

1. Purpose

This procedure sets out the requirements for documentation under the City of Greater Dandenong (CGD) OHS Management System. It ensures that the development, use, review and storage of OHS documents.

This procedure applies to all documents that form part of the CGD OHS Management System, including the OHS policy, procedures, plans, guidelines and forms. Applies to all employees, contractors, and volunteers at CGD workplaces.

2. Definitions

Policy: A policy is a guiding principle that sets out the organisations vision and planned commitment to a particular aspect of the operation.

Procedure: A procedure defines the process, method or course of actions that must be taken under a management system.

Forms: These are forms, templates, or information associated with a procedure.

Guidance Material: Guidelines that provide clear and practical advice on processes and activities to assist in making informed decisions for practical safety management.

Register: A register is a record that helps keeps track of information for future reference. It is also a source of information to assist with reporting.

Plan: A plan set out the steps, quantity, quality, timing, responsibility and resources required to achieve an objective.

OHS Management System (OHSMS): That part of the overall management system which includes organisational structure, planning activities, responsibilities, practices, procedures, processes and resources for developing, implementing, achieving, reviewing and maintaining the health and safety policy, and so managing the health and safety risks associated with the business of the organisation.

Major Change: A major change affecting the organisation.

Minor Change: A minor change includes formatting, changes brought about by other documents and do not impact on the organisation.

3. Responsibilities

Team Leader of Risk Management & OHS: is responsible and accountable for OHS documents produced as part of the Occupational Health and Safety Management System and associated document control and retention requirements. This includes the development, maintenance, review and evaluation of all centrally produced documents.

OHS Administrator: is responsible for ensuring that document control and retention requirements are followed.

4. Procedure

4.1 Document Identification

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All OHS policy/procedures, guidance material and forms etc., will be managed on the CGD intranet Webstar and naming convention will use the document title.

All documents require the following metadata:

Header front page to include:

- City of Greater Dandenong logo
- 'OurSafetyWay' logo
- Title of the document

Footer to include:

- Document title
- Version number
- Date document was issued
- Date of next review
- Page numbering i.e. 1 of 2
- Reference note: This document is uncontrolled when printed
- Responsible Officer

The electronic file name for all documents must be written in full and not abbreviated and follow the CGD document naming conventions.

4.2 Version Control

A new document that is in draft form must be identified as version 0, until it is approved as the first issue of the document. The versions of the draft throughout the initial development stage will be identified as minor versions. E.g., a new document will move progressively through minor versions from 0.1, 0.2, 0.3, etc. until it is approved and adopted as the first major version of the document.

The first approved and issued version of a document must be identified as Version 1.0 when it is a new document, or if it changes type e.g. guideline to procedure.

Minor changes will need to occur throughout the life of the document. The version number of documents will progress through the minor version numbers until the next major change results in a new major version number. For example:

- 0.1 -1st draft of a new document
- 0.2 -2nd draft of a new document
- 0.3 -3rd draft of a new document

1.0 -1st Major Version

- 1.1 -1st minor version of version 1
- 1.2 -2nd minor version of version 1
- 1.3 -3rd minor version of version 1

2.0 -2nd Major Version

- 2.1 -1st minor version of version 2
- 2.2 -2nd minor version of version 2
- 2.3 -3rd minor version of version 2

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Drafts of existing documents are to be identified by the next version number, whether it be a minor or major version, followed by 'DRAFT 1', 'DRAFT 2', and 'DRAFT 3' etc. to identify the versions of drafting the current document.

For example, a document with version 1.3 is being reviewed to create a new major version; version 2.0. Version 2.0 is in draft form, so will be identified as 'v2.0 DRAFT 1', 'v2.0 DRAFT 2', 'v2.0 DRAFT 3', etc. Once approved and issued, as v2.0 will no longer be in draft form, it can then be identified as the 2nd major version of the document. The same principal applies to drafts of minor versions.

4.3 Document Register

Every document must be recorded on the Document Control Register located in the document management space in the CGD intranet.

The register includes:

- Document title
- Document number
- Version number
- Status e.g... draft, current, archived
- Initial issue date
- Current version issue date
- Responsible officer
- Date of next review

4.4 Document Storage and accessibility

Source files must be stored using OHS Document Control Template on the CGD intranet and the Document Control Register. All controlled documents will have restricted access for editing or modification for the life of the document.

Controlled electronic versions of the document are made available for use via the intranet and must not be duplicated across intranet spaces. Where referenced in other spaces this should be as a link or mirror of content in the document control space. Where required documents may be printed in hardcopy in PDF format.

4.5 Archiving and Retention

Archiving of documents is through the CGD information system, to meet OHS and privacy legislation. The most up-to-date version of a document must be available on the CGD information system.

4.6 Review

OHS documents must be reviewed at least every three years. Major reviews and updates of elements of the OHS management system will be determined by the relevant section of the OHS management system. Any major revisions must also consider adjustments to any forms or tools. OHS documents may need to be reviewed prior to their allocated review date depending on changes to legislation, review of procedures following incidents or to ensure continuous improvement.

4.7 Privacy and Confidentiality

The privacy of individuals and confidentiality of records will be maintained at all times in accordance with legislative, Council's Privacy Policy and other requirements. Any documents or records that contain personal information or details of injuries, illnesses or medical and rehabilitation are to be kept strictly confidential. Staff are to refrain from accessing and/or distributing such

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records, whether physical or electronic, except in accordance with the functions of their position.

5. References

Occupational Health and Safety Act 2004

Occupational Health and Safety Regulations 2017

AS/NZS 4801:2001 Occupational Health & Safety Management Systems – specifications with guidance for use

National self-insurer OHS management system audit tool (NAT), version 3

W3C standards

6. Related Documents

OHS Procedures, Development, Authorisation and Publication Procedure

OHS Document Control Template

OHS Legislative Compliance Procedure

OHS Consultation, Communication and Issue Resolution Procedure

Document Control Register

Records Management Policy

7. Document History

Version Number	Issue Date	Description of Change
0.2		Initial Draft
0.3	08/02/2018	Accepted by OHS Sub-Committee
0.4	05/03/2018	14 Day Employee Consultation complete
1.0	15/03/2018	Approval by OHS Oversight Committee