### General Information

<table>
<thead>
<tr>
<th>Name of Entity:</th>
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<tbody>
<tr>
<td>Classification Code:</td>
<td>Registration Number:</td>
</tr>
<tr>
<td>Type of Business Activities:</td>
<td>Percentage of time engaged in office based activities:</td>
</tr>
</tbody>
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<table>
<thead>
<tr>
<th>OSHMS Development:</th>
<th>Name of Internal Manager Leading OSHMS Development:</th>
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<tbody>
<tr>
<td>Developed by Internal OSH Resources:</td>
<td></td>
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<tr>
<td>Developed by Registered OSH Consultancy:</td>
<td>Consultancy Office Name:</td>
</tr>
<tr>
<td>Registration Certificate Number:</td>
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<thead>
<tr>
<th>Date(s) of OSHMS Document Submission:</th>
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<tbody>
<tr>
<td>First Submission Date</td>
<td>Subsequent Submission Date</td>
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<thead>
<tr>
<th>OSHMS Information</th>
<th>List where system addresses the specific requirement.</th>
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</table>

#### 1.0 Submittals and Report Organization

1.1 Completed Form C Submitted with system

1.2 Clearly defined document structure – easy to navigate

1.3 Description of the type of business activities undertaken

1.4 Defines scope of the OSHMS

#### 2.0 OSH Policy

2.1 Occupational Safety and Health Policy (OSH Policy)

2.2 Authorized / Signed by Top Management

2.3 Is appropriate to the nature and scale of Entity’s Risks

2.4 Policy includes commitment to:
   - prevention of injury and illness
   - enhancement of employee health and wellbeing
   - Identification and management of OSH risks
   - legal compliance
   - setting, monitoring and reviewing OSH targets and objectives
   - provision of appropriate OSH resources
   - continual improvement

2.5 Evidence of commitment for communication to all stakeholders

2.6 Ensures OSH Policy is reviewed periodically

#### 3.0 Roles and Responsibilities

3.1 Roles and Responsibilities procedure developed

3.2 Ensures top management is ultimately responsible for OSH and the OSHMS

3.3 Member of Top Management appointed as OSH Management Responsibility

3.4 Ensures appropriate Competent OSH resources to implementing and maintain the OSH MS - if classified as high risk the entity must employ as a minimum one Grade A practitioner as defined by OSHAD-SF Mechanism 8.0

3.5 Establishes clearly defined and documented OSH roles, responsibilities and delegating authorities for each role within the entity

3.6 Ensures effective communication of roles & responsibilities to all employees

3.7 Establishes the means to measure employee conformance against their defined roles, responsibilities and accountabilities
### 4.0 Targets and Objectives

| 4.1 | OSH Targets and Objectives procedure developed |
| 4.2 | Ensures documented & effectively communicated OSH targets & objectives |
| 4.3 | Ensures targets and objectives, where practicable shall be measureable |
| 4.4 | Incorporates requirements of:  
| | • the entity OSH policy  
| | • legal requirements  
| | • Risk Management programs  
| | • relevant Competent Authorities targets and objectives  
| | • OSHAD-SF mandatory key performance indicators, as defined in Mechanism 6.0 – OSH Performance Monitoring and Reporting |
| 4.5 | Includes program(s) for achieving the targets and objectives, that include at a minimum, the methods, timeframes, monitoring activities and responsibilities |
| 4.6 | Includes mechanisms to ensure that where targets and objectives are not met, corrective actions are developed and communicated to top management. |
| 4.7 | Ensures targets, objectives and program(s) are reviewed periodically |

### 5.0 Legal Compliance

| 5.1 | Legal compliance procedure developed |
| 5.2 | Ensures the means to identify and access relevant legal requirements |
| 5.3 | Includes mechanisms to ensure legal requirements are considered when developing OSH MS procedures, processes and programs. |
| 5.4 | Includes a means to evaluate compliance to all relevant legal requirements |
| 5.5 | Includes mechanisms to determine any changes to legal requirements that may affect the applicability of legal requirements |
| 5.6 | Includes a process to identify what legal information is required at different levels throughout the organization and how this will be communicated |
| 5.7 | Includes a documented legal register that contains the following as a minimum:  
| | • OSH Law / Regulation full title as gazetted  
| | • Applicable clause(s), Article(s) or references  
| | • Applicable process(s) / Activity impacted by the legal requirement  
| | • Internal OSH MS procedure(s) / Document(s) references to ensure compliance to the legal requirement  
| | • Compliance monitoring requirements |
| 5.8 | Includes an annual review of legal requirements |

### 6.0 Risk Management

| 6.1 | Risk management procedure developed |
| 6.2 | Ensures risk management is an integral part of management and embedded in the entity culture and practices |
| 6.3 | Ensures risk management shall be applicable to all phases of a project /development (from design to decommissioning) |
| 6.4 | Defines risk management methodologies and competencies |
| 6.5 | Is based on consultation with employees, contractors & other stakeholders |
| 6.6 | Incorporates the recognized steps of risk assessment, which include:  
| | • identify all OSH hazards in the workplace  
| | • assess the risks of these hazards  
| | • formulate a hazard management program to reduce the risk to an acceptable and as low as reasonably practicable (ALARP) level  
| | • review the program on a regular basis  
| | • incorporates a management of change process within the entity |
6.7 Procedure(s) address:
- routine & non-routine activities of all persons having access to the workplace
- supply chain and contractor undertakings
- human behavior (inc people with special needs and young persons)
- hazards outside the workplace capable of adversely affecting the safety and health of employees
- potential risk to persons not in the entity’s employment
- plant, equipment, substances and materials at the workplace
- Inclement weather
- the design or work areas, processes, plant, machinery, equipment, work organization and operating procedures

6.8 Ensures documentation & recording of the results of risk management activities

6.9 Incorporates the OSH Control Hierarchy

6.10 Completed an OSH impacts review of all products, activities and services

6.11 Appropriate Operational / Process Safety control measures developed, if applicable

6.12 Appropriate Safety Case control measures developed, if applicable

7.0 Contractor Management

7.1 Management of Contractors procedure developed

7.2 Incorporates the steps of the “Management of Contractors Process” – Element 03, As applicable

7.3 Includes specific ”construction work” processes & responsibilities – as per OSHAD-SF - CoP 53.0 – OSH Management during “Construction Work” – if applicable

8.0 Emergency Management

8.1 Emergency Response and Management program / procedures developed

8.2 Includes risk-based identification and response to potential emergency situations, including normal and abnormal conditions

8.3 Defines specific emergency response & management roles, responsibilities & resources

8.4 Appropriate risk-based emergency response and management plan(s), including:
- Fire management Plan
- Emergency Evacuation plan
- threat-specific
- facility specific
- appropriate support / functional plans

8.5 Specific plans developed to deal with appropriate emergencies and high-risk hazards. Includes:
- provision of appropriate resources (human, equipment, facilities, training)
- arrangements for external stakeholder communications and requirements
- arrangements for communications with local authorities & emergency services, if applicable

8.6 Ensures periodic emergency response and management tests and exercises

8.7 Ensures monitoring and review of plans and procedures annually

9.0 Specific Entity Standard Operating Procedures

9.1 Appropriate SOP’s developed

9.2 Addresses operations & activities that are associated with identified hazard(s) that require implementation of control measure(s) to manage risk(s)

9.3 Includes controls related to supply chains (purchase of goods, equipment & services)

9.4 Includes controls related to contactors and other visitors to the workplace

9.5 Includes stipulated operating criteria / instructions where their absence could lead to an increase in OSH risk(s)

10.0 Management of Change

10.1 Management of Change process developed
### 10.0 Changes

| 10.2 | Ensures that changes in organizational structure, personnel, documentation, processes/procedures does not inadvertently introduce new hazards or increased risk. |
| 10.3 | Analyzes changes in operational procedures or processes to identify any required changes in training, documentation or equipment. |
| 10.4 | Analyzes changes in location, equipment or operating conditions for potential hazards. |
| 10.5 | Ensures that all personnel are made aware of and understand any changes in requirements, procedures and applicable control measures. |

### 11.0 Training

| 11.1 | OSH Training procedure developed. |
| 11.2 | Appropriate compliance and reference to OSHAD-SF - *Mechanism 7.0 and 8.0*. |
| 11.3 | Appropriate monitoring and measuring of training results. |
| 11.4 | Identifying and evaluating OSH training needs (e.g., Training Needs Analysis and OSH Training Matrix), and providing appropriate OSH training including:  
- OSH Management System training  
- Competency requirements for identified roles or tasks  
- Risk Management requirements  
- Requirements of relevant operational control procedures  
- OSH roles and responsibilities  
- OSH emergency response and management  
- OSH inductions (generic and site-specific)  
- OSH consequences of non-conformance to specified procedures  
- relevant subject specific OSH training  
- specialized task-specific training. |
| 11.5 | Planning the implementation of the training:  
- learning aims and objectives  
- level of responsibility and competence  
- frequency and types of training  
- literacy, numeracy, language and other learning requirements  
- course selection / material development  
- trainer competency  
- assessment activities  
- training records  
- refresher training requirements. |
| 11.6 | Ensures review of OSH training program. |

### 12.0 Competency

| 12.1 | OSH Competency procedure developed. |
| 12.2 | Ensures that person(s) under its control performing tasks are competent. |
| 12.3 | Identifies and evaluates OSH competency requirements, including:  
- relevant OSH competencies  
- task-specific competencies  
- methods of assessing competencies  
- recording competencies; and  
- maintaining and improving competencies. |
| 12.4 | Ensures review of OSH competency program. |

### 13.0 Hazard, Near Miss, Incident Reporting and Investigation

| 13.1 | OSH Hazard, Near Miss, Incident Reporting & Investigation procedure(s) developed, in compliance with OSHAD-SF - *Mechanism 11 – Incident Notification, Investigation and Reporting*. |
## 13.2 OSH Incident Investigation Program

OSH Incident Investigation Program addresses at a minimum:

- record, investigate and analyze OSH incidents
- ensure investigations are performed by competent person(s) in consultation with relevant stakeholders
- ensure investigations are performed in a timely manner
- determine the root causes of OSH incidents
- identify opportunities for corrective and preventative actions
- effective communication of outcomes of investigations to relevant stakeholders

## 13.3 OSH Reporting Procedure

OSH Reporting Procedure addresses at a minimum:

- hierarchies, timetables and responsibilities for reporting
- internal OSH performance and incident reporting requirements
- external OSH performance and incident reporting requirements, including:
  - OSH Incidents to the SRA / CA as required
  - quarterly OSH performance to the SRA
  - annual third party external compliance audit results to the SRA / CA
  - requirements of Mechanism 6.0 – OSH Performance Monitoring and Reporting
  - other legal and regulatory reporting requirements
  - requirements outlined in CA permits / licenses / no objection certificate / etc
  - requirements outlined in approved OSH Plans and Studies
  - requirements outlined in relevant OSHAD-SF documents
- requirements outlined in approved OSH Plans and Studies
- requirements outlined in relevant OSHAD-SF documents

## 14.0 Communication and Consultation

### 14.1 Communication procedure developed, addressing:

- internal communication throughout the various levels of the entity
- communication with contractors and other visitors to the workplace
- relevant communication with external stakeholders
- development of an annual OSH performance report

### 14.2 Consultation procedure developed, addressing:

- appropriate OSH committee established
- appropriate consultation and participation of employees in OSH matters
- appropriate involvement in risk management activities
- appropriate involvement in OSH incident investigation
- involvement in the development and review of OSH policies and objectives
- structure of consultation committees and meetings
- consultation with contractors and other external stakeholders

## 15.0 Inspection

### 15.1 OSH inspection program / procedure(s) developed, addressing:

- scope, criteria, and objectives of inspections to be conducted
- inspection program responsibilities and resources
- Inspection program planning and implementation processes, including:
  - criteria
  - frequency and schedules
  - methods of collecting and verifying information
  - reporting inspection results
  - non-conformance and corrective action process
  - inspection program record keeping
- inspection program monitoring and review
- internal reporting requirements

## 16.0 Audit
<table>
<thead>
<tr>
<th>Section</th>
<th>Description</th>
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</table>
| 16.1    | OSH audit program / procedure(s) developed, addressing:  
  - scope, criteria, and objectives of audits to be conducted  
  - audit program responsibilities, competencies and resources  
  - audit program planning and implementation processes, including:  
    - documented criteria  
    - frequency and schedules  
    - methods of collecting and verifying information  
    - reporting audit results  
    - nonconformance and corrective action  
    - audit program record keeping  
  - audit program monitoring and review  
  - internal and external reporting requirements |
| 16.2    | Ensures internal OSHMS auditors are suitably competent to undertake OSH audits. |
| 16.3    | Ensures annual external third party compliance audits to be performed by registered Auditors in OSHAD |

**17.0 OSH Performance Monitoring**

<table>
<thead>
<tr>
<th>Section</th>
<th>Description</th>
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</thead>
<tbody>
<tr>
<td>17.1</td>
<td>OSH Performance Monitoring procedure developed</td>
</tr>
</tbody>
</table>
| 17.2    | OSH Monitoring Program addresses at a minimum:  
  - monitoring of the entity’s OSH targets and objectives  
  - monitoring the effectiveness of OSH programs and controls  
  - proactive and reactive measures of performance to monitor conformance with OSH programs and controls  
  - OSH Standards and Guideline Values and Federal OSH Standards  
  - appropriate elements outlined in relevant OSHMS  
  - elements outlined in CA permits / licenses / no objection certificate / etc  
  - elements outlined in approved OSH Plans and Studies  
  - elements outlined by relevant SRA / Competent Authority(s)  
  - description of methodologies and instruments used to monitor, including, calibration requirements and records |
| 17.3    | The monitoring of occupational health and safety includes at a minimum:  
  - occupational noise, air and lighting  
  - ergonomic and workplace design factors  
  - waste management  
  - wellness programs  
  - hazardous substances  
  - health surveillance  
  - occupational illnesses  
  - OSH hazards, near-misses and incidents |

**18.0 Document Control**

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<thead>
<tr>
<th>Section</th>
<th>Description</th>
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<tbody>
<tr>
<td>18.1</td>
<td>Document Control procedure developed</td>
</tr>
</tbody>
</table>
| 18.2    | Ensures:  
  - documents are reviewed and updated as required  
  - documents remain legible, traceable and secure  
  - relevant version control to ensure unintended use of obsolete documents  
  - appropriate review and approval processes  
  - appropriate distribution process for OSH documents |

**19.0 Record Retention**

<table>
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<tr>
<th>Section</th>
<th>Description</th>
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</thead>
<tbody>
<tr>
<td>19.1</td>
<td>Record Retention procedure developed</td>
</tr>
</tbody>
</table>
| 19.2    | Ensures:  
  - maintenance of OSH records as necessary to demonstrate conformity to the requirements  
  - identification, storage, protection retrieval, retention & disposal of records  
  - retention of OSH documents for a period of 5 years  
  - retention of medical / occupational health records - period of employment + 30 years |

**20.0 Management Review**
20.1 Management System Review procedure developed, addressing:

- ensure top management review the entity(s) OSHMS, at planned intervals to ensure its suitability and effectiveness;
- identify of key review team members;
- specify clear roles and responsibilities assigned to review team members;
- defines the process of recording management reviews;
- ensure management reviews shall include at a minimum:
  o review of the OSHMS by OSH staff;
  o status of action on previous OSH MS reviews
  o adequacy of recourses for maintaining an effective OSHMS
  o risk management program
  o results of internal and external audits;
  o other changes that affect the organization
  o OSH performance against targets and objectives;
  o changes to legal and other requirements;
  o relevant communications and complaints;
  o OSH incidents, investigations, non-conformances and corrective actions; and
  o recommendations for continual improvement

* Please attach all OSHMS documents being submitted with this form.
## Declaration

I declare that all information provided in this document is true, correct and complete.

<table>
<thead>
<tr>
<th>Signature of the Authorised Contact Person:</th>
<th>Official Stamp:</th>
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Date: _____/_____/_____  

## Official Use

Approval of OSHMS as Submitted by Entity:

- [ ] Yes
- [ ] No, reasons / amendments required:

___________________________________________________________________________________________

Date for resubmission of OSHMS for Review and Approval: (If Applicable)

- [ ] Not Required
- [ ] ____ (Day) ____ (Month) ____ ____ (Year)

Note: Implementation of the Entity’s OSHMS shall commence within 30 days of receiving approval from the concerned SRA.

Note: Incident Reporting Requirements shall commence from the date of approval.

Note: OSH Performance Reporting Requirements shall commence in the quarter following quarter of approval.

Note: Annual Third Party External Compliance Audit shall be undertaken with (12) twelve months from the date of approval.

Date Entity Notified of Decision: ____ (Day) ____ (Month) ____ ____ (Year)

Evaluation of OSHMS Form Completed and Submitted to OSHAD (OSHAD-SF – Form I)

- [ ] Yes

### Relevant Authority Stamp

Entered into Database by:

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<thead>
<tr>
<th>Name:</th>
<th>Signature:</th>
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Date: (DD/MM/YYYY) _____ / _____ / _____

Reviewed by:

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Date: (DD/MM/YYYY) _____ / _____ / _____