



Chapter 5.2 Document Control and Record Management

5.2.1 Aims and Objectives

To prescribe the responsibilities and actions required for managing records and control document as specified in [Procedure: Work health and safety documentation management](#) and the [National Self Insurer WHS Audit Tool \(NAT CTH\)](#) as well as other relevant legislation, procedures and WHSMS Handbook requirements.

5.2.1.1 Objectives

To ensure the University and its Colleges, Schools and Service Divisions:

- Has a system for creating, modifying and approving health and safety documents and data, and notifying relevant persons of any changes;
- Has a system to ensure documents critical to health and safety shall be clearly identifiable, duly authorised prior to issue, kept legible and include their issue status;
- Provides workers with ready access to relevant health and safety documents and data and advises them of its availability;
- Regularly review documents by competent persons to ensure their effectiveness, suitability and the currency of the information; and
- Has a process to manage health and safety records appropriately in accordance with WHSMS Handbook.

5.2.1.2 Scope and Inclusion

This Chapter applies to all Schools, Colleges, Divisions and Portfolios and all WHS documentations created by these areas.

5.2.2 Process: WHS Management System (WHSMS) Documentation

5.2.2.1 Planning

Responsible and Accountable Person	Actions Required
Deputy Chief People Officer, Safety and Wellbeing (S & W)	☐ Ensure the WHSMS Policies, Procedures and Handbook as well as other associated documents are presented systematically on the University's Health and Safety Website . Ensure these documents are readily accessible by any workers or HDR students (as appropriate).

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- ☐ Ensure workers and HDR students are introduced to and notified of the availability of these WHSMS documents via the University WHS Induction and other relevant training.
- ☐ Ensure WHSMS documents have a unique file name for identification purposes, have appropriate document control format included and are duly authorised before putting into operation as per the table below.

Table 1. Document Control Format and Approval Authority

	Document Control Format	Authority to Approve
Policy	As per document control of Policy Library	VC
Procedures		COO
WHSMS Handbook	Document Control format specified in Appendix A	DCPO, S &W
Other documents in Policy Library	As per document control of Policy Library	COO
Other documents associated with the WHSMS Handbook	Document Control format specified in Appendix A	DCPO, S &W

- ☐ Ensure all WHSMS Documents are listed on the WHS Legal and Other Requirements Matrix (as the WHSMS Document Register) and list their current version number, issue status and expiry dates.

	☐ Ensure the above specified documents are saved into relevant ERMS folders as they are created and maintained.
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5.2.2.2 Implementation

Responsible and Accountable Person	Actions Required								
Senior WHS Consultant, Systems and Audit	Creation of New WHSMS Documents ☐ For any new WHSMS policies, procedures, Handbook Chapters, Information Sheets or other documents associated with the WHSMS, discuss with DCPO S&W for approval. ☐ Develop the documents using the relevant template and in accordance with the University writing style guide as relevant. ☐ Request DCPO S&W to review the documents and follow the below actions after DCPO S &W's review. <table border="1"> <tr> <td>New Document</td><td>Consultation and Publication</td></tr> <tr> <td>Policy</td><td rowspan="3">Consultation via WHS Committee structure, WHS Officers and HSRs with all levels of managers and workers</td></tr> <tr> <td>Procedures</td></tr> <tr> <td>WHSMS Handbook Chapter</td></tr> <tr> <td>Information Sheet</td><td>Review by at least one of the direct reports of DCPO S &W</td></tr> </table> ☐ Obtain approval from authorities as identified in Table 1 and publish in accordance with Appendix B of this Chapter. Changes to Existing WHSMS Documents ☐ When a change suggestion is received, evaluate its appropriateness taking into consideration WHS legislative and other requirements; National Audit Tool self-insurance requirements; and current status of University WHSMS implementation, seeking direction from DCPO S &W ➤ If the change suggestion is not appropriate, notify the person raising the request in writing as to the reason of declining the request; OR	New Document	Consultation and Publication	Policy	Consultation via WHS Committee structure, WHS Officers and HSRs with all levels of managers and workers	Procedures	WHSMS Handbook Chapter	Information Sheet	Review by at least one of the direct reports of DCPO S &W
New Document	Consultation and Publication								
Policy	Consultation via WHS Committee structure, WHS Officers and HSRs with all levels of managers and workers								
Procedures									
WHSMS Handbook Chapter									
Information Sheet	Review by at least one of the direct reports of DCPO S &W								

	☐ If the change suggestion is appropriate, discuss with DCPO S &W to obtain intended changes and review the document. Follow Appendix B requirements to make changes, consultation and obtain relevant approval from authorities identified in Table 1. Notification of new or changed WHSMS Documents ☐ For any new or major reviewed policies, procedures and Handbook Chapters, notify all levels of workers via the WHS Committee Chairs, WHS Officer Network and HSRs. ☐ For other relevant new or reviewed documents (such as information sheets), they will be notified via the WHS Officers Network for distribution. Storage of WHSMS Documents ☐ Ensure the WHSMS Documents (and all their versions) are stored in the University's Electronic Record Management System (ERMS). These documents are to be retained and not destroyed. Redundancy of Existing WHSMS Documents ☐ When a WHSMS document is no longer required, its redundancy and storage process is as per Appendix B requirements.
School/Division Directors College Deans/General Managers WHS Officers, Consultants, Managers	☐ Make sure you and anyone under your control DO NOT modify WHSMS documents, including policy, procedures, Handbook Chapter, templates, information sheets and other relevant documents after their authorisation from the University. NOTE: There are specific cases where a limited number of specific templates (i.e. Tier 2 and 3 induction template, Local WHS Plan) are allowed to be added with additional information as stated throughout the Handbook. However, in general, modification of existing authorised templates are strictly prohibited. ☐ If you have suggestions for certain templates to be changed or updated, email the Safety and

Managers and Supervisors	Wellbeing team whs@anu.edu.au or raise with DCPO S&W.
Workers, HDR Students Health and Safety Representatives (HSRs)	☐ Be cooperative and follow reasonable instruction that you DO NOT modify or change any WHSMS documents including policy, procedures, Handbook Chapter, templates, information sheets and other relevant documents after their authorisation from the University. These documents have been consulted with all levels of managers and workers and have whole of university effects in health and safety management. NOTE: In general, modification of existing authorised templates are strictly prohibited unless where permitted as per the WHSMS Handbook. ☐ If you have suggestions for certain templates to be changed or updated, email the Safety and Wellbeing team whs@anu.edu.au or raise with DCPO S&W.

5.2.2.2 Monitoring and review

Responsible and Accountable Person	Actions Required
Deputy Chief People Officer, Safety and Wellbeing	☐ Ensure University WHSMS documents including the WHS Policy, Procedure and WHSMS Handbook, as well as other associated documents are monitored and renewed up on expiry. ☐ Ensure all WHSMS policies, procedures and Handbook Chapters are reviewed every 5 years as planned reviews. Ensure all other documents associated with the WHSMS or Handbook are reviewed periodically as per identified in the document at least once per every 5 years.

	☐ Ensure document control and record management requirements are audited across the University during the auditing of any WHSMS Chapters via the Internal WHS Audit Program.
Senior WHS Consultant, Systems and Audit	☐ Monitor the expiry of WHSMS documents, including the WHS Policy, Procedure and WHSMS Handbook, as well as other associated documents via the WHS Legal and Other Requirement Matrix (as the Documentation Register) as well as the Insight Policy Due Report monthly. ☐ Monitor the WHS Legal and Other Requirements changes on Monthly, evaluate and incorporate changes in accordance with WHSMS Handbook Chapter 2.1 requirements and review relevant policy, procedure and Handbook in accordance with Appendix B of this Chapter. ☐ Liaise with other internal stakeholders who are responsible for various policies and procedures to ensure they are aware of the expiry of these documents and take appropriate actions (e.g. Manager, Injury and Claims; Senior WHS Consultant, Injury Prevention). ☐ Review the documentation and decide, in consultation with DCPO, S&W if: ➤ A major review (See definitions) is required; ➤ A minor amendment (See definitions) is required; ➤ No changes are required; or ➤ The document is no longer required. Note: For any documentation in Policy Library with a major review required, the review should be initiated at least 13 weeks before expiry to ensure the Policy and Procedure are always within the validity. Note: The purpose of the review is to ensure the effectiveness, suitability and the currency of the information of the documents as well as incorporating WHS legal and other requirement changes. ☐ Follow actions required in Appendix B for reviewing, consultation, approval and record management.

	☐ Ensure all WHSMS Documentation are within their validity during operation with no overdue ones. ☐ Upload all versions of the WHSMS Handbook Chapters created, changed or reviewed in the calendar year into the University's Electronic Record Management System (ERMS) on an annual basis.
Policy Manager, Policy Library	☐ Upon receiving reviewed versions of WHS documents in the Policy Library from DCPO S&W or delegate), ☐ ☐ If changes need to be made to these reviewed versions, discuss with Senior WHS Consultant, Systems and Audit before making these changes. ☐ Upload changes and reviews of any WHS documents located in Policy Library, after appropriate approval is obtained, promptly as a priority. ☐ Ensure all documents uploaded into the Policy Library have a unique identification number and uses the Policy Library Document Control format.

5.2.3 Process: Local WHS Documentation

5.2.2.1 Planning

Responsible and Accountable Person	Actions Required
DCPO, Safety and Wellbeing Senior WHS Consultant, Systems and Audit	☐ Ensure a record management section is included in all WHSMS Handbook Chapters to specify when and how records should be managed: ➤ What records to create? ➤ Where they should be kept? ➤ Information on how long they are retained (i.e. retention periods); ➤ The frequency of archiving; and ➤ Actions after the retention period. NOTE: For records archived into ERMS, the retention periods are automatically applied through the set-up of the system. Hence ensure the folder set-up in ERMS has the same retention periods as specified in the Chapters.

	☐ Establish a defined WHSMS Folder structure and make it available on the WHSMS Handbook website for local area operational storage purposes.
	☐ Ensure an appropriate folder structure based on the WHSMS Handbook structure in the ERMS system is set up for Schools and Divisions as well as the University (S&W as a delegate) to archive documentation in accordance the requirements of all Chapters of the Handbook.

5.2.2.2 Implementation

Responsible and Accountable Person	Actions Required
School/Division Directors College General Manager, where applicable These actions may be delegated to any management positions or WHS Officers or equivalent. However, the Directors and General Managers must maintain oversight.	☐ Ensure your School/Division/College Central uses the WHSMS Folder Structure from the WHSMS Handbook website for operational storage of WHS documents. The folder structure needs to be made readily accessible to workers and HDR students to read and use, as appropriate. The structure may also be digitalised onto an online platform that is maintained by the University (e.g. SharePoint Office 365)
	☐ Ensure all documents created locally in areas under your control are using the University WHSMS Handbook templates with no modification unless where permitted in the WHSMS Handbook.
	☐ Make sure you and anyone under your control DO NOT modify WHSMS documents, including policy, procedures, Handbook Chapter, templates, information sheets and other relevant documents after their authorisation from the University.
	☐ Ensure documents created as per required by WHSMS Handbook in your local area are stored, archived and disposed in accordance with the Record Management section of each of the Chapter.
	☐ If a document is required to be saved into ERMS, ensure they are saved according to various

	Handbook Chapters. If you require assistance for your local business unit, contact erms.admin@anu.edu.au
WHS Officers, Consultants, Managers (if appointed) Or School Managers, College General Managers or any other management position tasked to implement the WHSMS	□ Avoid creating local documents to provide WHS System Advice where possible, except those required by the WHSMS Handbook, and direct the managers, supervisors, workers and HDR students to use WHSMS Handbook guidance directly. □ If you absolutely have to create a local document to provide WHS System advice or a local document on the School or Division protocol/process because the WHSMS Handbook has not covered this topic, ensure: ➤ These documents are affixed with correct individual filename and identification using the document control format specified in Appendix A in the footer of this Chapter; and ➤ These documents are listed in a Document Register (Appendix C). □ For any WHS operational documents (such as Hazard and Risk Assessment, SafeWork Procedures, Contingency Plans, Emergency Plans, Local WHS Plans etc.) created locally, ensure: ➤ They are on the University WHSMS Handbook templates or transferred to the Handbook templates upon expiry (pre-2019 documents only). For these documents, they do not need their own document control, except Local WHS Plan, Local Training Plan, Static Risk Assessment Register and Key Emergency Personnel Register which require you to change the document control to be suitable for your own situation. □ For any documents related to WHS as described under WHSMS Handbook, store them in the WHSMS Folder Structure for operational use and archive in accordance with the Record

	Management Section requirement of each Chapter of the Handbook.
Managers and Supervisors	☐ Only use templates included in University WHSMS Handbook for documenting and assisting with managing WHS at the University.
Workers and HDR students	Note: For certain templates e.g. Inductions, your local area may have a localised template from the Handbook, it is okay to use those as per permitted in the Chapters.

5.2.2.2 Monitoring and review

Responsible and Accountable Person	Actions Required
School/Division Directors College General Manager, where applicable	☐ Ensure all documents created locally including those required by the WHSMS Handbook are monitored for expiry and are reviewed in a timely manner: ➤ In accordance with WHSMS Handbook requirements for review timeframe; or if not specified in the Handbook ➤ For at least once per every 5 years.
WHS Officers, Consultants, Managers (if appointed) Or School Managers, College General Managers or any other management	☐ Monitor the expiry of locally created documents, including those required by the WHSMS Handbook, on a frequent basis as prescribed by relevant chapters of the Handbook. ☐ Liaise with relevant managers/supervisors to ensure they review all documents they created in a timely manner: ➤ In accordance with WHSMS Handbook requirements for review timeframe; or if not specified in the Handbook; ➤ For at least once per every 5 years. Note: If any workers/HDR students approach you to raise the need to review documents, ensure this is discussed with their managers/supervisors so that they can review the documents.

position tasked to implement the WHSMS	Note: Other Chapters of the Handbook specify particular scenarios of a review (e.g. RA review after incident), you must liaise in these cases with the relevant manager/supervisor to ensure the review is completed. Note: For any person refusing to conduct a review, assign a corrective action in the system and discuss with the Director directly. If cannot resolve, this is a WHS Issue, raise in accordance with WHSMS Handbook Chapter 3.17 processes. ☐ Ensure all local documents are within their validity during operation with document overdue in reviewing timeframe. ➤ If a document becomes overdue as per the review timeframe, it must be withdrawn from service and have its relevant corresponding process temporarily ceased until they are reviewed and consulted. ☐ Obtain the reviewed documents and upload into ERMS, Figtree or WHSMS Folder Structure as specified in the Record Management section of relevant Chapters and manage the records accordingly.
Managers and Supervisors In consultation with Workers and HDR students	☐ When a document created by your group/team, including those required by the WHSMS Handbook, is due for review, OR you are approached by your local WHS Officer regarding a review OR you are assigned a corrective action to do so, ensure they are reviewed in a timely manner in consultation with workers and their representatives. ☐ Ensure all documents during operation are within their validity (i.e. reviewed promptly before expiry) to avoid delay in operational processes. ☐ After consultation and publication of the documents, notify relevant workers and students of the updated document within your team/group. ☐ Be cooperative and follow reasonable instructions should an expired document continue to be used and it

	needs to be withdrawn from operation as well as its corresponding activities.
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5.2.4 Record Management

Record needed	Where to Archive	Frequency to Archive	How long to keep
Local Document Control Register	Shared drive Folder – Element 5 – 5.2	As reviewed	10 years after the last action

5.2.5 Definitions

Major Review is a review of document that leads to significant changes the intent or content of the existing version of the existing document.

Minor amendment means a change made to a document to: correct or update a title, name, numbering, web link, metadata or a reference (to law, another policy document, a delegation, or other relevant document); correct document formatting, spelling, grammar, or clarity of language, which does not otherwise affect the document intent or content; reflect changes in the technical or process configurations of an associated enterprise system; or otherwise modify it in a way that does not significantly change the intent or content of the existing version of the document.

Workers mean staff, visitors, volunteers, titleholders, affiliates, labour hiring workers and contractors of ANU. HDR students may also be ANU workers depending on their role, but they are covered under the scope of this chapter.

Supervisors for the purpose of this chapter mean employees of ANU who have supervisory responsibilities. This includes line managers and academic supervisors.

5.2.6 Performance Measures

The University will use the performance measures listed below to assist in identifying areas of success and/or where corrective action is required to meet the objectives and targets of this process.

The level of compliance with the chapter and effectiveness will be determined during the internal audit process in turn to determine the compliance with WHSMS. Local areas can use below as a guide to improve compliance.

References	Performance Measures	Objective Evidence	Frequency	Indication of Success
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5.2.1.1 a)	100% of WHSMS documents are created, modified and approved in accordance with this Chapter	WHSMS Documents Major/Minor amendment forms Historical versions of WHSMS Documents Policy Library records	Annual	100% = success Otherwise, corrective actions
5.2.1.1 b)	100% of WHS documents have identifiable file name, authorised by person and have not expired.	Local WHS Documents WHSMS Documents Document Control used	Quarterly	100% = success Otherwise, corrective actions
5.2.1.1 c)	100% of WHSMS documents are readily accessible	WHS website	5 year	100% = success Otherwise, corrective actions
	100% of local WHS documents are readily accessible	Local WHSMS Folder Structure ERMS	Quarterly	100% = success Otherwise, corrective actions

	100% Managers and workers can demonstrate how to access WHSMS documents and local WHS documents	Interview	Quarterly	100% = success Otherwise, corrective actions
5.2.1.1 d)	WHSMS access method in University WHS Induction	University WHS Induction	Annual	100% = success Otherwise, corrective actions
	Local WHS Document access method in Local WHS Induction and High Risk Area WHS Induction	Local WHS Induction and High Risk Area WHS Induction – Completed checklist	Quarterly	100% = success Otherwise, corrective actions
5.2.1.1 e)	100% documents inspected are stored in accordance with the Record Management section of the Chapter being audited	Documents on local WHSMS Folder Structure Documents in ERMS	Quarterly	100% = success Otherwise, corrective actions

5.2.7 Useful resources and links

University documents	WHSMS Documents ➤ <u>Procedure: Work Health and Safety Documentation Management</u> ➤ <u>Procedure - Work health and safety legal and other requirements</u> Other relevant WHSMS Handbook Chapters ➤ All other Chapters
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NAT Tool Reference	National Self Insurer WHS Audit Tool (NAT CTH) Standards 3.7.1, 3.8.1, 3.8.2, 3.8.3, 3.8.4, 4.4.1
Legislation and Other requirements	Work Health and Safety Act 2011 Work Health and Safety Regulations 2011 Administrative Functions Disposal Authority (AFDA) Version 2, National Archives Australia