Document and Records Management Procedure

Procedure Owner: Director Human Resources Services Centre

Keywords: 1) Document  2) Records  3) Health and Safety

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1. INTENT

This procedure provides the minimum requirements to manage health and safety (HS) documents required by the Health and Safety Management System (HSMS). Its purpose is to systematically manage and control the creation, review, approval, storage, retrieval, modification and disposal of HS documents, across the University.

2. ORGANISATIONAL SCOPE

All ECU workers
3. DEFINITIONS

<table>
<thead>
<tr>
<th>TERM</th>
<th>DEFINITION</th>
</tr>
</thead>
<tbody>
<tr>
<td>Document</td>
<td>Information and its supporting medium, used for both live or work in progress instructions and may be changed and updated over time. The medium may be paper, magnetic, electronic or optical computer disc, photographic or a combination thereof.</td>
</tr>
<tr>
<td>Document Approver</td>
<td>Person ultimately accountable for ensuring the content is complete, current, accurate and fit for purpose. This person is also accountable for ensuring documents conform to the stated work practices and guidance notes and for the implementation of the document and processes it describes.</td>
</tr>
<tr>
<td>Document Owner</td>
<td>Person owning the information contained in a document, ensuring it is current and relevant. This person is also responsible for availability of the document and its release into the business.</td>
</tr>
<tr>
<td>ECU</td>
<td>Edith Cowan University</td>
</tr>
<tr>
<td>Health and Safety (HS)</td>
<td>High value / high risk HS documents, records and data, in any format, created or received by the University in the transaction of business that are essential to support HS business activities, provide evidence of HS business decisions and transactions and demonstrate compliance with internal, legislative and external certification requirements. HS documents require a formal, authorised and auditable review and approval process prior to being published and having authority within the University. At any time, only the latest approved version of HS documents are valid. HS documents are considered University Business Records. Refer to the Records Management section on the Office of Governance Services webpage for further information on University Business Records.</td>
</tr>
<tr>
<td>Hewitt Packard Record</td>
<td>The University’s electronic document and records management system (EDRMS) previously known as TRIM or TERMS</td>
</tr>
<tr>
<td>Management (HPRM)</td>
<td></td>
</tr>
<tr>
<td>Metadata (HPRM)</td>
<td>Information about a document that describes its context and uniquely identifies it. Within HPRM, metadata provides additional information about the document to aid in easy retrieval. Also known as ‘properties’ or ‘attributes’.</td>
</tr>
<tr>
<td>Risk</td>
<td>Potential events and consequences that will have an impact (positive or negative) on how the University achieves its strategic priorities.</td>
</tr>
<tr>
<td>Safety and Employment</td>
<td>Refers to the Safety and Employment Relations team, previously Occupational Safety and Health, as part of the Human Resources Services Centre</td>
</tr>
<tr>
<td>Relations (SER)</td>
<td></td>
</tr>
<tr>
<td>Template</td>
<td>A proforma to assist the standardisation of documentation</td>
</tr>
</tbody>
</table>
Worker(s) | A person is a worker if the person carries out work in any capacity for ECU, including work as:
---|---
a) an employee
b) a contractor or subcontractor;
c) an employee of a contractor or subcontractor;
d) an employee of a labour hire company who has been assigned to work in the person's business or undertaking; or
e) an apprentice or trainee;
f) a student gaining work experience;
g) a volunteer.

4. **GENERAL REQUIREMENTS**

4.1 **HS Document and Record Control**

All HS documents should be controlled using the HPRM document and record management system with the exception of:

- HS documents stored in the maintenance management system (QFM)
- Drawings related to HS requirements i.e. electrical drawings, emergency maps stored in the CAD and Project Records databases
- Contract Agreement Management System (CAMS)

These HS documents and records remain subject to the same requirements as the HS documents controlled using the HPRM document and record management system.

Policies are managed in both the Policy database and HPRM. Refer to the Policy and Legislation section of the Office of Governance Services webpage for further information on Policies.

HS documents should be accessible to workers, visitors and students based on appropriate access authorisations.

4.2 **HS Document and Record Hierarchy and Naming Convention**

The University’s HS documents should conform to the document and record hierarchy depicted in Figure 1 and the definition, intent, authorisation level and naming convention provided in Appendix A.

HS Policies shall comply with the requirements of the University Policy Framework and any supporting documentation.
4.3 Validity
At all times, users should only utilise the most current, approved version of the document.

4.4 School/Service Centre HS Documents
Each School/Service Centre’s HS documents should either comply with the requirements of this procedure or a process should be developed that meets the intent of and aligns with the requirements of this procedure.

Each School/Service Centre should have a process for communicating the release of and implementing the requirements of HS documents to relevant persons. The release and implementation should include ensuring hard copies of HS documentation are replaced with the new version.

Each School/Service Centre should provide instruction on how workers can access their local HS documentation, this should occur as part of the area induction.
5. HS DOCUMENT DEVELOPMENT AND AMENDMENT

HS documents should be developed and amended in line with the process described below and illustrated in Flowchart 1.

Flowchart 1. HS Document Development Process

5.1. Step 1: Development

All HS documents should have an accountable role assigned as an owner. The document owner may not necessarily be the document creator, who developed / captured the original document. The Organisational role of the Document Owner should be recorded on the Document.

All HS documentation should conform to the document hierarchy outlined in Figure 1 above. Titles used for HS documents should follow the naming convention examples provided in Appendix A and the Corporate Style Guide available from the Marketing and Communications Services website.

Document creators should ensure HS documents align with higher level documents and do not duplicate existing documents. Where indicated in the examples provided in Appendix A, HS documents should be created using the appropriate HS document template and the Document Approver assigned.

The review period of the document, as determined according to section 6, should be assigned to and recorded on the document.

5.2. Step 2: Consultation and Review of Draft Document

Review of the document should typically be a collaborative process involving key stakeholders affected by the document. This may involve review by relevant Health and Safety Consultative Committees as outlined in the University Health and Safety Consultative Committees Procedure.
Documents being reviewed and / or amended should not be provided to general readers, they should only be provided to workers involved in the review process.

The document creator and owner should ensure amendments proposed by stakeholders are incorporated where relevant and appropriate and the document is formatted correctly before approval.

Prior to submitting the document for approval, the Document owner should ensure:

- A record of the proposed amendments to the HS document is kept and referenced within the HPRM folders and in line with the requirements of the HPRM process.
- The document meets the requirements of this procedure.

5.3. Step 3: Approval

All HS documents should be approved by a relevant and appropriately competent person as per examples provided in Appendix A, or by the most senior position of the organisational structure impacted by the document and in accordance with any required delegations.

A record of the approval should be maintained within the HPRM and the Organisational role of the Document approver recorded on the document.

Once approved, the new or amended document should be made available to authorised readers as per section 5.5.

5.4. Step 4: Document and Records Management

The approved HS document should be controlled within the University's HPRM system by the document creator. HS documents should be controlled in line with record keeping procedures and HPRM information sheets available from Record Keeping and HPRM sections of the Office of Governance Services webpage.
5.5. Step 5: Release and Implementation

Once approved and controlled, where required the document should be published and linked to the relevant website, by a person nominated and that is trained in Web Content Authoring in the ECU WebCMS.

Hard copies of previous versions should be replaced and the release of the current version communicated to relevant stakeholders.

Policies should be forwarded to the Office of Governance Services for processing and inclusion on the ECU policy database.

6. HS DOCUMENT AND RECORD REVIEW

6.1. Periodic Review

HS documents and associated records that support the HSMS should be reviewed every 3 years, following HSMS review or where improvements/changes are identified.

Where HS documentation or records are indicated in HS risk registers as an administrative control to risks, these documents should be reviewed annually during the risk register review. The review should be conducted by the local HS committee and supported by the SER team when required.

All other HS documents should be reviewed according to Appendix A unless otherwise determined by:

- An identified improvement or change
- An obligation to undertake periodic review based on the importance of the document, statutory obligation and/or the need to remain relevant to their function
- An incident occurring with a subsequent review of documented controls
- A change in legislation or operation requirements
- New equipment or technology being introduced
- A change in reference documentation used in the development of a controlled document.

6.2. Change

Any changes to the minimum requirement, process, equipment, responsibilities and/or underlying legislative requirements contained within a HS document and associated records should initiate the review, approval, document control and implementation processes outlined in section 4 of this procedure.
7. HS DOCUMENT RESPONSIBILITIES

7.1. Document Owners

Document Owners are usually based on the appropriate organisational hierarchy. The document owner should ensure;

- A document creator and approver are assigned to the document, with the necessary ability to manage the document development process as depicted in Flowchart 1
- Periodic review of HS documents they own is co-ordinated and facilitated
- The HS document conforms to the requirements of this procedure
- The processes described in the document are implemented

7.2. Document Creator

The document creator should ensure:

- Compliance of all HS documents to the requirements of this procedure
- HS documents are kept within the HPRM system
- All HS documents are:
  o legible
  o containing correct style, formatting, grammar, language and spelling as described in the ECU Corporate Style Guide
  o uniquely identified, with this alpha-numeric identification appearing on the documents as well as in its electronic metadata (HPRM)
  o meets the requirements of the Policy process if the document is a Policy
  o assigned appropriate metadata where required
  o appropriately owned and the correct security permissions applied.
- Approved HS documents are published to the appropriate University website as required
- A record is kept of all communication regarding approval and release of HS documents within the relevant HPRM folder

7.3. Document Approver

The delegated approver should be responsible for:

- The final quality check of the HS document, ensuring it is complete, accurate and fit for purpose.

8. RETENTION AND DISPOSAL

HS documents required by the HSMS have varying rules for how long they should be retained and how they can be disposed of.

These rules are contained in the following retention and disposal schedules, accessible on the Records Disposal section of the Office of Governance Services webpage.

- Western Australian University sector Disposal Authority
- General Disposal Authority for State Government Information

All workers shall follow the instructions in the schedules.
9. TRAINING

All workers are required to complete Record Keeping Awareness training and HPRM training as outlined in the Role Based Development Framework.

Workers nominated to publish and link documents to the relevant website are required to complete Web Content Authoring in the ECU WebCMS training available via the Staff Development Portal.

All workers should be provided instruction on how they can access HS documentation, this is usually provided in the HS induction and area orientations/local inductions.

10. APPENDICES

- Appendix A – HS Documentation Definitions, Authorisations and Naming Conventions Examples

11. RELATED DOCUMENTS

This procedure is supported by the following documents, available from the Work Health and Safety page of the HR Service Centre website:

- HS Guideline template
- HS Procedure template
- HS Form/Template template
- HS Consultative Committees Procedure.

This procedure is supported by the following documents:
Available from the Policy and Legislation Directory page of the Office of Governance Services website:

- Policy Framework
- Policy Template
- Policy Frequently Asked Questions

Available from the Recordkeeping page of the Office of Governance Services website:

- Records Management Policy
- Western Australian University Sector Disposal Authority
- General Disposal Authority for State Government Information
- HPRM Information Sheets
- File Classification
- Recordkeeping Manual
- Recordkeeping Training

Available from the Marketing and Communications Services website:

- ECU Corporate Style Guide
Australian Standards and Health and Safety Legislation available online via the ECU Library database:

- AS/NZS 4804: Occupational health and safety management systems - General guidelines on principles, systems and supporting techniques.
- AS/NZS 4801: Occupational health & safety management systems;
- AS/NZS ISO 9001: Quality management systems;
- OHSAS 18001:2007 Occupational health and safety management systems – Requirements
- OHSAS 18002:2000 Occupational health and safety management systems – Guidelines for the implementation of OHSAS:18001
- Occupational Health and Safety Act 1984
- Occupational Health and Safety Regulations 1996

12. CONTACT INFORMATION

For queries relating to this document please contact:

<table>
<thead>
<tr>
<th>Procedure Owner</th>
<th>Director Human Resources Service Centre</th>
</tr>
</thead>
<tbody>
<tr>
<td>All Enquiries Contact</td>
<td>Safety and Employment Relations Team</td>
</tr>
<tr>
<td>Telephone</td>
<td>08 6304 2302</td>
</tr>
<tr>
<td>Email address</td>
<td><a href="mailto:osh@ecu.edu.au">osh@ecu.edu.au</a></td>
</tr>
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13. APPROVAL HISTORY

<table>
<thead>
<tr>
<th>Procedure Approved by:</th>
<th>Director Human Resources Service Centre</th>
</tr>
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<tbody>
<tr>
<td>Date Procedure First Approved:</td>
<td>June 2015</td>
</tr>
<tr>
<td>Date last modified:</td>
<td>February 2016</td>
</tr>
<tr>
<td>Revision History:</td>
<td>V01 Procedure first approved document</td>
</tr>
<tr>
<td></td>
<td>V01.1 Minor update document control requirements</td>
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<tr>
<td>Next Revision Due:</td>
<td>February 2019</td>
</tr>
<tr>
<td>HPRM File Reference</td>
<td>SUB/65262</td>
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### Appendix A HS Documentation Definitions, Authorisations and Naming Conventions Examples

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<thead>
<tr>
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<tbody>
<tr>
<td><strong>Definition:</strong></td>
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<td></td>
</tr>
<tr>
<td>A concise, formal statement which prescribes how members of the University are to act in a particular area of its operation. Policies have University-wide application.</td>
<td>A statement that provides guidance on how University policies will be implemented or applied.</td>
<td>Procedure - A statement that outlines the established method for implementing a particular University Policy or process. Procedures are developed at an operational level and generally contain considerable detail which may require regular updating.</td>
<td>Blank or template records of information used in day-to-day events of the operation. Can include work permits, registers, access applications and other administrative records</td>
</tr>
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### Example documents and intent

<table>
<thead>
<tr>
<th>HS Policy</th>
<th>Incident Reporting and Investigation Guideline</th>
<th>University HS Consultative Committees Procedure, Hazard Resolution Procedure</th>
<th>Work permits, registers, plans access applications and other administrative records</th>
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</thead>
<tbody>
<tr>
<td>HS Policy - Document that states ECU’s intentions, commitment and principles of health and safety.</td>
<td>Exercising Due Diligence for Officers Guideline</td>
<td>Training - HS Induction, HS for Managers and Supervisors</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Documents that detail the minimum requirements and associated accountabilities to meet ECU HS requirements.</td>
<td>Documents that expands on the minimum requirements of the associated guideline and provides detailed process steps on how requirements are achieved or met.</td>
<td></td>
</tr>
</tbody>
</table>

### Authors or contributors (Document Creator)

<table>
<thead>
<tr>
<th>University HS committee nominated Health and Safety specialist advice as required.</th>
<th>Local WHS committees nominated Health and Safety specialist advice as required.</th>
<th>Relevant local WHS committees, including nominated specialist advice as required.</th>
<th>Relevant local WHS committees, including nominated specialist advice as required.</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Custodian level (Document Owner)</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Manager/Associate Dean</td>
<td>Manager/Associate Dean</td>
<td>Manager/Associate Dean</td>
<td>Manager/Associate Dean</td>
</tr>
<tr>
<td><strong>Authorisation level (Document Approver)</strong></td>
<td></td>
<td></td>
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</tr>
<tr>
<td>Dean/Director</td>
<td>Dean/Director</td>
<td>Dean/Director</td>
<td>Dean/Director</td>
</tr>
<tr>
<td><strong>Accountabilities specified</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Accountabilities/Responsibilities are outlined in the Policy.</td>
<td>Yes</td>
<td>Yes</td>
<td>Dependent on intent</td>
</tr>
<tr>
<td><strong>Audience</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Individuals as defined by the Organisational Scope of Policies</td>
<td>Relevant local WHS committees, including nominated specialist advice as required.</td>
<td>All ECU workers and may be relevant to visitors and students</td>
<td>All ECU workers and may be relevant to visitors and students</td>
</tr>
<tr>
<td>Individuals/groups as defined in the scope of the Guideline</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Document naming convention &amp; template (where applicable)</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Review Period</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Three years after the date of approval or the latest date of amendment to the policy; or whenever there is a significant relevant change of circumstances.</td>
<td>Minimum every 3 years or as outlined in section 6 of this procedure</td>
<td>When used or as outlined in section 6 of this procedure</td>
<td>When used or as outlined in section 6 of this procedure</td>
</tr>
</tbody>
</table>