WHSMS Corrective Actions Procedure

Section 1 - Governing Policy

(1) This Procedure is governed by the Work, Health, Safety and Wellbeing Policy.

Section 2 - Background

(2) This Procedure describes the broad range of corrective actions and reporting that are implemented within the university. Corrective actions reports should be entered into Riskware and other relevant systems (refer to Section 3).

Section 3 - Scope

(3) All staff, students, visitors, volunteers, and contractors participate and contribute to consultations and the identification (and consultations about) of the hazards that are associated with the activities which ACU manages and influences. These issues are resolved through collaboration.

Systems Used to Document and Track Corrective Actions

Hazard Identification Activity	System
Annual Fire Certification	External consultants in each state maintain their own tracking system, on behalf of Facilities Management teams.
WHS Inspections conducted by work areas	Hazard report, Riskware (may be complemented by Service Central requests)
Non-conformances from WHSMS - Audits and audits that include aspects of safety within their scope	Internal Audit Action Tracker Note: progress reports and briefing notes are provided to the Audit and Risk Committee.
Incidents, injuries and work and learning-related illnesses	Incident report, Riskware
Testing, inspecting, and monitoring of plant and equipment	Hazard report, Riskware
Reports of hazards	Hazard report, Riskware
Staff Complaints	Staff Complaints Portal, People and Capability

Section 4 - Roles and Responsibilities

Staff, Students and Contractors

(4) Staff, students and Properties and Facilities and other organisational units' contractors are primarily responsible for hazard identification processes. The corrective actions which are identified because of these activities are entered into Riskware and other relevant systems (see Section 3). They also contribute to resolving these issues and contribute to WHS risk assessment and management processes.

(5) In accordance with the Incident and Hazard Reporting Procedure staff and students should also submit reports of incidents, injuries, work and learning-related illnesses and hazards in Riskware.

Supervisors

(6) Supervisors should collaborate with relevant staff to resolve hazards in a timely and effective way (informed by the Hierarchy of Control). They should also engage staff about the pathway for Resolving a WHS Issue @ ACU.

(7) Supervisors also lead and/or support staff to participate in hazard identification processes such as WHS inspections. Supervisors also play a pivotal role in informing their Member of the Executive and/other Managers about the hazards and associated WHS risks that are associated with work and learning activities.

Members of the Executive

(8) Members of the Executive should engage relevant staff and contractors about the hazards and associated WHS risks that are associated with their work and learning activities. They should also allocate adequate resources to resolving significant hazards, in alignment with their legal obligations. They should also stay informed about the status of corrective actions.

(9) Members of the Executive also collaborate with relevant supervisors to resolve hazards in a timely and effective way (in alignment with the Hierarchy of Control (Eliminate Risk)).

WHS Unit

(10) WHS staff support work areas to conduct hazard identification processes and resolve these issues in alignment with the Hierarchy of Control (Eliminate Risk). These staff also support staff to resolve these hazards and generate corrective actions reports that inform the quarterly WHS Report.

Section 5 - Procedure

Hazard Identification Activities

(11) Staff, consultants and others should identify corrective or preventative action opportunities that should be logged in a relevant system (refer to Section 3)[1].

> [1] Whenever reports are logged in Riskware, by a staff member, the report is automatically assigned to their nominated supervisor who receives an automated email notification and associated guidance about resolving the issue.

(12) Hazard identification activities:

a. WHS inspections;
b. testing, inspecting, and monitoring of plant, and equipment;
c. consultations with staff, students, contractors and others;
d. non-conformances from Work Health and Safety Management System (WHSMS) audits;
e. incident and hazard reporting;
f. screening of contractors and service providers; and
g. staff complaints.

Assign a Risk Rating and Select Corrective Actions

(13) When hazards, incidents, audits are submitted within Riskware, the associated corrective actions are recorded electronically. A risk rating should be selected when the associated Riskware Action Plan is reviewed by a relevant staff member or supervisor and whenever they are entered into other systems.

(14) The selection of corrective actions should be informed by the Hierarchy of Control (Eliminate Risk). The most effective corrective actions (risk controls or treatments) should be selected to manage the issues. that are assigned higher risk ratings. Refer to the Hierarchy of Control within the WHS Risk Management Procedure.

Corrective Actions Reporting to Inform Meeting Discussions

(15) WHS staff will provide ongoing support to work areas to view and download their Corrective Actions Register from Riskware.

(16) Corrective Actions Registers should be discussed during staff meetings as part of broader regular discussions about safety and wellbeing.

Process Map: Corrective Actions Procedure

(17) The Process Map Corrective Actions Procedure describes the Riskware reporting process. There are some variations in these processes when corrective actions are logged in other systems.

Section 6 - Revisions made to this Procedure

(18) The University may make changes to this Procedure from time to time to improve its effectiveness.

(19) If any staff member wishes to make any comments about this Procedure, they should forward their suggestions to People and Capability.

Section 7 - Further Assistance

(20) Any staff member who requires assistance in understanding this Procedure should first consult their Nominated Supervisor or Manager who is responsible for applying the University's WHSMS within their work area. Should further information or advice be required, staff should visit Service Central.

Section 8 - Associated Information

(21) For related legislation, policies, procedures and guidelines and any supporting resources, please refer to the Associated Information tab.

Status and Details

Status	Current
Effective Date	19th December 2023
Review Date	13th January 2026
Approval Authority	Vice-Chancellor and President
Approval Date	19th December 2023
Expiry Date	Not Applicable
Responsible Executive	Angelle Laurence Chief People Officer
Responsible Manager	Angelle Laurence Chief People Officer
Enquiries Contact	Bernardine Lynch ER and Safety Committees and Policy Officer People and Capability