

WHSMP16: WHSMS Management Review

Purpose and Scope

- (1) The purpose of this procedure is to outline the responsibilities and actions to establish a Work Health and Safety Management System (WHSMS) review program at Southern Cross University (SCU).
- (2) The purpose of this procedure is to ensure Southern Cross University's management, employees, contractors, students, visitors and others are aware of the responsibilities and actions to establish a Work Health and Safety Management System (WHSMS) review program in the workplace.
- (3) All employees, students and others including both independent contractors and contractors under SCU control are to be made aware of and follow this procedure.
- (4) This Procedure applies to all SCU Work Units and sites. The procedure aligns with WHS legislation in the relevant jurisdictions SCU operates in.

Section 1 - Definitions

Action	An action raised in response to an identified deficiency.
RiskWare	RiskWare is part of SCU's cloud-based online safety management system. The audit module in RiskWare is used to design audits, checklists and inspections, schedule them to be conducted, and create corrective actions for non-conformances
Workplace Health & Safety Committee	A consultation committee on all matters relating to work, health and safety.

Section 2 - General Principles

Frequency of WHSMS Management Review

- (5) The WHSMS Management Review is programmed to be conducted bi-annually.
- (6) Review frequency may be extended to a maximum of every three years and the format may be reviewed in accordance with the practice.
- (7) The review shall be chaired by a member of the Executive Management Team to demonstrate top management's commitment.

Review Preparation

- (8) The WHS Manager schedules the review meeting and ensures that all key stakeholders are available. An agenda is prepared and distributed to participants in advance. See Appendix A for a sample agenda.
- (9) Additional considerations for planning could include:

- a. Involve all Health and Safety Representatives in a meeting to seek their involvement and input in gathering

WHSMS Management Review Documentation

(10) The following documents should be collated and prepared and distributed to participants in advance:

- a. End-of-year summary of the WHS Plan objectives and targets, key performance measures and the extent to which they have met.
- b. Any internal audit and result reports.
- c. External audit result summary if applicable.
- d. Corrective actions summary from RiskWare (e.g. how many were assigned and how many were completed on time, anything overdue).
- e. Changes in hazards and risk profiles and changes in resourcing or organisational structure that would impact the implementation and maintenance of the WHSMS.
- f. Key legislative and other requirements change during the year, their influences on the University's operation and the University's action in responding to the changes.
- g. Status of actions arising from the previous management review, if any.
- h. Resourcing requirements for adequately implementing and maintaining the WHSMS.
- i. HSR comments and feedback.

(11) These documents should be analysed and reviewed by the WHS Manager and submitted to the attendees for the review. These documents and aspects form the documentation component of the WHS Management Review.

Monitoring

(12) The Vice-Chancellor should monitor the completion of corrective actions arising from the last Management Review annually in the WHSMS Management Review.

(13) Any corrective actions not completed by the next WHSMS Management Review, strategic or operational directions should be discussed to resolve outstanding actions.

Section 3 - Roles and Responsibilities

(14) Refer to [WHSMP13: Responsibility and Accountability Statement](#)

Section 4 - Records of Documentation

(15) All relevant documentation will be recorded and kept in accordance with WHS Legislation and other legislative obligations.

- a. WHSMS Management Review Summary.
- b. WHSMS Management Review Documentation.
- c. Corrective actions arising from WHSMS Management Review and completion evidence.

Section 5 - Revision and approval history

(16) This procedure will be reviewed as per nominated review dates or because of other events, such as:

- a. Internal and external audit outcomes.

- b. Legislative changes.
- c. Outcomes from management reviews.
- d. Incidents.

Section 6 - References

Work Health and Safety Act (in the applicable jurisdiction that SCU operates)

Work Health and Safety Regulation (in the applicable jurisdiction that SCU operates)

Section 7 - Related Documents

[WHSMP12: Overview Manual](#)

[WHSMP13: Responsibility and Accountability Statement](#)

Appendix A

1. Review of WHS Objectives and Performance

- a. Assessment of the extent to which WHS Plan objectives, targets, and key performance measures have been met.
- b. Evaluation of overall key performance indicators (KPIs).

2. WHSMS Performance

- a. Review of trends in internal and external audit results.
- b. Analysis of incident investigations and any non-conformities.
- c. Status of corrective actions.
- d. WHSMS implementation status.

3. Evaluation of changes in hazards and risks

4. Legislative and Regulatory Updates

- a. Review of key WHS legislative and other requirement changes.
- b. Assessment of their impact on University operations.
- c. University's actions in response to the changes.

5. Status of Previous Management Review Actions

- a. Review of the status of actions arising from the previous management review.

6. Resourcing Requirements

- a. Evaluation of the resources required to adequately implement and maintain the WHS Management System.

7. Opportunities for Continual Improvement

- a. Identification and discussion of opportunities for continual improvement in the WHS Management System.

8. Summary and Conclusion

- a. Recap of key decisions and action items.
- b. Assignment of responsibilities and timelines for follow-up actions.
- c. Resulting recommendations for changes in the University WHSMS.

Status and Details

Status	Current
Effective Date	9th December 2024
Review Date	9th December 2027
Approval Authority	Vice President (People and Culture)
Approval Date	9th December 2024
Expiry Date	Not Applicable
Responsible Executive	Kim Franks Vice President (People and Culture)
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