1. **INTRODUCTION**

The [Safety and Wellbeing Strategic Plan 2013-2015](http://w3.unisa.edu.au/safetyandwellbeing/SMS/SW_strategic_plan_013-2015.pdf)has set the direction for continuous improvement for the way health and safety is managed to support the University’s key corporate objectives and strategic goals.

This document cascades from the strategic plan and is to be used by schools, units, research institutes, centres, support services and administrative areas to guideand facilitate health and safety priorities and ongoing activities.

Health and safety risks associated with the University’s activities include but are not limited to those associated with laboratories, workshops, teaching spaces, building alteration and new infrastructure, overseas travel, working in isolation, field activities, workload and muscular/body stressing issues.

1. **STRATEGIC GOALS 2015**

The following two(2) strategic priority areas continue asfocusareas for local areas in 2015 to support achieving the strategic objectives and targets.

1. **Safe Design of Jobs** – incorporating health and safety principles into work processes, organisation and layout (focusing on the ergonomic aspect of computer-based work)
2. **Safety System Improvement** – improving the quality and effectiveness of hazard management.
3. **MANAGEMENT RESPONSIBILITIES**

To support the University in meeting its strategic objectives and primary duty of care, the HOS/Director of Institute/Unit/Centre/Division Services shall lead health and safety planned activities in their area of responsibility by:

* consulting and communicating the plan with staff and others
* endorsing their local action plan as a measure of commitment
* ensuring good awareness of hazardsin their area of responsibility
* incorporating health and safety activities into core business where possible
* ensuring health and safety risks are adequately controlled
* allocating resources as required
* ensuring the prompt reporting of hazards and incidents
* monitoring progress of priority actions and key ongoing actions
* initiating an annual review of the plan, taking into consideration the feedback provided from the 2014 action plan review.

1. **HOW TO IMPLEMENT THE PLAN**

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| **STEP 1** | **Assign responsibility for administering this plan.**  Consultwith staff, working groups, student representatives etc. to discuss the implementation of the plan requirements including:   * identifying how your area will undertake the **priority actions** and the **key ongoing actions** outlined in the plan * incorporating improvement opportunities from the 2014 action plan review * itemising and prioritising other local activities identified for attention in 2015   ***NOTE: It is recommended that you seek assistance from your Divisional/Central WHS Consultant when updating your plan.*** |
| **STEP 2** | Use this template to plan, implement activities and monitor progress in accordance with the goals of the planning process. |
| **STEP 3** | Endorse the plan for implementation:  **The HOS/Director must sign off on the activities planned for 2015 and provide evidence of monitoring its progress.**  ***NOTE: Evidence of endorsement must be provided by either using this template OR***  ***as a minuted item from School Board/Executive meetings.*** |
| **STEP 4** | Monitor planned action and report on progress at the local working group/consultative forum. The calendar is provided as a guide to assist local areas with scheduling and monitoring of planned activities, for example: workplace inspections, meetings, training. Progress can be recorded using traffic light tools i.e. **Not Started X In Progress OComplete ✓**. |
| **STEP 5** | Ensure local records of completed activities are maintainedelectronically on SharePoint, shared drives **by the specified dates outlined in this template**. Records may include but are not limited to: the LAP where used as a working document, minutes of consultative forums; communications;localhazard register; risk assessments and checklists; SOPs; any sub-plans addressing inherent hazard types;investigation outcomes; workplace inspections; workstation self-assessments;research approvals/authorisations;induction checklists; trainingrecords; local wellbeing initiatives. |
| **STEP 6** | Authorise the Safety & Wellbeing team with ongoing access to your local records of completed activities for the purpose of periodically evaluating implementation throughout the year. Access may also be requested as part of an internal/external evaluation at your workplace. |

1. **HOW THE PLAN IS EVALUATED**

As part of the University Health and Safety Internal Evaluation Program, an evaluation of local health and safety planned activities is conducted annually. Each workplace will be measured against the following five (5) criteria:

1. The action plan template has been used to schedule priority and ongoing actions.
2. Opportunities for improvement recommended fromthe 2014LAPevaluation have been incorporated (unless evidence is provided to justify non-inclusion).
3. The HOS/Director has endorsed and signed off the plan following consultation with staff and others directly involved or affected.
4. Evidence is available to support action taken to address the two strategic priority areasand key ongoing action items.
5. Progress against the planned activities have been periodically monitored and reported.

**100% compliance with the above criterion is set by SMG as a Corporate Key Result Area.**

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| |  |  |  |  |  | | --- | --- | --- | --- | --- | | **NAME OF WORKPLACE:** | **HOS/DIRECTOR NAME:** | **DATE ENDORSED FOR IMPLEMENTATION:**  **/ /** | **HOS/DIRECTOR SIGNATURE:**  I fully endorse this plan. It represents the method that my area of responsibility will use in 2015 to implement safety & wellbeing priorities and initiatives for the benefit of local staff, students and others. | **DATE OF NEXT REVIEW:**  **/ /** | |

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| **LEGEND - Not started X In ProgressO Complete ✓** | | | | | | | | | | | | | |
| **2015Strategic Priority Action Items for Focus** | | | **Responsible Person(s)** | | **Comments on Action Proposed** | | | | | | **Jan** | | | | | **Feb** | | | | **Mar** | | | **Apr** | | | | **May** | | **Jun** | **Jul** | **Aug** | | **Sep** | | **Oct** | | **Nov** | | **Dec** | |
| 1. **Safe Design of Jobs – Health and safety principles are incorporated (Strategic Objective 1.2)** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **1.1** | The ‘Workstation Self-Assessment Checklist’ - WHS 45 is used by new/relocated staff as part of local induction and existing staff to identify hazards associated with computer-based work.  **NOTE:**[WHS23 Induction Checklist](http://w3.unisa.edu.au/safetyandwellbeing/SMS/forms/WHS23.docx)incorporates workstation self-assessment. | |  | |  | | | | | |  | | | | |  | | | |  | | |  | | | |  | |  |  |  | |  | |  | |  | |  | |
| **1.2** | Action is taken to address identified workstation hazards to prevent injury/illness or minimise the severity (reflected in completed WHS45). | |  | |  | | | | | |  | | | | |  | | | |  | | |  | | | |  | |  |  |  | |  | |  | |  | |  | |
| 1. **Safety System Improvement -Improve the quality and effectiveness of risk management so that the best control measures are selected and implemented (Strategic Objective 2.2).** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **2.1** | One scheduled workplace inspection in 2015 is conducted with the HOS/Director and Divisional/Central WHS Consultant by **30 Nov 2015**. | |  | |  | | | | | |  | | | | |  | | | |  | | |  | | | |  | |  |  |  | |  | |  | | **X** | |  | |
| **2.2** | Two medium-high risk hazards listed on the local Hazard Register are reviewed,involving the Divisional/Central WHS Consultant by **30 September 2015**.  **NOTE:**If all workplace hazards on the register are low risk, at least two hazards must be reviewed. | |  | |  | | | | | |  | | | | |  | | | |  | | |  | | | |  | |  |  |  | | **X** | |  | |  | |  | |
| **2.3** | The local[Hazard Register Form WHS1](http://w3.unisa.edu.au/safetyandwellbeing/SMS/forms/WHS01.docx)is a standing agenda item atlocal working group/School Board/Management forumby **31May 2015**to ensure progress of implementing risk controls is monitored throughout the year. | |  | |  | | | | | |  | | | | |  | | | |  | | |  | | | | **X** | |  |  |  | |  | |  | |  | |  | |
| **2.4** | Corrective actions from workplace inspections, incident investigations, risk assessments and workstation assessments are implemented in a timely manner, recorded when complete and evidence made accessible on the local SharePoint/shared drive by **30 Nov 2015.** | |  | |  | | | | | |  | | | | |  | | | |  | | |  | | | |  | |  |  |  | |  | |  | | **X** | |  | |
| **2.5** | Insert Improvement Opportunities recommended from the 2014 LAP review into this year’s plan by **31 May 2015**. | |  | |  | | | | | |  | | | | |  | | | |  | | |  | | | | **X** | |  |  |  | |  | |  | |  | |  | |
| **LEGEND - Not started X In ProgressO Complete ✓** | | | | | | | | | | | | | | | | |
| **Local Priorities &Key Ongoing Action Items** | | **Responsible Person(s)** | | **Comments on Action Proposed** | | | | | | **Jan** | | | | | **Feb** | | | | **Mar** | | | **Apr** | | | | **May** | | **Jun** | | **Jul** | | **Aug** | | **Sep** | | **Oct** | | **Nov** | | **Dec** | |
| **3. Staff Wellbeing** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **3.1** | Promote the University wellbeing services and facilities outlined on the [Wellbeing webpage](http://w3.unisa.edu.au/safetyandwellbeing/IM_Wellbeing/wellbeing.asp)and support local initiatives. |  | |  | | | | |  | | | | |  | | | |  | | |  | | | | |  | |  | |  | |  | |  | |  | |  | |  | |
|  | ***INSERT*** *yourlocal wellbeing initiatives planned in 2015.* |  | |  | | | | |  | | | | |  | | | |  | | |  | | | | |  | |  | |  | |  | |  | |  | |  | |  | |
| **4.Managing Health and Safety Risks** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **4.1** | The workplace [Hazard Register](http://w3.unisa.edu.au/safetyandwellbeing/SMS/forms/WHS01.docx) is current and includes:   * inherent hazards associated with the work undertaken and the work environment * existing risk controls being implemented * improvements to risk control measures, identified from hazard/incident reports or concerns raised * responsible person/s for implementing action * a scheduled date for annual review. |  | |  | | | |  | | | | | |  | | | |  | | |  | | | | |  | |  | |  | |  | |  | |  | |  | |  | |
| **4.2** | A schedule of periodic workplaceinspections is in place that reflects the University requirements for:   * [low risk environments](http://w3.unisa.edu.au/safetyandwellbeing/SMS/forms/WHS16.docx) (conducted six monthly) * [high risk environments](http://w3.unisa.edu.au/safetyandwellbeing/SMS/forms/WHS17.doc) (conducted quarterly)   to monitor existing control measures and/or identify any new hazards present requiring control. |  | |  | | | |  | | | | | |  | | | |  | | |  | | | | |  | |  | |  | |  | |  | |  | |  | |  | |
| **4.3** | [Online hazard/incident reporting](https://my.unisa.edu.au/Staff/OHS/) system   * Hazards, near misses and injuries are reported in the system within 12 hours of occurrence where possible * Investigations are conducted and appropriate corrective action is takento prevent a recurrence * Local working group/School Board/Management forum utilises the Hazard/Incident Summary Report to identify:   + the status of corrective action   + trends that require additional control measures.   **NOTE**: Ensure confidentiality of information is maintained. Summary reports for each workplace are available from the Divisional/Central WHS Consultant. |  | |  | | | |  | | | | | |  | | | |  | | |  | | | | |  | |  | |  | |  | |  | |  | |  | |  | |
|  | ***INSERT****improvements andnew risk control activities/projectsplanned for 2015.* |  | |  | | | | |  | | | | |  | | | |  | | |  | | | | |  | |  | |  | |  | |  | |  | |  | |  | |
| **LEGEND - Not started X In ProgressO Complete ✓** | | | | | | | | | | | | | | | | | |
| **Local Priorities &Key Ongoing Action Items** | | **Responsible Person(s)** | | **Comments on Action Proposed** | | | **Jan** | | | | | | **Feb** | | | | **Mar** | | | | **Apr** | | | | | **May** | | **Jun** | | **Jul** | | **Aug** | | **Sep** | | **Oct** | | **Nov** | | **Dec** | |
| 1. **Induction & Training** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **5.1** | **Induction:**   * Induct new/transferred staff (including agency staff, volunteers, work experience students, research students, trainees) to the workplace using the following relevant forms as a guide:   + [Induction Checklist Form WHS23](http://w3.unisa.edu.au/safetyandwellbeing/SMS/forms/WHS23.docx)or   + [Contractor Induction Form WHS 28](http://w3.unisa.edu.au/safetyandwellbeing/SMS/forms/WHS28.docx) * Ensure records of completed WHS induction are maintained for all new/transferred staff. (Where records are kept by local HR ensure they are available and accessible for audit purposes).   **NOTE:** Where health and safety has been integrated into workplace induction programs, ensure the content of the most current checklist has been reflected. |  | |  | |  | | | | | |  | | | | |  | | | |  | | | | |  | |  | |  | |  | |  | |  | |  | |  | |
| **5.2** | **Training Needs:**   * Plan and schedule training for staff and HDR students using the [Training Needs Analysis (TNA) WHS13](http://w3.unisa.edu.au/safetyandwellbeing/SMS/forms/WHS13.docx). * Monitor progress of training completion utilising the Business Intelligence Training Report (either run locally or requested from Safety & Wellbeing team) * Maintainlocal records of certificates of competency, licences and registrations. |  | |  | |  | | | | | |  | | | | |  | | | |  | | | | |  | |  | |  | |  | |  | |  | |  | |  | |
|  | ***INSERT****improvements and other priority training action for attention in 2015.* |  | |  | |  | | | | | |  | | | | |  | | | |  | | | | |  | |  | |  | |  | |  | |  | |  | |  | |
| 1. **Consultation & Communication** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **6.1** | Minutes or notes of staff meetings include WHS as a standing agenda item to provide staff, HDR students, HSRs, contractors, volunteers and others with an opportunity to contribute to decisions made that may impact their own and/or others health and safety in the workplace.  Matters that require consultation include:   * identifying hazards and assessing risk * decisions about ways to eliminate or minimise the risk (reviewing hazard register) |  | |  | | |  | | | | | |  | | | |  | | | |  | | | | |  | |  | |  | |  | |  | |  | |  | |  | |
| **LEGEND - Not started X In ProgressO Complete ✓** | | | | | | | | | | | | | | | | | |
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| **6.1** | Contd.   * decisions about the work environment and facilities * proposed changes to work processes, planning a new project, purchasing new or used equipment or new substances * resolving health or safety issues raised * monitoring the health of workers where known hazards are present. |  | |  | | |  | | | | | |  | | | |  | | | |  | | | | |  | |  | |  | |  | |  | |  | |  | |  | |
| **6.2** | Local communication processes are in place to inform staff and others of health and safety matters. Some methods for providing health and safety information include:   * face-to-face * telephone or email * newsletters, SharePoint team sites, shared drives, intranet sites or noticeboards * staffmeetings.   **NOTE:** Maintain records of correspondence. |  | |  | | |  | | | | | |  | | | |  | | | |  | | | | |  | |  | |  | |  | |  | |  | |  | |  | |
| **6.3** | The 2015 Local Action Plan is included on agendas of local working group/School Board/Management forums. Meeting minutes reflect discussionand monitoring of progress. |  | |  | | |  | | | | | |  | | | |  | | | |  | | | | |  | |  | |  | |  | |  | |  | |  | |  | |
|  | ***INSERT****improvements and other priority action items for attention in 2015 that relate to consultation and communication.* |  | |  | | |  | | | | | |  | | | |  | | | |  | | | | |  | |  | |  | |  | |  | |  | |  | |  | |

**NOTE:**

1. The Safety & Wellbeing WHS Consultants will be undertaking **periodic** evaluations of local records to verify completion of the priority action items in 2015.
2. Records of health and safety activities must be maintained locally and be readily accessible via SharePoint or local shared drive/s.
3. Please ensure you are using the most current **forms and checklists** located on the [Safety & Wellbeing website](http://w3.unisa.edu.au/safetyandwellbeing/SMS/forms.asp).

If you have downloaded forms and checklists onto your SharePoint team site or shared drive, check to ensure they are the most current before using.