-	Original versions with latest amendment for HSG 9.1 Records, Documents and Document Control

4	July 2023	CPCO	All	1. Renumbered and renamed from HSG 9.1 to HSG 7.1 Health and Safety Records and Document Control 2. Updated content in all sections 3. Added new/renamed Related Documents 4. Added Amendment History 5. Amended document control header and footer
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## 8. Appendices

Appendix 1 Health and Safety Management System Record Retention Table

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Health and Safety Management System (HSMS) 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>7 years</b> after action completed, then destroy. (GA28-14.06.02). <b>Due to the minimum retention period for this schedule these records can be retained for longer if required without seeking State Record's permission.</b>
Asbestos Assessments	Infrastructure and Facilities Services (IFS)	Employees & H&S Team	At Work Area	Open	Retain a minimum of <b>75 years</b> after action completed, then destroy OR if property is sold before this date, transfer to new owner as required. (GA28-16.11.01)
Plant Register & Registration Certificates.	Infrastructure and Facilities Services (IFS)	Employees & H&S Team	At Work Area	Open	Retain a minimum of <b>7 years</b> after licence, permit or certificate of registration expires or is terminated. (GA28-05.07.02)
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) <b>For records relating to incidents that result in serious personal injury or incapacity to employees.</b>



					Retain a minimum of <b>25 years</b> after action completed. (GA28-14.01.03). <b>For records relating to incidents involving employees that do not result in death, serious personal injury or incapacity to employees.</b>
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	<p>Retain a minimum of <b>75 years</b> after action completed. (GA28-14.01.01) <b>For records relating to incidents that result in serious personal injury or incapacity to employees.</b></p> <p>Retain a minimum of <b>25 years</b> after date of death or minimum of 7 years after action completed, whichever is longer. (GA28-14.01.02). <b>For records relating to incidents that results in the death of employees.</b></p>
Manual Handling Risk Assessments.	Relevant Area Manager	Employees & H&S Team	At Work Area	Open	Retain a minimum of <b>40 years</b> after action completed or until expiry of statutory limitation periods, whichever is longer. (GA28-14.13.02)
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>40 years</b> after action completed or until expiry of statutory limitation periods, whichever is longer. (GA28-14.13.02)
Workplace safety inspection reports	Relevant Area Leader & H&S Team HRS	Employees & H&S Team	At Work Area	Open	<p>Retain a minimum of <b>7 years</b> after action completed. (GA28-14.06.02). <b>For records relating to routinely conducted workplace inspections.</b></p> <p>Retain a minimum of <b>75 years</b> after action completed. (GA28-14.06.01). <b>For records relating to routinely conducted inspections of hazardous substances in the workplace.</b></p>
Other Risk Assessment Reports	Relevant Area Leader	Employees & H&S Team	At Work Area	Open	<p>Retain a minimum of <b>75 years</b> after action completed. (GA28-14.13.01) <b>For records where the severity of risk is high.</b></p> <p>Retain a minimum of <b>40 years</b> after action completed or until expiry of statutory limitation periods, whichever is longer. (GA28-14.13.02) <b>For records where the severity of risk is low.</b></p>

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) <b>For records where the severity of risk is high.</b>  Retain a minimum of <b>40 years</b> after action completed or until expiry of statutory limitation periods, whichever is longer. (GA28-14.13.02) <b>For records where the severity of risk is low.</b>
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) <b>For records relating to incidents that result in serious personal injury or incapacity to employees.</b>  Retain a minimum of <b>25 years</b> after action completed. (GA28-14.01.03). <b>For records relating to incidents involving employees that do not result in death, serious personal injury or incapacity to employees.</b>
Emergency equipment and Fire protection equipment inspection and Maintenance Reports.	Infrastructure and Facilities Services (IFS) or relevant	Employees & H&S Team	At Work Area	Open	Retain until plant or equipment is disposed of. (GA28- 05.14.01)

	Area Leader				
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 number	Restricted	<p>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) <b>For records relating to an employee's claim for workers' compensation where an incident has resulted in serious personal injury or incapacity.</b></p> <p>Retain a minimum of <b>25 years</b> after date of death or minimum of 7 years after action completed, whichever is longer. (GA28-03.02.02). <b>For records relating to a claim for compensation in relation to an incident resulting in the death of an employee.</b></p> <p>Retain a minimum of <b>25 years</b> after action completed. (GA28-03.02.03). <b>For records relating to an employee's claim for workers' compensation where an incident has not resulted in death, serious personal injury or incapacity.</b></p>

Rehabilitation Case Notes	H&S Team HRS	Confidential / Employee	H&S Team HRS	Restricted	<p>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) <b>For records relating to an employee's claim for workers' compensation where an incident has resulted in serious personal injury or incapacity.</b></p> <p>Retain a minimum of <b>25 years</b> after date of death or minimum of 7 years after action completed, whichever is longer. (GA28-03.02.02). <b>For records relating to a claim for compensation in relation to an incident resulting in the death of an employee.</b></p> <p>Retain a minimum of <b>25 years</b> after action completed. (GA28-03.02.03). <b>For records relating to an employee's claim for workers' compensation where an incident has not resulted in death, serious personal injury or incapacity.</b></p>
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)
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)