

D-40 WHS Continuous improvement and self-audit

Epping Heights OSHC.

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

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

- EPPING HEIGHTS OSHC Policy A-4: Enrolment
- EPPING HEIGHTS OSHC Policy A-13: Participation and Access
- EPPING HEIGHTS OSHC Policy A-17: Privacy and Confidentiality
- EPPING HEIGHTS OSHC Policy A-19: Nominated Supervisor
- EPPING HEIGHTS OSHC Policy C-3: Staff Orientation and Induction

- EPPING HEIGHTS OSHC Policy C-9: Relief Staff
- EPPING HEIGHTS OSHC Policy C-10: Volunteers/Students/Visitors
- EPPING HEIGHTS OSHC Policy C-15: Return to work
- EPPING HEIGHTS OSHC Policy D-22: Child Protection
- EPPING HEIGHTS OSHC Policy D-32: Responsibilities and WHS information
- EPPING HEIGHTS OSHC Policy D-33: Workplace Inspection
- EPPING HEIGHTS OSHC Policy D-34: Hazard Identification, Risk Assessment and Control Policy

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. 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 will provide a report to the Management, detailing the results of the Audit and where recommendations for changes are to be made. Management will 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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