SESLHD PROCEDURE COVER SHEET

NAME OF DOCUMENT	Evaluation of Health Safety and Wellbeing Performance
TYPE OF DOCUMENT	Procedure
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LEVEL OF EVIDENCE	Development of lead and lag WHS performance indicators, reporting and analysis of data and information National Safety and Quality Health Service Standards: Standard 1 – Clinical Governance ISO 45001:2018 WHS Management Systems – 9 Performance Evaluation
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FORMER REFERENCE(S)	Measurement and Evaluation of Work, Health and Safety (WHS) Performance SESLHDPR/395
EXECUTIVE SPONSOR or EXECUTIVE CLINICAL SPONSOR	Director, People and Culture
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FUNCTIONAL GROUP(S)	Workplace, Health and Safety
KEY TERMS	Performance Measurement, Lead Indicators, Lag Indicators, Performance Reports; health and safety performance, Analysis and Reporting
SUMMARY	Provide information on how Management and the Board, have visibility and access to information on health safety and wellbeing performance, to better inform decisions and actions for performance improvement.

Feedback about this document can be sent to SESLHD-Policy@health.nsw.gov.au

1. POLICY STATEMENT
[NSW Health Workplace Health and Safety: Better Practice Procedures PD2018_013](#) outlines the requirement to have a system and processes in place for measuring and evaluating Work Health Safety (WHS) performance.

Management at all level of SESLHD have a legal obligation to exercise due diligence, including a requirement to establish and implement systems and processes to monitor, measure, analyse and evaluate health safety and wellbeing performance. This includes the identification and reporting of hazards and effective management of related risks.

2. BACKGROND
Regular monitoring, measurement and analysis of health safety and wellbeing activities and performance will enable workers, management and executives to evaluate the effectiveness of both health, safety and wellbeing, and injury prevention and management activities. It also enables informed decision making and actions by Management, to implement identified improvement opportunities through a combination of lead and lag indicators.

2.1 Definitions
Refer to Appendix B for Key Definitions.

3. RESPONSIBILITIES

3.1 Workers:
- Comply with Health Safety and Wellbeing systems and procedures, complete required health and Safety training and utilise all required personal protective equipment (PPE) when at work.
- Report any health safety and wellbeing incidents, injuries, hazards, risks and issues in the IMS+ reporting system and to their manager.

3.2 Line Managers:
- Implement and Comply with Health Safety and Wellbeing systems and procedures, complete required health and Safety training and utilise all required personal protective equipment (PPE) when at work.
- Implement and monitor the completion of action plans to address health safety and wellbeing risks.
- Report any health safety and wellbeing incidents, injuries, hazards, risks and issues in the IMS+ reporting system and to their manager.

3.3 Managers/ Service Managers:
- Establish and maintain WHS and IM procedures to achieve WHS policy objectives
- Report on WHS risks and measure and evaluate WHS activities
- Distribute information on WHS and IM performance to key stakeholders.
- Report any health safety and wellbeing incidents, injuries, hazards, risks and issues in the IMS+ reporting system and to their manager.

3.4 Health Safety and Wellbeing:

- Provide mentoring, training and advice to Managers in effectively monitoring and evaluating health safety and wellbeing activities, performance and compliance
- Administer, monitor and maintain systems and processes to monitor, measure, analyse and evaluate health safety and wellbeing activities and performance
- Provide periodic reports to the Executive and Health and Safety Committees on Health Safety and Wellbeing activities and performance.
- Report any health safety and wellbeing incidents, injuries, hazards, risks and issues in the IMS+ reporting system and to their manager.
- Identify and implement appropriate health safety and wellbeing programs and activities across SESLHD, consistent with legislation, District and Ministry of Health objectives, and the SESLHD risk environment
- Oversee the administration of Health Safety and Wellbeing performance reporting
- Collate and report on the LHD health safety and wellbeing performance to the District Management, Executive, Board and the Ministry of Health
- Report any health safety and wellbeing incidents, injuries, hazards, risks and issues in the IMS+ reporting system and to their manager.

4. PROCEDURE

4.1 Overview

All Managers and Health and Safety Committees in the organisation must measure, evaluate and report on health safety and wellbeing (HSW) performance, using standardised lead and lag performance indicators. The focus of the reporting process is to provide Management with timely information to enable decision making and action based on data.

The main methods used within SESLHD to measure and evaluate HSW performance, include but are not limited to:

- Organisation wide performance reporting systems and processes (e.g. Audits, Workplace Inspections, Risk Assessments, Investigations, IMS+ and ERMS
- Health and safety committees and Executive health and safety committees
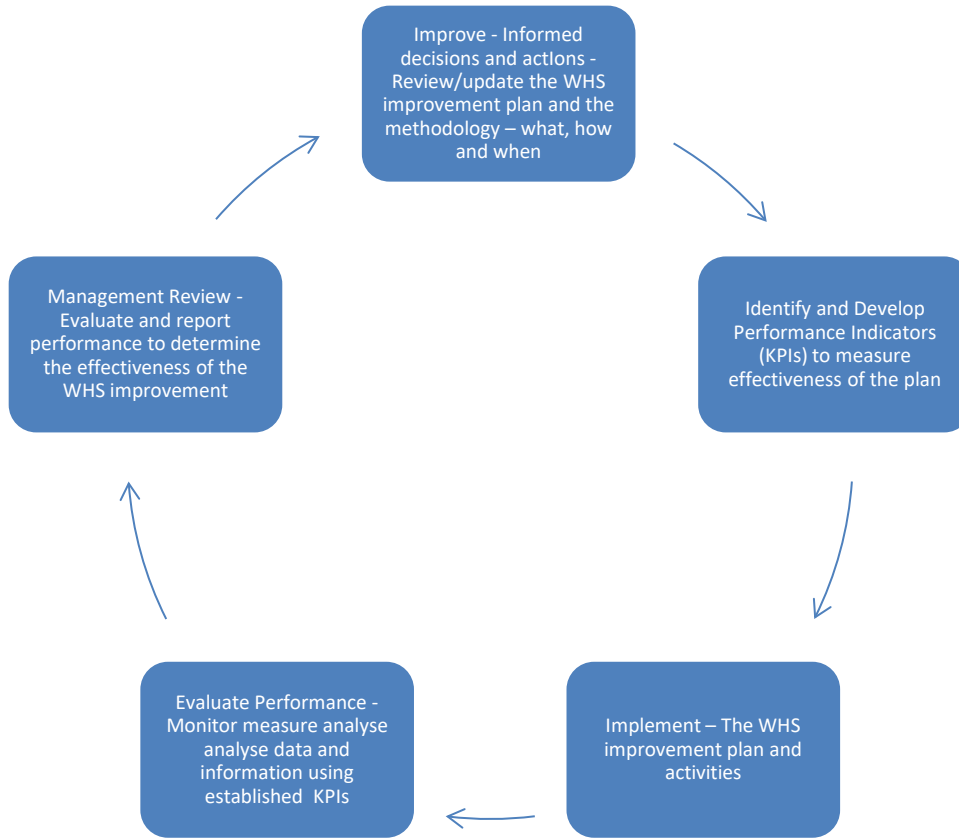- Action plans to address outcomes from these systems and processes.

Diagram 1 - HSW performance measurement cycle

**4.2 Organisation wide Health Safety and Wellbeing performance reporting structure**

The due diligence reporting structure has been set up to ensure a formal process is in place for measuring WHS performance that is reported through to Senior Management, Executives and the Board. There is also a responsibility for Senior Managers and Executive to provide this information to key stakeholders.

The reports have been developed against a number of Ministry of Health (MOH) mandatory reporting criteria as well as improvement plans and standard lead and lag indictors that assist in informing management at all levels of the organisation about WHS performance in a timely and accurate manner.

4.2.1 Health Safety and Wellbeing Governance Reporting Structure

South Eastern Sydney Local Health District (SESLHD)
Health, Safety and Wellbeing Governance Framework
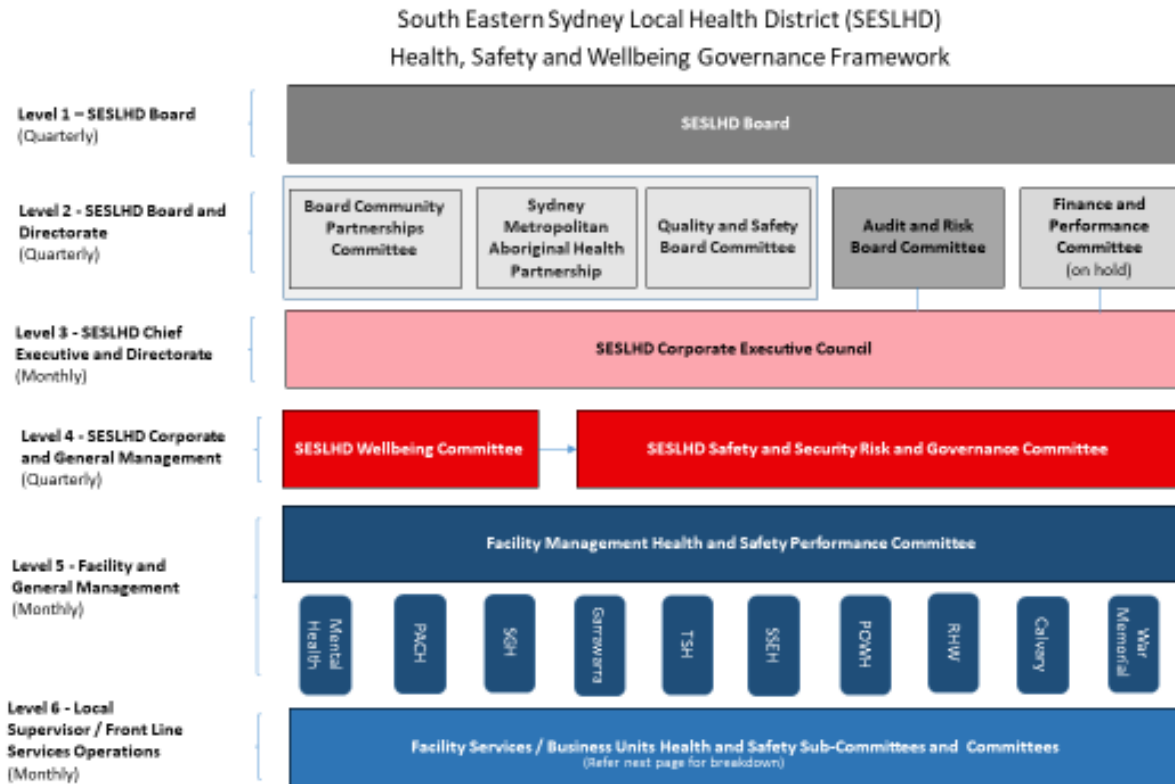
4.2.2 Collection of data

Department and line managers are required to proactively monitor their own WHS performance, along with incidents and injuries, and report on these through local reporting methods.

Data collected sources include but are not limited to IMS+ reports, WHS audits, change plans, incident investigations, corrective action plans, risk assessments, strategic plans, external service provider performance reports, WHS disputes, SafeWork NSW interventions and Health and Safety Committee records and action items.

4.2.3 WHS Performance Tracking

As part of the reporting cycle, department managers are required to track the completion of corrective action plans from audits, investigations, risk assessments and regulatory notices, and provide updates to their respective Health and Safety Advisor on a monthly basis. Workers should be consulted regarding opportunities for performance improvements. Health and Safety Advisors monitor and follow up the status of action plans and provide assistance, coaching and advice to managers in how to track and report on performance status.

4.2.4 Report Distribution

The purpose of these reports is to allow senior executives to meet their due diligence obligations by informing them of the WHS performance of their direct reports and assist them in allocating resources to control WHS issues.

Senior managers are responsible for circulating this information to the stakeholders who are part of or are directly affected by the information such as Department Managers and Health and Safety Committees.

4.3 Local WHS performance reporting arrangements

Although a formal process for measuring WHS performance is in place, departments still have a responsibility to track and monitor local or department based WHS plan.

Consultation is to be undertaken by the manager when establishing the local WHS performance lead and lag indicators (e.g. hand hygiene audits and health monitoring), to ensure worker participation.

4.4 Health and Safety Committees

Health and Safety Committees have an active role within the organisation to monitor and review WHS performance at the facility level. The Committees may be involved in local activities to help assist the facility in reaching its Health Safety and Wellbeing (HSW) performance targets.

Activity and consultation through Health and Safety Committees is also captured and reported on through the monthly Health Safety and Wellbeing Performance Reports.

As outlined in SESLHDPR/731 – Health and Safety Consultation, Health and Safety Committees are, as a minimum, to conduct annual evaluations using the Committee Performance Evaluation Form (form F156) or equivalent this performance is to be reviewed against the committee's Terms of Reference and provided to the facility executive representative.

Health and Safety Committees may also conduct other performance reviews to measure and evaluate how effectively they are meeting the needs of workers they represent. This may include some of the example lead and lag indicators in Appendix A or other indicators that better fit their needs.

4.6 WHS Audits and Improvement Plans

WHS Audits are one of the key methods used to identify improvements to the SESLHD Safety Management System. Along with the requirement to undertake the MoH WHS Audit at a minimum every two years for each Hospital, other internal risk-based HSW related audits can be undertaken at facilities as part of our improvement cycle.

Improvement Action plans should be established to assist with monitoring the level of implementation against the identified improvements. The status of these actions is monitored by Health Safety and Wellbeing and included in the SESLHD reporting.

5. DOCUMENTATION
- *Appendix A - Example of Key Performance Indicators (KPIs)*
- Health Safety and Wellbeing Performance Reports – District and Facility
- IMS+ Notifications and Reports, Daily monitoring reports
- Ministry of Health WHS Proceedings Report

- Physical Incidents Data Report
- Standard Health and Safety committee reports
- HSW Risk Assessments
- Injury Management Performance
- Action Plans
- Workplace Inspection Reports
- Wellbeing Reports
- Employee Assistance Program (EAP) Reports
- EML Workers Compensation weekly and quarterly performance reports
- Finity APA quarterly reports (Workers Compensation performance)
- iCare QLik system reports (Workers Compensation performance)

6. AUDIT

The compliance with this procedure will be audited through the Health Safety and Wellbeing Audit Program every two years.

7. REFERENCES

External

- Work Health and Safety Act 2011
- Work Health and Safety Regulation 2017

Ministry of Health

- PD2015_043 Risk Management - Enterprise-Wide Risk Management Policy and Framework - NSW Health
- PD2018_013 Work Health and Safety: Better Practice Procedures
- PD2022_002 Rehabilitation, Recovery and Return to Work

Internal

- SESLHDPR/271 Health Safety and Wellbeing – Statement of Commitment
- SESLHDPR/212 Health Safety and Wellbeing – Risk Assessment
- SESLHDPR/731 - Health and Safety Consultation
- SESLHD Enterprise Risk Management Procedure and Resources

8. REVISION AND APPROVAL HISTORY

Date	Revision No.	Author and Approval
November 2009	0	Dieter Schultejohann (Area WHS Officer) Approval granted by Area Executive Team Strategy Committee 26 October 2009
March 2011	1	Troy Williams, WHS Officer, Health safety and Wellbeing. Amended to reflect change to Local Health Sector and Cluster.
March 2013	2	Peter Kuszelyk, WHS Officer, Health safety and Wellbeing. Amended to reflect change to WHS Act and regulation.
October 2014	3	Peter Kuszelyk, WHS Officer, Health Safety and Wellbeing. Amended to reflect change to WHS reporting.
January 2015	3	Draft for comment
March 2015	3	Endorsed by District Executive Team
August 2017	4	Desktop Revision and Links Update - John Parkinson, WHS Consultant
October 2017	4	Updates endorsed by Executive Sponsor
August 2018	5	Document name changed – Catherine Johnson, WHS Consultant
August 2021	6	Major review: Agah Smith, Manager Safety Governance and Assurance. Change in reporting processes.
December 2021	6	Draft for comment period
March 2022	6	Final version approved by Executive Sponsor. Approved by Executive Council.

Appendix A - Example of Key Performance Indicators (KPIs)

Lead indicators are:
- Mandatory training completion compliance
- Risk assessment
- Action plan completion rates (resulting from audits, risk assessments, investigations, workplace inspections)
- Workplace inspections
- Risk control effectiveness
- Participation in health safety and wellbeing committees
- IMS+ reports on safety hazards, risks and issues
- Reduction in injuries related to critical risks (manual handling, slips trips and falls, psychological injuries), through targeted risk prevention program
- Employee Assistance Program (EAP) usage

Lag Indicators are:
- Incidents
- Injuries
- Workers compensation claims
- Lost time injuries
- Investigations
- SafeWork NSW interventions and (Provisional Improvement Notices (PINs)

Management Review
Senior Management and Executive review of health safety and wellbeing performance is conducted at scheduled intervals, to ensure the continuing suitability, adequacy and effectiveness of the SESLHD Work Health and Safety Management System. This review includes consideration of the following health safety and wellbeing activities and performance indicators.
a. The status of actions from previous management reviews
b. Changes in external and internal issues that are relevant to the WHS management system, including:
    1. Needs and expectations of key stakeholders
    2. Legal and regulatory compliance requirements
    3. Risks and opportunities
c. The extent to which the WHS policy and other WHS objectives have been met:
d. Information on the WHS performance, including trends in:
    1. Incidents, non-conformances, action plans and continual improvement
    2. Monitoring and measurement results
    3. Results of evaluation of compliance with legislative and other compliance requirements
    4. Audit results
    5. Consultation and participation of workers
    6. Risks and opportunities
e. Adequacy of resources for maintaining an effectives WHS management system
f. Relevant communications with key stakeholders, including regulatory authorities
g. Opportunities for continual improvement.

The outputs of the management review includes decisions and actions related to:

a. The continuing suitability, adequacy and effectiveness of the WHS management system in achieving its intended outcomes
b. Continual improvement opportunities
c. Any need for changes to the WHS management system
d. Resources needed
e. Actions needed
f. Opportunities to improve integration of the WHS management system with other business processes
g. Any implications for the strategic direction of the organisation.

Senior management will communicate the relevant outputs of management reviews to workers. Documented information on the results of management reviews are retained as records of evidence.

Appendix B – Definitions

Key Terms	Definition
Adequacy	refers to whether the WHS management system is implemented appropriately.
Audit	systematic, independent and documented process for obtaining audit evidence and evaluating it objectively to determine the extent to which the audit criteria are fulfilled.
Continual improvement	recurring activity to enhance performance
Corrective action	action plans to eliminate the causes of a non-conformity or an incident, and to prevent recurrence. Each action assigns an action owner responsible for its completion, and a due date for implementation of the action.
Effectiveness	refers to whether the WHS management system is achieving the intended outcomes.
Health Safety and Wellbeing Performance Report - District	monthly report on key performance indicators to measure, analyse and report on the health safety and wellbeing performance of SESLHD. This report is tabled for the Corporate Executive Council, and each Facility Executive Committee to assist Management to evaluate performance, understand the risks, and assurance that risks are being effectively management. It also enables Management and the Board to make informed decisions and actions where required, to meet due diligence obligations.
Health Safety and Wellbeing Performance Report - Facility	monthly report providing the information in the HSW Performance Report – District, however focusing on a specific Facility within SESLHD. This report is tabled at the monthly Facility / Service Executive Committee.
Incident	occurrence arising out of, or in the course of, work that could or does result in injury and ill health.
Lag indicators	provide information about the past. They are useful in establishing trends and in understanding seasonal fluctuations. Examples include monitoring the number of injuries or the cost of workers' compensation claims over time. (See Appendix A for more examples)
Lead indicators	measure the positive steps that may prevent a WHS incident from occurring, they can also provide early warnings by detecting and mitigating risks before a WHS incident occurs and can be used to inform future activities, example - training of staff or procedural compliance. (See Appendix A for more examples)
Physical Incidents Data Report	quarterly report prepared by Health Safety and Wellbeing team, and provided to the MOH on specific WHS criteria that are being monitored across the whole of health.
Measurement	process to determine a value
Monitoring	determining the status of a system or process
Non-conformity	non-fulfilment of a requirement
Performance	a measurable result

Stakeholder	person or organisation that can affect, be affected by a decision or activity.
Suitability	refers to how the WHS management system fits the organisation, its operation, its culture and systems.
WHS performance	health safety and wellbeing performance related to the effectiveness of the prevention of injury and ill health to workers, and the provision of safe and healthy workplaces.
WHS Proceedings Report	monthly report to Ministry of Health, summarising regulatory interactions, notices and action plans to address any identified improvements or non-compliances.