



Guidelines for Workplace Inspections

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| **Approving authority** | Health, Safety and Wellbeing |
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| **Description** | These guidelines describe the requirements and procedures for conducting and recording workplace inspections. |
| **Related documents** |  |
| [Health and Safety Policy](http://policies.griffith.edu.au/pdf/Health%20and%20Safety%20Policy.pdf)  [Code of Conduct](http://policies.griffith.edu.au/pdf/Code%20of%20Conduct.pdf)  [Reporting & recording procedures for incidents, injuries, hazards or near misses](http://policies.griffith.edu.au/pdf/Reporting%20and%20recording%20procedures%20for%20incidents,%20injuries,%20illness,%20hazards%20or%20near%20misses.pdf)  [Risk Management Framework](http://policies.griffith.edu.au/pdf/Risk%20Management%20Framework.pdf)  [Work Integrated Learning at Griffith](http://policies.griffith.edu.au/pdf/Work%20Integrated%20Learning%20at%20Griffith.pdf)  [General Health and Safety Inspection Checklist](https://teams.griffith.edu.au/sites/health-safety/HSW%20Documents/Forms/AllItems.aspxhttps:/www.griffith.edu.au/student-staff/health-safety-wellbeing/risk-management/inspections)  [Laboratory, Workshop and Chemical Stores Checklist](https://www.griffith.edu.au/student-staff/health-safety-wellbeing/risk-management/inspections)  **External Documents**  [Work Health and Safety Act 2011](https://www.legislation.qld.gov.au/view/html/inforce/current/sl-2011-0240)  [Work Health and Safety Regulation 2011](http://www.legislation.qld.gov.au/LEGISLTN/SLS/2011/11SL240.pdf) | |

1. **Introduction**

The University has a legal obligation under both State and Federal jurisdictions to ensure, so far as is reasonably practical, that the workplace is without risks to the health and safety of any persons. Any reasonably foreseeable hazards that could give rise to risks to health and safety must be identified and eliminated, or if not able to be eliminated, minimised as far as is reasonably practical. In addition, the University has a responsibility for ensuring specialised workplaces comply with the corresponding legislative requirements.

This includes workplaces certified by the Office of the Gene Technology Regulator (OGTR), Department of Agriculture and Water Resources (DAWR) and Radiation Queensland. Completion of annual workplace inspections can identify, eliminate and minimise risks thus complying with legislative requirements. .

1. **SCOPE**

These guidelines apply to all staff, unpaid appointments, students, contractors, volunteers and any other relevant persons engaged in University business that are or may be required to conduct workplace inspections.

1. **PURPOSE**

Griffith University is committed to maintaining a safe workplace, eliminating or minimising risks to health and safety and ensuring compliance with legislative requirements governing specialised workplaces. These guidelines specifically outline the requirements and procedures for conducting, recording and actioning workplace inspections.

1. **DEFINITIONS AND TERMS**

**Department of Agriculture and Water Resources (DAWR) –** for our purposes, oversees biosecurity operations, which is to prevent, respond to and recover from pests, and diseases that threaten the economy and environment.

**GSafe** – is Griffith University’s cloud based on-line safety management system that includes incident reporting and audit management.

**Hazard** – a situation that has the potential to harm a person.

**High-Risk Locations** – hazardous areas such as workshops, laboratories, studios and clinics areas

**Inspection Team –** personnel responsible for conducting the workplace inspection.

**Office of the Gene Technology Regulator (OGTR) –** Federal regulator under the Department of Health responsible for administering the *Gene Technology Act 2000* and corresponding state and territory laws. Specific responsibilities are to protect the health and safety of people, and to the environment, by identifying risk posed by or as a result of gene technology and by managing those risks through regulating certain dealings with genetically modified organisms (GMOs).

**Other Relevant Persons** - including but not limited to visitors, patients/clients and members of the public.

**Reasonably Practicable** – what can reasonably be done to ensure health and safety, taking into account and weighing up all relevant matters including;

* 1. the likelihood of the hazard or the risk concerned occurring; and
  2. the degree of harm that might result from the hazard or the risk; and
  3. what the person concerned knows, or ought reasonably to know, about –
     1. the hazard or the risk; and
     2. ways of eliminating or minimising the risk; and
  4. the availability and suitability of ways to eliminate or minimise the risk; and
  5. after assessing the extent of the risk and the available ways of eliminating or minimising the risk, the cost associated with available ways of eliminating or minimising the risk, including whether the cost is grossly disproportionate to the risk.

**University Biosafety Committee** – Internal committee overseeing regulatory compliance and safety in relation to genetic modification and other biological materials

**Workers** – for the purposed of this guideline these are staff, students (including those undertaking work experience, placements and practicum), volunteers, contractors, subcontractors, outworkers, apprentices and trainees.

**Workplace Inspection** – inspection of the workplace to identify any health and safety hazards, review existing controls and implement new controls as required.

1. **ROLES AND RESPONSIBILITIES**

**Audit, Risk and Compliance**: is responsible of assessing for compliance with the level of workplace inspections carried out when relevant to an Internal Audit.

**Audit Endorser:** a role in GSafe assigned to Head of Element or delegate to confirm that the audit and associated tasks are finalised.

**Corrective Actions Coordinator:** a role in GSafe assigned to a person responsible for completing the corrective action plan and assigning tasks. This person should be someone associated with the work area, who has the authority to interpret recommendations and assign appropriate resources, e.g. Laboratory Manager.

**Groups and/or Elements:** are responsible for managing, undertaking and/or ensuring inspections of the workplaces within their Group/Element are conducted on an annual basis and associated action items completed. It is the responsibility of the Element Head or delegate, to determine how to manage workplace inspections and allocate resources. Usually a laboratory manager, technical officer, researcher, or an administration officer is assigned this responsibility.

**Health, Safety and Wellbeing (HSW):** is responsible for conducting intermittent inspections of workplaces to verify the quality of Group/Element inspections or in response to an incident. Upon request, HSW advisors may also provide guidance and support to assist Groups and Elements with workplace inspections. In addition, HSW independently inspects a sample of high risk locations such as those containing chemicals, scheduled substances or radiation sources. HSW also provides and maintains inspection checklists and audit tools.

**Supervisor:** a person responsible for overseeing another staff member or student. In GSafe a supervisor is the line manager.

**Task Assignee:** a person who is responsible to complete a task assigned in GSafe.

**University Biosafety Committee (UBC):** is responsible for conducting workplace inspections of OGTR, DAWR certified spaces and physical containment laboratories. The inspections are conducted by the Health, Safety and Wellbeing Biosafety Advisors on behalf of the UBC.

1. **PROCEDURES**
   1. **Inspection Frequency**

Generally, all work areas including office areas must be inspected annually as a minimum. High risk workplaces such as workshops, laboratories, studios and clinics may require more frequent workplace inspections, for example following an incident or a non-compliance audit from a Regulator. A risk assessment may also require a workplace is inspected more frequently. Each Element is responsible for developing and implementing a workplace inspection schedule to ensure that all work areas assigned to the element are inspected.

* 1. **Inspection Team**

The size of the workplace, activities conducted, number of employees and potential hazards present will determine the size and composition of the inspection team. It is the responsibility of the Element to assign people to conduct workplace inspections. It is recommended that the inspection team includes people who are familiar with the workplace and the potential hazards that may be present. Engaging employees of the workplace in the inspection is also important as they are the most familiar with the workplace and work practices.

* 1. **Prior to the Inspection**

A date and time to conduct the workplace inspection should be arranged and they can be scheduled in the GSafe Audit Register, if assistance is required contact [safety@griffith.edu.au](mailto:safety@griffith.edu.au) for further advice. It is preferable to complete the workplace inspection when the workplace is fully operational. The scope of the inspection should be determined including any equipment/plant or other exclusions and the roles and responsibilities of the inspection team be determined. The inspection team should also familiarise themselves with previous workplace inspection reports for the workplace and any hazards identified and recommended corrective action requests.

* 1. **Workplace Inspection Checklist`**

A number of pre-prepared workplace inspection checklists are available on the Health, Safety and Wellbeing [website](https://www.griffith.edu.au/student-staff/health-safety-wellbeing/risk-management/inspections) and in the GSafe Audit Register. Alternative inspection tools or checklists may be used, the outcomes should be recorded in the GSafe Audit Register. The workplace inspection checklist selected should be appropriate for the workplace to be inspected.

* 1. **Conducting the Workplace Inspection**

If the inspection team are not familiar with the workplace, an induction should be provided prior to entering the workplace. All personal protective equipment (PPE) requirements of the workplace must be complied with during the inspection. Using the inspection checklist, the inspection team should systematically work through the workplace noting any non-compliance and hazards. Control measures implemented as a result of hazards identified during the previous workplace inspection should be reviewed to ensure they have been actioned and remain effective. If a hazard is identified that poses an immediate risk to health and safety, the inspection team should notify the workplace supervisor immediately.

* 1. **Reporting and Corrective Action Requests**

On conclusion of the inspection, the findings should be entered into the GSafe Audit Register. A corrective actions co-ordinator, audit approver and audit endorser should be assigned. The audit approver will normally be the supervisor or person responsible for the location and the audit endorser is usually the head of Element, senior manager or their delegate.

For each section of the checklist where non-conformities are observed, the findings, evidence and recommendations must be entered. On submission of the audit, the corrective actions co-ordinator is notified and required to respond to the recommendations proposed based on the hazards identified during the inspection. A date and person responsible is to be assigned for each action item task. Persons responsible will be notified by a workflow email of tasks assigned to them. If tasks are not completed by the required date, the workflow will automatically be escalated to their supervisor. The Element is responsible for ensuring that corrective action plans are completed and corrective actions implemented. Once corrective actions have been completed, actioned or implemented, the task is to be marked as “complete” in the GSafe audit. On completion of all corrective action requests, the audit endorser will be asked to endorse and close the audit.

* 1. **Resources**

Each Group/Element is responsible for assigning the resources and funding to rectify action items. In situations where resources are unable to be provided, the issue must be escalated to senior management for consideration.

* 1. **Record Keeping**

Records of the workplace inspection, hazards identified and corrective actions should be recorded in GSafe wherever possible. Inspections are to be recorded in the Audit Register, unless the inspection is in response to an incident then it can be included as part of the incident report.

* 1. **Workplaces External to the University**

Workers or other relevant persons may be required to work at workplaces external to Griffith University. For example, academic staff visiting collaborators laboratories or students on placement. It is the responsibility of the external organisation to ensure workplace inspections are conducted and any risks to health and safety are identified and control measures put in place. Workers or other relevant persons working external to Griffith University should complete workplace inductions before commencing work. The [Work Integrated Learning at Griffith](http://policies.griffith.edu.au/pdf/Work%20Integrated%20Learning%20at%20Griffith.pdf) policy outlines the selection requirements for host organisation including a work site evaluation.