MONASH University

Provost Portfolio Occupational Health & Safety Plan 2016/17

Faculty/Division: …Provost Portfolio / ……

	Safety focus area/program	Expected outcomes and benefits	Steps/actions in the process	Measures	Responsible Persons/ Team	How can OH&S Team support you?	Expected completion date
	What are the risk areas that you want to focus on and why?	Consider: * What is to be achieved * What does success look like * Process * Stakeholder engagement * Resources required * Timeframes for implementation * Quick wins - and longer term objectives	Can be sequential or subsequent	How are the expected outcomes/steps going to be to be measured?	Who is assigned responsibility for each step?		
1	**Chemical Safety*** *Only for Laboratory areas! Activities employing chemicals are commonly of a higher risk requiring multiple management tools and continuous review. This is an opportunity to review the currency of processes and chemicals used	**1. Reduce the hazards associated with the use of chemicals throughout laboratories.**	1. Review the chemicals and chemical wastes stored and used in laboratories and update the local Chemwatch manifest.	SOs report completion of chemical audit and update Chemwatch, review storage areas for compliance/volumes/placarding/signage to committee.	SO / Lab Managers	Provide Chemwatch support as required	
		2. Identify and eliminate areas of non-compliance with Monash OHS storage, use and waste disposal procedures.	2. Portfolio working group to develop a system for identifying and managing approved chemical processes in laboratory environments.	Develop a process (documented) for reviewing new chemical activities in the lab and roll out.	WG1	Participate in WG	
			3. Portfolio working group to develop new labelling systems for in use chemicals and chemical waste compliant with the GHS.	(a) Labelling system developed through a working group.	WG2	Participate in WG	
				(b) SO reports labelling system roll out to committee.	SO	GHS system advice	
		3. Eliminate chemicals that are no longer used and reduce the number and volume on hand.	4. Ensure the use of hazardous chemicals is risk assessed.	SO reports compliance to committee.	SO / Lab Managers		
			5. Identify the use of all chemicals in the Chemwatch manifest and dispose of chemicals that have no identified use.	SO reports number of disposal of out-of-use chemicals to committee.	SO / Lab Managers		
2	**Emergency Response** All areas must have operational emergency response procedures (e.g. evacuation) to ensure a coordinated response to incidents is possible.	**1. Portfolio units are better prepared for emergency situations.**	1. Establish an Emergency Committee (EC) for shared buildings.	Committee established for shared building.	SO / OHS Consultant	Liase with stakeholders	
			2. Ensure that each buiiding has sufficient floor wardens, a Building Warden and a Deputy Building Warden.	List of appointed building and floor wardens generated	SO / EC	Assist with stakeholder liaising	
		2. Weaknesses in the local emergency response processes are eliminated (especially with shared occupancy buildings).	3. Ensure that each building has sufficient first aid personnel and a first aid coordinator (FAC) as determined by a first aid risk assessment.	(Building First aid assessment completed and personnel appointed.	SO / EC	Advice from OHS nurse if required	
			4. Ensure that each building has sufficient first aid kits and other first aid equipment (defibrillator, additional first aid kit items such as cold packs), as determined by a first aid risk assessment.	FAC confirms additional equipment purchased.	FAC	Advice from OHS nurse if required	
3	**Induction and Training** The management of training processes and records for compliance is difficult given the diversity of users, databases and content.	**1. Induction processes are improved.**	1. Local working groups (WG3) to review induction documentation to ensure it is up to date and tailored to each target group / work unit.	Revised / tailored induction documents implemented.	SO / WG3	-	
			2. Identify any additional induction documents that are required for high risk areas / after hours work.	Additional induction documents developed and implemented.	SO / WG3	-	
		2. OHS training is easier to access for staff, students and visitors.	3. Liase with OHS and SDU to identify and develop additional online courses as required.	Additional online courses implemented.	SO / OHS	Liaise with SDU for new content	
			4. Provide a process for visitors to access online courses	Visitor access implemented.	OHS / SDU / E-Solutions	Lead the process	
		3. Compliance monitoring processes are improved.	5. Develop a simple training compliance reporting tool	Tool available to all SOs.	OHS / SDU / E-Solutions	Lead the process	
4	**Ergonomics** Awareness of ergonomic factors should be updated and resources reviewed.	**1. Ergonomic factors are identified and assessed.**	1. Raise awareness (e.g. posters, nominate Ergonomic Champion etc) about ergonomics in the office area.	Create Marketing Collateral, Call for volunteers etc.	SO	Provide EC information Assist with training	
			2. Train at least 33% of staff in ergonomic assessments of workstations and home office environments. SO (OR EC) to arrange / conduct training	List of trained personnel generated.	SO/ EC	if a unit has no EC volunteers, assist with training	
5	**Health and Wellbeing** Increase awareness around the program for staff wellbeing	**1. Improved marketing of Health and Wellbeing programs throughout the Portfolio.**	1. Increase staff awareness through active advertising (e.g. Recruit a wellbeing champion WC or add an agenda item to staff meetings etc).	Call for volunteers.	SO	Provide WC information	

Director/Dean signature:

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Date: ……

OHS Consultant/Advisor signature:

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Date: ……

Unit Logo