

Health and Safety Risk Assurance Procedure

Purpose

The purpose of this procedure is to:

- Measure the Health and Safety performance of United and ensure that the staff, students, and all persons onsite are not exposed to any risk which could potentially cause harm. The procedure is directly associated with the Health and Safety Policy and complies with the Health and Safety at Work Act 2015 (HSAW) regarding the primary duties of care as a Person Conducting or Undertaking Business (PCBU).
- Ensure that the Health and Safety strategy and objectives are being met.
- Identify the review tasks at all levels of Unitec and set the frequencies required for these reviews to be completed.
- Ensure the leaders are all informed of the risk to the business by using Risk Registers and where the responsibilities for managing these risks are assigned.
- Improvements from this information are tracked and based on the risk tolerance of Unitec setting the time frames for the improvements to be closed out.
- All processes align with ISO 45001:2018 Plan, Do, Check, Act Cycle.

Scope

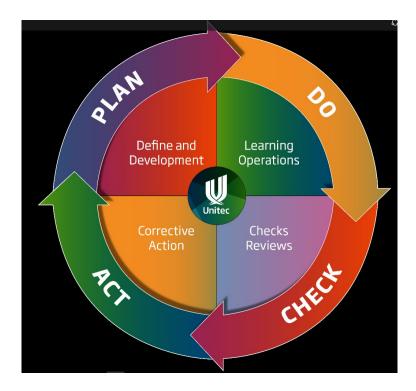
This procedure applies to all staff and contractors at Unitec. This document is to fulfill the following points:

- Safe systems of work are implemented and monitored providing information for review to inform senior management of strategic decisions;
- Continual improvement while measuring the performance of Health and Safety;
- Fulfillment of the legal requirements and best practice requirements; and,
- Achievement of the objectives as stated in the Health and Safety and associated strategies.

Plan, Do, Check, Act Cycle

The Plan, Do, Check, Act Cycle is adopted in this space and takes from the United Risk Management framework. In this procedure, the "Check and Act" is the main focus of the document to give assurance that the "Plan and Do" parts are applied.

The regular checking of risks is followed by forming up corrective actions when a short fall is identified. This ensures that the monitoring of risk is managed and continual improvement is fulfilled. These are core principles and responsibilities of the organization.



Levels of Leadership and Activities

All workers have responsibilities under the Health and Safety at Work Act 2015. These include the need to ensure that reviews and monitoring are ongoing so that accurate assessment of risk is constant. The below diagram outlines the levels of Unitec and the required activities that must be undertaken as well as how the information is then shared with the organization.

To ensure that the leadership has an accurate picture of the risk profile for Unitec, the Assurance Procedure is designed to generate the information focusing on following areas:

- Review of Health and Safety Management Systems
- Review of Risk Register controls and risk assessments
- Monitoring of Health and Safety performance Health and Safety Reports/Updates
- Verification of Critical Risk Controls
- Inspections of teaching spaces to ensure risks are managed

Utilizing the Health and Safety Platform (Vault) to capture all incidents, injuries, and corrective measures will allow for data to analyze trends and then provide initiatives to target areas of high risk.

Objectives will be designed to ensure compliance under the Health and Safety at Work Act 2015, but also to promote strong behaviors in staff around good Health and Safety culture.

Health and Safety Objectives

This is reflected in an even balance between lead and lag indicators in the objectives.

Lead	Lag	Target
	TRIFR	<5
	Injury Statistics	0 LTIs
	Corrective Measures	No overdue actions / close out within 60 Days (High Risk) 90 Days (BAU Risks)
Critical Risk Inspections		1 per month – completed
Near Miss (Department Specific)		5 per month
Inspections (Department Specific)		2 per month – completed
Health and Safety Walks		1 per month
HS Training Completed		3 hour per staff per year
	External Audit – HS management system	1 per year

Roles and Responsibilities

Leadership Level	Activity Check	Frequency	Reviews	Frequency
Commissioner	Health and Safety Walk	1 per month	HS Performance Objectives approval Policy Review	Each Meeting Annually As per policy review
Chief Executive / Executive Directors	Health and Safety Walk – all of organisation	1 per month	Management Practice Review HS Performance – Corrective Measures HS Objectives Setting External Audit Review HS Risk Register	1 per year Monthly Report Review Annual Review Annual Review Annual Review
Directors / Heads of School	Health and Safety Walk – all of business	1 per month	Department / School Management Review HS Performance Corrective Measures Score Investigations – review External Audit – specific department Risk Register	1 per year Monthly Report Review – department 1 per year Annual Review
Managers / Academic Program Managers	Critical Risk Inspections Health and Safety Walk Department Specific	1 per month 1 per month	Inspections Review – corrective measures status for department Near misses reported Injury Review (staff) Investigations	Monthly Monthly 5 reported per department Review after event Review after event
Supervisors / Co- Ordinators / Champions	Reporting Near Misses Inspections of Works Spaces – SOPs / PPE / Critical Risk	5 per month 2 per month	Feedback into HS performance Risk Assessment Input Consultation HS Committee	Monthly
Support Staff / Academic Staff	Inspections of work areas Near Misses	2 per month 5 per month	Procedure Input Risk Registers input	Annual Review Annual Review

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Activity Checks

Activity Checks are physical assessments with a prompt sheet over a specific risk and specific controls. The activity is then recorded in the Health and Safety Platform to ensure that it has been tracked and that any corrective measures to improve the risk controls are monitored and implemented in a timely manner.

Activities are completed by the staff that are exposed to the risk and need to be forwarded to line managers to ensure that there is visibility of checks being completed. The line manager's role is to ensure that the corrective measures are completed within an agreed timeframe.

Health and Safety Walks are completed by senior management as a verification process and further avenue for staff to access leadership and raise issues. These are completed monthly and are directed by the Health and Safety Team on areas of good practice or opportunities for improvement. Any corrective measures, (positive or negative), are added into Vault and reported into the Monthly Health and Safety Report.

Critical Risk Verifications are completed by staff that are exposed and control the risk but are not limited to. This also includes leaders of areas where critical risks are identified and critical controls must be monitored. The Critical Risk Verifications are to be completed once per month in spaces set out by the Health and Safety Team. This information is added to Vault and tracked for senior leadership as part of the Monthly Health and Safety Report.

Near Miss Reporting is set for each School/Support Team and all staff. This is to promote the reporting of events and to ensure that staff are looking for potential risks and rectifying them. This gives assurance that all staff are actively participating in seeking out risks and resolving. The required targets will be tracked by department in Vault and reflected in the Health and Safety Report.

Workspace Inspections are reviews of shared spaces over a month that are to be completed by the Infrastructure Operations Team. Occupied space by departments will ensure a monthly inspection which can be shared through all staff. This is to promote active participation and engagement by all staff in knowing what risks are present and how to rectify them. This will be tracked in Vault and reflected in the Health and Safety Monthly report.

Reviews

Reviews are completed by leaders of areas – these reviews are based on information provided by Health and Safety and from the Activity Checks completed by staff.

Health and Safety Performance will be monitored by the Monthly Report which will provide the data for leaders to review areas of control and performance. Leaders will be required to share this information with their staff and ensure a forum exists. The Health and Safety Team will be responsible for the providing the information at a timely manner and completing the analysis for the organization.

Objective Setting will be a review that sits at the senior and governance level of the organization. The organization understands the business context that it operates in and the risks to staff. The objectives are reflective of lead and lag indicators to ensure that compliance is achieved but with positive behaviors as the main outcome. Review of the previous data and trends will be provided by the Health and Safety Team to ensure the informed objective setting.

Health and Safety Risk Register Reviews will be held by all Schools and Support Teams in order to identify their risks. These Risk Registers are required to be reviewed annually as part of a Health and Safety review for the School/Support Team. This is facilitated by the Health and Safety Team and carried out by the leadership team of the School/Support Team. Leaders of the areas must ensure that the controls for the risk are effective and current. A report will be generated and captured in the Health and Safety records as assurance of continued improvement and review. This must then be forwarded to staff for input and awareness of controls facilitated by the leader of the department.

Policy Reviews will be completed by the Health and Safety Team to ensure policy is reflective of the current law and environment. This is set by the governance calendar managed by the Office of the Chief Executive and sent to the relevant policy owners for update and input. Policies are approved as per the Policy Procedures Guidelines.

Corrective Measures Scores are generated as the Activity Checks are completed. These are captured by the Health and Safety Platform Vault which tracks the close out time. As part of the monthly Health and Safety Report, a section will capture the entire actions for the organization and what status of the measure is. This information will allow for the leadership teams to have assurance that the review and continual improvement process is active. Overdue actions will be flagged to senior leadership which will then require comment. The timing of the actions will be monitored by the Health and Safety Team.

Annual External Audits are to be carried out by an external independent auditor that will use the ISO 45001:2018 Standard as the benchmark. The audit will generate a gap analysis and an action plan. This is provided to senior leadership to prioritize and approve. This satisfies the final part of the assurance process, which is the continual improvement through review. This is facilitated by the Health and Safety Team.

Reference Documents

- United Health and Safety Policy
- United Risk Management Policy and Framework
- Health and Safety at Work Act 2015
- Health and Safety Risk Assurance Inspection forms

Approval Details

Version number	001	Issue Date	July 2020
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Procedure Sponsor (Has authority to approve minor amendments)	Executive Director of People and Infrastructure	Procedure Owner:	Director Infrastructure Operations
Contact Person	Director Infrastructure Operations	Date of Next Review	2022