



UNIVERSITY
OF WOLLONGONG
AUSTRALIA

UOW SAFE@WORK

WHS DOCUMENT CONTROL GUIDELINES

CONTENTS

1	Purpose	3
2	Scope	3
3	Definitions	3
4	Responsibilities.....	3
4.1	Manager Workplace Health and Safety	3
4.2	Health and Safety Advisor	3
4.3	Deans and Directors	3
4.4	Heads of School and Managers of Units.....	4
4.5	Local Document Controllers	4
4.6	Document Custodian.....	4
5	WHS Document Control	4
6	Document Development and Maintenance.....	4
6.1	Document Creation	4
6.2	Document Modification	5
6.3	Obsolete Documents	6
6.4	Electronic Data.....	6
6.5	Document Design.....	6
6.6	Document Properties	7
6.7	Consultation and Communication.....	8
6.8	Approval of Documentation.....	8
6.9	Documentation Verification.....	8
6.10	Non-Conformance.....	8
6.11	Document Storage and Retention.....	9
6.12	Document Review	9
6.13	Location of WHS Documents	9
6.14	Document Control Register.....	10
7	Related Documents.....	10
8	Review and Evaluation	11
9	Version Control Table	12
	Appendix 1: Local WHS Document Register.....	13

1 Purpose

These guidelines outline the process for creating and maintaining health and safety documentation for the University both at a central and local level.

Documentation is critical for the success of any organisation's workplace health and safety management system (WHSMS) and as such documents require regular review by competent persons to ensure their effectiveness, suitability and the information is current. It allows for consistency and uniformity in the application of procedures and specifications for health and safety in the workplace.

2 Scope

This guideline applies to all documents created as part of the University's WHSMS. This includes documents such as policies, procedures, guidelines and fact sheets created by the WHS Unit or Faculty/Division.

3 Definitions

WHSMS Documentation	Plans, policies, procedures, guidelines, forms and any other document which forms part of the WHSMS. These documents are designed and created by the WHS Unit.
Local Documentation	Local WHS documents are those which are created by a faculty or division to meet the local area needs e.g. Library Building Warden Procedure.
Controlled Document	Any document for which distribution and status are required to be kept current by the issuer to ensure that authorised holders or users have the most up to date version available.
Document Control	The process established in this procedure to define controls needed for the management of WHSMS documentation.

4 Responsibilities

4.1 Manager Workplace Health and Safety

The Manager WHS has the responsibility for the development of central WHS documentation for the WHSMS.

4.2 Health and Safety Advisor

The Health and Safety Advisor has the responsibility for the creation, modification and review of central WHS documentation. As well providing advice to local document controllers on the requirements of any locally produced documents.

4.3 Deans and Directors

Deans and Directors (or equivalent) are responsible for ensuring that the implementation of any faculty generated WHS documentation is created via according to these guidelines.

4.4 Heads of School and Managers of Units

Heads of School and Managers of Units are responsible for ensuring that the implementation of any school/unit generated WHS documentation is created via according to these guidelines.

4.5 Local Document Controllers

Where identified, faculties and divisions are to nominate a document controller to liaise with the WHS Unit to ensure all document control requirements are met.

Responsibilities for this role include the updating, creation and maintenance of local WHS documentation and the local document register.

4.6 Document Custodian

The document custodian has the responsibility to approve the WHS document.

5 WHS Document Control

The WHS Unit produces policy, guidelines and other documentation to assist with the implementation of WHS requirements for the University. These documents establish the minimum requirements for all faculties, divisions and units to achieve to maintain appropriate positive WHS performance. In essence central WHS documentation is created where there is a need for the requirements across multiple areas of the University.

Further documentation created at a local level may be required and should follow the requirements of this guideline. These generally include procedures that outline more detail on how a central WHS document will be implemented.

The University of Wollongong utilises the internet for the storing and availability of documents used in the WHSMS. This allows for one controlled source to be available for the University and eliminates the need for multiple controlled copies of manuals to be kept. In doing so, this means that any printed version of a document or record is 'un-controlled' and should be checked against the online version for its status.

6 Document Development and Maintenance

Creation and modification of central and local documentation should be performed by competent persons, i.e. those having relevant education, experience and work related skills in the particular topic, to ensure their effectiveness, suitability and the information is current. Central WHS documents are created and modified by members of the WHS Unit in the relevant matter.

6.1 Document Creation

6.1.1 Central Documents

New or additional documents for inclusion in the WHSMS are determined by the needs of the organisation, based on:

- legislative requirements
- self-insurance requirements
- system failures reported or identified during incidents investigations
- suggestions from employees or consultation arrangements, and
- industry and organisational best practice.

The need for a new document is then considered by the WHS Unit and arrangements made to prepare the document. The draft document is then made available for consultation prior to going through the approval process.

New documents are identified:

- on the 'Document Review' WHS Unit web site
- on the Master Document Control Register
- in WHS Committee or Workplace Advisory Committee meeting minutes.

WHS Management System documentation shall be consistent with the [Quality Management System Creating a New QMS Document](#).

6.1.2 Local Documents

The need for local WHS documentation may be created if the WHSMS guidelines are not specific enough for the process to be implemented at the 'coal-face'. Examples of where this need may be required include the specific identification of responsibilities or more detail for the process to be completed. Local WHS documents shall be created, approved, control and maintained in accordance with these guidelines.

Local WHS documentation should not create an alternate method of managing health and safety but rather provide further information on the implementation of the system requirements. Local WHS documentation is to include a reference to the overarching WHSMS document(s) and be consulted with the local area Workplace Advisory Committee and the Health and Safety Advisor prior to approval.

6.2 Document Modification

Existing documents require regular review to ensure currency with external requirements. Requirements for review and update are determined by:

- the review period as defined by this document
- changes or new legislative requirements
- changes or new self-insurance requirements
- system failures reported or identified during incidents investigations
- suggestions from employees directly or via consultation arrangements, and
- industry and organisational best practice.

6.2.1 Central Documents

If a document is reviewed as required by the schedule of review then the information contained in the document is regarded as current as long as there is no change to legislative or business requirements.

The need to update a document is considered by the WHS Unit and arrangements made to modify the document. The draft document is then made available for consultation prior to going through the approval process.

Modified documents are identified:

- on the 'Document Review' WHS Unit web site
- when the document number and release date is inconsistent with the current and maintained version contained on the internet or intranet
- in consultation mechanism meeting minutes.

Documents which are created, modified or made obsolete are communicated to employees and others as outlined in Section 6.7 Consultation and Communication.

6.2.2 Local Documents

Regular review of local documents should also occur to ensure consistency with the WHS Management System. The need to update a document is considered by the Local Document Controller and arrangements made to modify the document.

6.3 Obsolete Documents

Obsolete documents are those which are no longer required, replaced or superseded as determined by the needs of the WHSMS or local areas. Obsolete documents are identified:

- on the Master Document Control Register and listed as obsolete or archived
- when the document number and release date is inconsistent with the current and maintained version contained on the internet or intranet.

6.3.1 Central Documents

Obsolete documents are communicated to the organisation through the Master Document Control Register, available on the internet and through consultation mechanisms.

Obsolete WHS documentation shall be removed from points of issue and use, e.g. the internet, and retained electronically utilising the Content Management System and University Records Management (URM) System to prevent unintended use and for system evaluation purposes.

6.3.2 Local Documents

Local WHS documentation which is determined as obsolete shall be removed from points of issue and use and archived according to this guideline.

Obsolete documents removed from circulation should be destroyed and disposed of to prevent unintended use. Where possible disposal of documents should occur through non-secured recycling.

6.4 Electronic Data

Any creation, approval, modification or revision of electronic page, whether it is available on the internet or intranet, shall be as per the [Web Support Services policies and guidelines](#).

Where a WHS information system (e.g. SafetyNet or SitePass) is changed the corresponding WHSMS documentation should be updated to reflect this.

6.5 Document Design

6.5.1 Central Documents

Documents created for the WHSMS shall use the WHS Document Style Guide to ensure legibility and consistency. This will ensure that documents have the same style, format and document control properties.

Exceptions to this include:

- Other documentation as approved by the Manager WHS, e.g. Evacuation and First Aid Posters, Brochures etc.

Draft documentation shall be easily identifiable by use of a 'DRAFT' watermark as well identification in the footer e.g. HRD-WHS-GUI-138.5(draft).

6.5.2 Local Documents

Where possible, local documents should be consistent with the relevant [Business Improvement and Assurance Template](#). Local WHS documents are required to have links to relevant central WHS documentation where appropriate.

Further information on document design is available from the [Business Improvement and Assurance intranet site](#).

6.6 Document Properties

6.6.1 Central WHS Documentation

Each central WHS document created for the WHSMS is required to be consistent with the requirements as per [Business Improvement and Assurance Document Control Standard](#).

6.6.2 Local WHS Documentation

Each local document is required to have the following document properties displayed in the footer:

- Document identifier: This shall include the Faculty/Division – Unit – Function - Type of Document – document number. The document number shall be displayed in the format ‘XXX.Y’, where X is the document number and Y is the version number e.g. *EIS-WHS-GUI-138.5*.

Identifiers shall be used accordingly:

Faculty/Unit	Tag
Facilities Management Division	FMD
Accommodation Services Division	ASD
Faculty of Business	BUS
Faculty of Engineering and Information Sciences	EIS
School of Civil, Mining & Environmental Engineering	CME
School of Physics	PHY
School of Mechanical, Materials & Mechatronic Engineering	MMM
Faculty of Law, Humanities and the Arts	LHA
Faculty of Science, Medicine and Health	SMH
School of Chemistry	CHE
School of Biological Sciences	BIO
School of Earth and Environmental Sciences	EES
School of Medicine	GSM
Illawarra Health & Medical Research Institute	MRI
Faculty of Social Sciences	SOC
SMART Infrastructure Facility	SMA

- Document Name: the name of the document;
- Release Date: the date the document was release.
- Page Number: the page and number of pages in the document;

- Disclaimer: “Hardcopies of this document are considered uncontrolled please refer to intranet for latest version” added to all documents except those that are exempt (forms, memorandums, facsimiles, agendas and minutes).

6.7 Consultation and Communication

Any document which is developed and implemented as part of the WHSMS is to be consulted with stakeholder and users prior to finalisation.

Consultation can occur through the following means but is not limited to:

- the University WHS Committee
- local Workplace Advisory Committees
- focus groups or working parties
- key stakeholders input.

New or updated documents made available for comment are published on the WHS internet site:

- [Document Review](#)
- [Previously Reviewed Documents](#)

Evidence of consultation should be documented through meeting minutes, memorandums or emails. Once finalised, changes to documented procedures are to be notified to staff via the WHS Committee and WAC meeting minutes.

6.8 Approval of Documentation

Minor changes including grammar or spelling are not deemed as content change, these are exempt from the document approval process. Other changes to document content are required to be approved.

6.8.1 Central Documents

Centrally created or reviewed WHS documents shall be approved by the Manager WHS prior to finalisation and upload to the internet. Uploading of documents to the WHS internet and intranet is approved by the content management system site authorisation approval.

6.8.2 Local Documents

Locally created WHS documents shall be forwarded to the Health and Safety Advisor to ensure that it is compliant with this guideline, compliant with any relevant legislation, standards or codes of practice and approved by the relevant Dean, Director, Head of School or Unit Manager.

6.9 Documentation Verification

WHS documentation will be verified by WHS system and verification audits to ensure compliance with document control requirements.

Verification audits will also aid in the continuous improvement of the WHS system by ensuring that WHS records are suitable and appropriate to the needs of stakeholders in achieving the objectives of the UOW WHS Policy.

6.10 Non-Conformance

Where WHS documentation not conforming to this guideline is identified, the document shall be amended to ensure compliance and added to the appropriate document register.

6.11 Document Storage and Retention

WHSMS documents created or modified are stored electronically in either the Content Management System or on the WHS Unit file server. The location of storage per document is recorded in the WHS Document Control Register.

Retention of all versions of created documents shall be kept either electronically or in print for system evaluation purposes according to the University's [Record Management Policy](#) which is derived from the State Records Act. A listing of record keeping requirements derived from the State Records Act pertaining to WHS information is detailed in [WHS Records Handling Guidelines](#).

6.12 Document Review

Any document created for the WHSMS is to be reviewed at least every 3 years to ensure relevance to organisational requirements, their effectiveness, suitability, currency of information and compliance to WHS legislation, standards or codes of practice. This will include reviewing the document in full incorporating any required changes which might arise from legislation, feedback, best practice or organisational requirements. In addition the review may include process improvement from internal or external audits or where risk control measures have failed to work as expected to determine whether the process was inadequate, inappropriate or otherwise flawed.

For some documents this may need to be more frequent depending on changes in legislation, corrective actions arising from incidents or to aid in continuous improvement. Such a need will be identified in the Review section of the document. All document reviews will be communicated via the WHS Committee meeting minutes.

On a monthly basis the document control register will be reviewed to determine those documents requiring review. Staff of the WHS Unit will be assigned for documents that require review. The person allocated to the review will have sufficient skills, knowledge experience and abilities in the subject matter and the document review process to fulfil these documented requirements.

The review will be completed as per the requirements of the legislative compliance review outlined in the WHS Legislative Compliance Guidelines.

Further information on this process is outlined in the [Procedure: WHSMS Document Control](#).

Local WHS documents are assessed for their compliance to this guideline by internal WHS verification audits.

6.13 Location of WHS Documents

6.13.1 Central Documents

Central WHS documents are to be located on the University's [WHS internet site](#) for ease of accessibility.

6.13.2 Local Documents

Local based WHS documentation is to be made available on the unit's internet or intranet site.

For those persons who do not have access to the internet, hardcopies of procedures and guidelines are to be made available. However, these documents as like any document printed from the internet are 'uncontrolled' documents and will need to be checked against the online version to ensure validity.

Employees are made aware of the location of WHS documentation through "Getting to Know Your University" training and local area induction sessions.

6.14 Document Control Register

6.14.1 Central Documents

Each document created as part of the WHSMS will be recorded in the WHS Unit's Document Control Register and the Master Document Register available from the [Business Improvement and Assurance intranet site](#).

The register will include the following information as a minimum:

- document number
- current version
- document title
- creation date
- last review date, and
- next review date.

The WHS Unit's Document Control Register maintains the most current and up to date information relating to WHSMS information.

6.14.2 Local Documents

Any document created by or within Faculties, Schools, Library, or Units created as part of the WHSMS will be recorded on the [Local WHS Document Control Register](#). This may include documents such as guidelines, procedures, templates and forms, for example local emergency procedures would be recorded on the local document control register.

The register will include the following information as a minimum:

- document number
- current version
- document title
- creation date
- last review date, and
- next review date.

An example of a completed Local WHS Document Control Register is located in Appendix 1: Local WHS Document Register.

Administration Divisions shall record their WHS document properties in accordance with the [Business Improvement and Assurance Management System](#).

7 Related Documents

- [WHS Management System Guidelines](#)
- [WHS Legislative Compliance Guidelines](#)
- [Record Management Policy and Guidelines](#)
- [WHS Records Handling Guidelines](#)
- [Local WHS Document Register](#)

8 Review and Evaluation

In order to ensure that these guidelines continue to be effective and applicable to the University, the program will be reviewed triennially. However, more frequent reviews may be required as per legislative changes, corrective actions or continuous improvement.

Following completion of any review, these guidelines will be revised in order to correct any deficiencies. Any changes will be consulted via the WHS Committee.

9 Version Control Table

Version Control	Date Released	Approved By	Amendment
1	April 2003	Manager WHS	Document created.
2	January 2004	Manager WHS	Document updated to reflect current requirements.
3	December 2005	Manager WHS	Document updated to reflect current requirements.
4	March 2007	Manager WHS	Document updated to reflect current requirements.
5	May 2008	Manager WHS	Document updated to improve clarification on document control and records handling procedures as well as minor modification to Document Register and Local Index.
6	May 2009	Manager WHS	Document updated to include process for creation and modification of WHS documents, removal of obsolete documentation, establishing and identifying approval, identifying that WHS documentation has been changed and available, review of WHS documentation by competent persons.
7	April 2010	Manager WHS	Minor review no significant changes.
8	August 2010	Manager WHS	Document updated to incorporate the Personnel name change to Human Resources Division.
9	March 2010	Manager WHS	Document updated to refer to Administration Quality System. Records handling components moved to Records Handling Guidelines.
10	March 2012	Manager WHS	Re-brand
11	March 2013	Manager WHS	Minor changes only.
12	May 2015	Manager WHS	Change references from Quality Assurance to Business Improvement and Assurance. Updated the table in section 6.6.2. Updated to meet requirements of the National Audit Tool Version 3.
13	June 2016	Manager WHS	Rebrand
14	September 2016	Manager WHS	Minor update to section 6.4

Appendix 1: Local WHS Document Register

Faculty/Division: EXAMPLE

School/Unit: EXAMPLE

DOCUMENT TITLE	DOC. NUMBER	DATE CREATED	DATE OF LAST REVIEW	DATE OF NEXT REVIEW	DOCUMENT CUSTODIAN
Faculty WHS Document Register	FAC001	1/1/2008	1/7/2008	1/7/2010	Mr J. CITIZEN