

D-40 WHS Continuous improvement and self-audit

NQS

QA. 2.1	Health.
QA. 2.1.1	Wellbeing and comfort.
QA. 2.1.2	Health practices and procedures.
QA. 2.1.3	Healthy lifestyle.
QA. 2.2	Safety.
QA. 2.2.1	Supervision.
QA. 3.1.1	Fit for purpose.
QA. 3.1.2	Upkeep.
QA. 4.1	Staffing arrangements.
QA. 7.1.2	Management systems.
QA. 7.1.3	Roles and responsibilities.
QA. 7.2.1	Continuous improvement.

National Regulations

Reg. 77	Health, hygiene and safe food practices
Reg. 103	Premises, furniture and equipment to be safe, clean and in good repair
Reg. 105	Furniture, materials and equipment
Reg. 106	Laundry and hygiene facilities
Reg. 109	Toilet and hygiene facilities
Reg. 115	Premises designed to facilitate supervision
Reg. 168	Education and care service must have policies and procedures
Reg. 175	Prescribed information to be notified to Regulatory Authority

My Time, Our Place

LO. 1	Children and young people feel safe, secure, and supported
LO. 3	Children and young people are aware of and develop strategies to support their own mental and physical health and personal safety
LO. 5	Children and young people are effective communicators

Policy Statement

The Work Health Safety Management System (WHSMS) is the framework of how WHS is organised in the workplace. This policy and procedures manual contains all the basic procedures for safe work. WHS records and information is retained on the GELSafe. The self-audit in GELSafe is completed every twenty-six (26) weeks as a gap analysis to help direct the process of continuous improvement.

Related Policies

- CONCORD OSHC Policy A-4: Enrolment
- CONCORD OSHC Policy A-13: Participation and Access
- CONCORD OSHC Policy A-17: Privacy and Confidentiality
- CONCORD OSHC Policy A-19: Nominated Supervisor
- CONCORD OSHC Policy C-3: Staff Orientation and Induction
- CONCORD OSHC Policy C-9: Relief Staff
- CONCORD OSHC Policy C-10: Volunteers / Students / Visitors
- CONCORD OSHC Policy C-15: Return to Work Program
- CONCORD OSHC Policy D-22: Child Protection – Mandatory Reporting
- CONCORD OSHC Policy D-33: Legal Responsibilities and WHS information
- CONCORD OSHC Policy D-34: Hazard Identification, Risk Assessment and Control

Scope

This procedure applies to the whole Centre and all staff.

Responsibilities

Management has the responsibility to:

- Collect information
- Ensure the self-audit with GELSafe is completed every 26 weeks
- Complete the action items identified and provide resources for their implementation

Staff have the responsibility to:

- Raise issues with management to ensure there is an effective program of continuous improvement at the Centre

Procedure

- The self-audit will be completed either at management level or by delegating to other designated staff member
- The results of the self-audit will be discussed through the consultation process and at staff and management meetings
- Actions will be completed within the designated time frame
- Monitor and review of the items will occur regularly to determine their effectiveness

External WHS Management System Audit

In addition to the internal audit process an independent third-party audit may be performed by an Accredited WHS Auditor. If this occurs, the audit will be conducted on the agreed date and the Auditor will hand back the documentation to the Manager. In most instances, the Auditor would provide a report to the Management, detailing the results of the Audit and where recommendations for changes are to be made. Management would then review the recommendations and determine follow up action.

Sources

- AS/NZ4801:2001 - Section 4.5 & 4.6.
- See also WHS021 Data Management and Record Control

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