

Management of Corrective Actions

1 Purpose:

This document summarises the processes used for corrective actions in accordance with the requirements of the AS/NZS 4801:2001 to ensure that any health and safety non-conformance is addresses as soon as possible. It defines who has responsibility and authority for ensuring that any incidence or non-conformance is addresses and that appropriate corrective action is taken in line with the University H&S Management System.

Preventive and corrective actions can be identified from inspections and testing, audits, hazard and incident reporting and other reviews. All corrective actions identified are to be recorded into the Vault system, with individual's allocated responsibility and time frame for completion of the action.

2 Definitions:

Observation Evidence of non-conformance which is deemed not to be a systemic failure of the management system as evidenced by the general level of conformance but which needs to be addressed.

Enter into Vault as corrective action completed.

Non-conformance A significant deviation from work standards, practices, procedures, regulations management system performance etc., either in a number of occurrences or in seriousness. Individual observations that are not addressed within a given time scale. A significant number of single observations can lead to a formal non-compliance.

Enter into vault. Generate reports for HOD/Sector Manager/DLM as appropriate.

Major non-conformance A situation that requires immediate corrective action due to a situation which poses imminent dangers, a significant breach in legislation, previously identified significant non-conformances that has not been addresses or has been inadequately addressed.

Entered into Vault. Generate reports and escalate to HOD/Sector Manger/DLM and PVC.

Corrective actions Action taken to eliminate the cause of an identified non-conformance or other undesired situation.

Recorded in Vault

3 Responsibilities

Vice Chancellor Ultimate responsibility for H&S rests with Council who has delegated authority of compliance to the Vice Chancellor and where a major non-conformance has not been addresses, following the escalation process described in this procedure, the VC will make direct contact with the PVC or COO to ensure that appropriate action is taken.

Deputy Vice Chancellors Where a major non-compliance has not been appropriately or adequately addresses it is the responsibility of DVC to gain assurance from the relevant PVC or COO that the non-conformance will be addressed within a prescribed timeframe.

Head, H&S Compliance Is responsible for ensuring that senior managers are aware of their responsibilities with regard to addressing non-conformance and for monitoring progress against agreed action plans. The H&SC Team will monitor the corrective actions status on Vault and follow up on outstanding corrective actions as per the escalation procedure.

HODS/Managers Have a general responsibility to ensure compliance with all H&S obligations and are accountable to the PVC, COO or Director for the discharge of this duty. Within the terms of this procedure they are responsible for ensuring that incidences of non-conformance in their area are addresses as soon as reasonably practicable and to an appropriate timescale based on the level of risk. HODs/Managers are personally responsible for the coordination of response for any major non-conformance.

DHSOs/Safety Officers Are responsible for recording of a corrective action in Vault and monitoring to corrective action status. This includes generating reports for HODS/Managers on corrective action status and escalating as appropriate. Any major non-conformance identified by a DHSO or safety office is to be notified directly to the Head, H&SC Team and HOD/Manager.

4 Guidance on the definitions of Observation, non-conformance, Major non-conformance

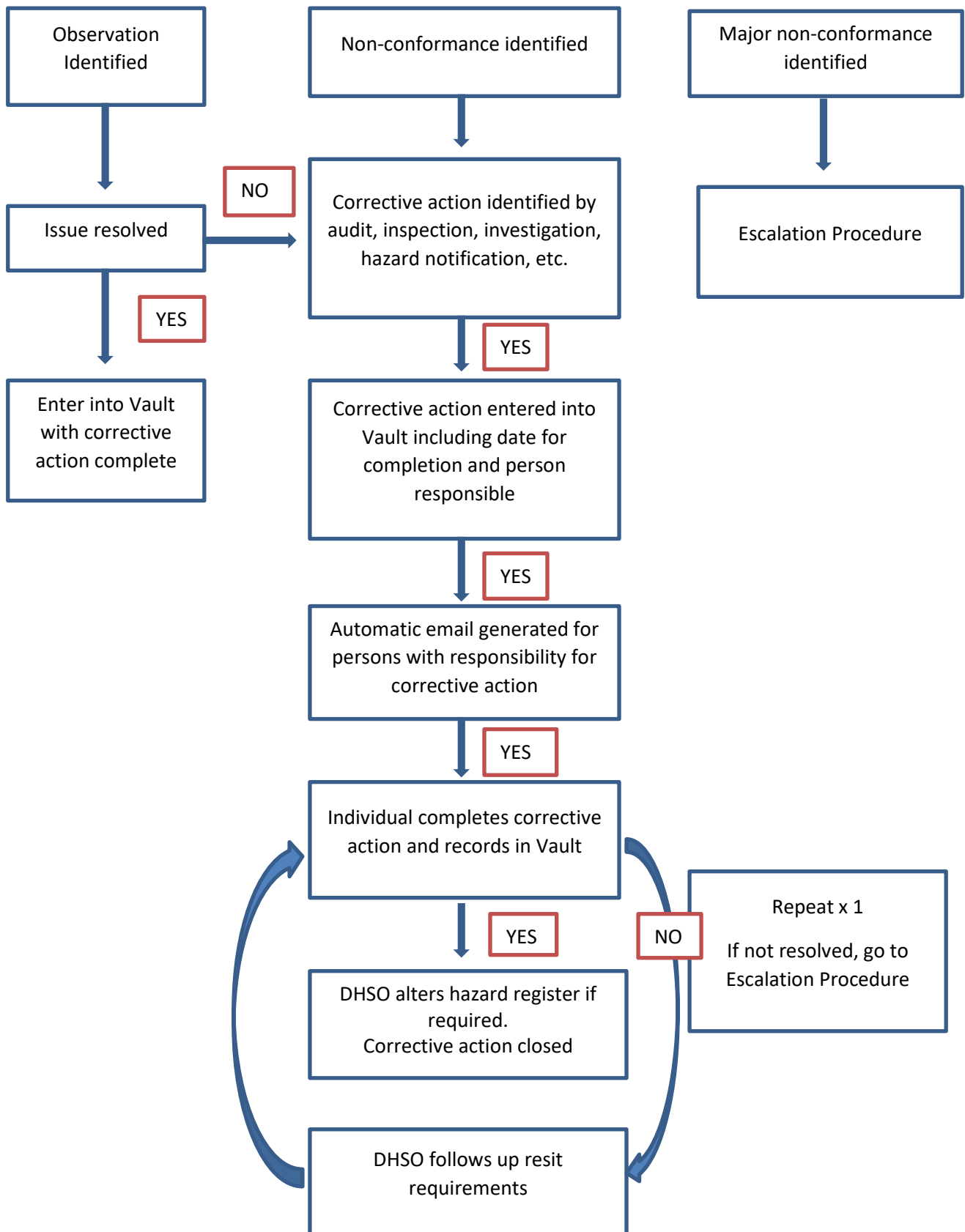
Examples of what might constitute an observation, a non-conformance or a major non-conformance are given in the table below. Each case will need to be assessed on the basis of the level of risk and significant of the breach and therefore these examples are given as a guide only. It will be a matter for the initiator of the issue to assess the actual classification based on their judgement. Where support or advice is required, contact the H&SC Team.

The examples used are:

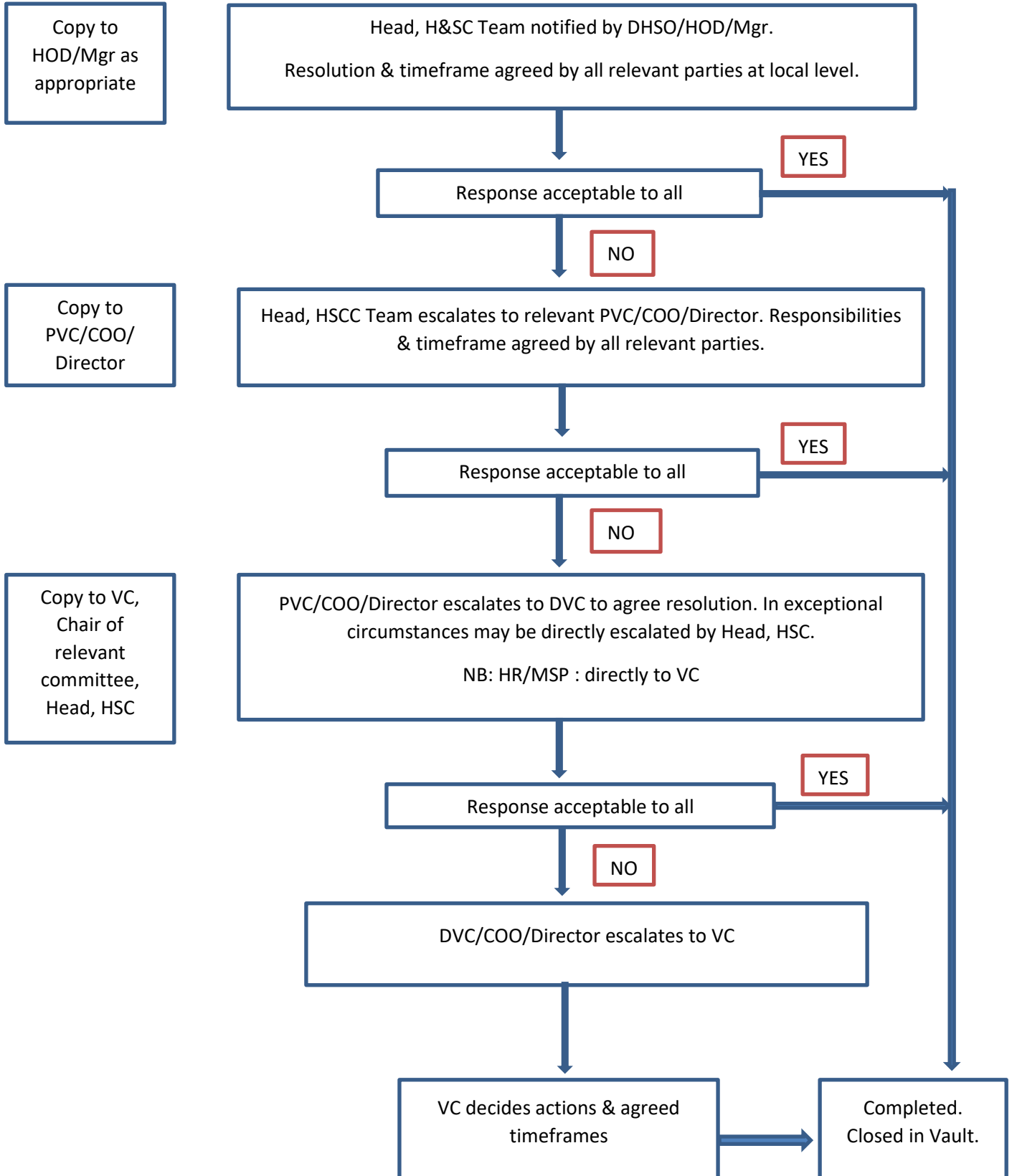
- a) Risk assessment: undertaking risk assessment for various activities is a fundamental requirement of the OHSMS. Absence of a risk assessment may constitute a significant breach of policy (and legislation).
- b) Inspections of the workplace: checking that controls are in place and working is a legal requirement and another core part of the OHSMS.
- c) Portable electrical equipment testing is a legal requirement and is a control measure for a hazard with the potential for serious harm (i.e.: electricity).


<p>Observation:</p>	<p>Example:</p> <ul style="list-style-type: none"> a) Risk assessments – evidence that a small number of risk assessment are not present or not complete but that the majority are and that they appear suitable and sufficient. b) Workplace inspections – evidence that a small number of areas have not been inspected in accordance with the audit/inspection schedule but that the majority have been and inspections are effective. c) Portable equipment testing – one or two items are missed during the cycle of testing but in general the testing is done.
<p>Non-conformance</p>	<p>Example:</p> <ul style="list-style-type: none"> a) Risk assessment – significant number of risk assessments are not in place or deemed not suitable or sufficient b) Workplace inspections – significant number of areas are not inspected as per audit/inspection schedule c) Portable equipment testing – significant number of appliances not tested or outside their re-test date.
<p>Major non-conformance</p>	<p>Example:</p> <ul style="list-style-type: none"> a) Major breach of the law b) Situations that pose imminent danger <p>Little or no evidence of the management of:</p> <ul style="list-style-type: none"> a) Risk assessment – no or very few suitable risk assessments evident b) Workplace inspections – no programme for workplace inspections in place c) Portable equipment testing – no evidence of testing and inspection of portable electrical appliance or a system for managing this process.

5 Corrective Action Escalation Procedure



6 Escalation Procedure for major non-conformance or failure to resolve through normal corrective action procedure



 UNIVERSITY OTAGO <small>Te Whare Wānanga o Ōtago NEW ZEALAND</small>	Title: Management of Corrective Actions Person Responsible: Head, Health and Safety Compliance	
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7 Amendments

Amendment	Change	Date	Who	Version	Approval
1	Updated document to document control	12-10-17	C Davies	D1	