

Leading the Way

Improving health and safety
in government workplaces

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# Foreword

As an employer, the Victorian Government is committed to Leading the Way in workplace occupational health and safety (OHS) management, including psychological health and safety. This commitment is part of an ongoing effort to enhance the wellbeing of Victoria’s workforce and wider community, and to strengthen our state’s competitive advantage.

While we have made significant inroads, performance can be improved in a number of key areas. To this end, four strategic priorities have been developed to help Victorian public sector organisations strengthen senior management commitment, improve safety culture, improve OHS performance and ensure accountability for continuous improvement at all levels within the sector.

The strategic priorities have been agreed by the Leading the Way governance bodies. The *Leading the Way* approach has been developed to support delivery of these strategies. The approach includes a governance structure together with accountability process elements and tools based on leading practice.

Within the approach is the Leading the Way framework and its embedded safety maturity model which provides departments with a vision for the future and guiding actions for change.

Leading the Way also provides Victorian government departments with guidance and processes to address key action areas and strategic outcomes of the Australian Work Health and Safety Strategy 2012-2022; particularly Action Area 4 - Leadership and culture and Action Area 6 - Government: Strategic outcomes of Action Area 6 include governments influencing work health and safety through integration into policy design and implementation, investment and purchasing power and acting as exemplars of good work health and safety.

The Victorian Government, in seeking to lead the way in OHS, encourages departments to integrate the Leading the Way approach and strategic priorities into their organisation.

# Review

Leading the Way will be reviewed periodically to ensure the initiatives and approach remains current, reflects the changing needs of government departments and delivers continuous improvement in performance across the Victorian public sector.

# Acknowledgements

The representatives from Department of Economic Development, Jobs, Transport and Resources, Department of Education and Training, Department of Environment, Land, Water and Planning, Department of Justice and Regulation, Department of Premier and Cabinet, Department of State Development, Business and Innovation, Department of Treasury and Finance, Department of Health and Human Services, Victoria Police, WorkSafe Victoria, Community and Public Sector Union, The Police Association, Health and Community Services Union and Australian Education Union must be acknowledged for their valuable contribution to the development and review of Leading the Way.

# 1. Introduction

The benefits of providing a healthy and safe workplace extend beyond legal compliance and reducing work-related injury. An organisation that focuses on improving occupational health and safety (OHS) management will likely experience a host of secondary benefits including increased productivity, improved worker engagement, organisational reputation, recruitment and worker retention and financial performance.

The Victorian public sector is committed to Leading the Way in OHS practice and performance, and to that end has established the following four strategic priorities:

* Strategic priority 1: Defining and evaluating the shared issues
* Strategic priority 2: Building and promoting leadership
* Strategic priority 3: Building and promoting ownership and accountability
* Strategic priority 4: Defining and promoting the shared levers for change

The Leading the Way approach has been developed to deliver these strategic priorities. Elements of the Leading the Way approach generally correspond to individual strategic priorities as outlined in the remainder of this document. However, aspects of the approach may be considered to apply across the strategies.

Leading the Way is intended to provide an agreed and standardised approach for government departments to identify and address opportunities for OHS improvement across the strategic priorities and focus areas.

The Leading the Way approach, framework and maturity model were reviewed in 2016 in consultation with stakeholders to ensure that they are best designed to deliver the strategic priorities whilst remaining flexible for tailored implementation in individual government departments.

The Leading the Way approach is designed to assist government departments to establish and/or improve the foundations for sound OHS management firstly through design, implementation and review of systems and processes which are then supported by programs and initiatives to influence and develop a positive organisational safety culture.

Most importantly, the program aims to facilitate and support government departments to monitor and report on their own OHS performance and share learnings that can lead the way for OHS improvement across the Victorian public sector.

# 2. Objectives

The objectives of Leading the Way are to:

* provide a governance framework to (1) set the strategic priorities, (2) agree Leading the Way approach, and (3) monitor and promote improvement through performance reporting
* provide a means for assessing current and future levels of maturity in the Leading the Way maturity model
* assist government departments to design and implement practical strategies to improve OHS performance
* assist government departments to set clear accountabilities for OHS at all levels of the organisation
* establish performance indicators that measure improvement in the focus areas of senior management commitment safety culture, OHS systems and accountability
* analyse data to identify and develop a more systematic and proactive approach to managing safety
* provide an approach to performance reporting to (1) hold government departments accountable for improving performance according to an agreed set of outcome (lag) metrics and (2) use process (lead) indicators to identify where government departments are Leading the Way in OHS management and safety culture
* provide an opportunity to share information, data, case studies and ideas to promote innovation and continuous improvement in health and safety across the Victorian public sector.

# 3. Leading the Way approach

The Leading the Way approach represents an overarching framework for the Victorian public sector to balance accountability with learning and improvement. The approach comprises the elements illustrated in Figure 1 below.

Figure 1: Leading the Way approach



## 3.1 Leading the Way governance structure

Leading the Way **governance model**: The governance bodies provide an accountability structure to provide authority and guidance on strategic direction. The governance forums provide opportunities for Leading the Way performance improvement monitoring and review to drive continuous improvement.

## 3.2 Leading the Way accountability and learning process and tools

Together the following elements of the Leading the Way approach provide the process and tools to inform and drive OHS improvement within individual government departments and across the public sector.

* Leading the Way **framework:** The Leading the Way framework links the focus areas to outcomes using an organisational safety maturity model. The maturity model is supported by a self-assessment tool to assist government departments to assess their level of maturity for each focus area.
* **Action plans:** Outcomes from the Leading the Way self-assessment and other performance data should be used to identify, prioritise and plan delivery of improvement actions.
* **Performance indicators:** Defined qualitative and quantitative measures selected to indicate how effectively OHS processes are operating against objectives and indicating improvement in focus areas. Data collection and analysis methodology should be established and defined.
* **Reporting:** OHS performance will be reported against a consistent set of outcome measures across the Victorian public sector and a complementary set of process measures to monitor government departments’ improvement in the focus areas. Case studies may be used to showcase areas where government departments are Leading the Way.
* **Review:** Governance bodies will review reported OHS performance and share learnings to inform and drive continuous improvement.

Elements of the Leading the Way approach align with the strategic priorities as follows:

| Strategic priority | Leading the Way element |
| --- | --- |
| Strategic priority 1: Defining and evaluating the shared issues  | Leading the Way governance model |
| Strategic priority 2: Building and promoting leadership  | Leading the Way framework, maturity model, self-assessment; action plan |
| Strategic priority 3: Building and promoting ownership and accountability | Performance indicatorsReporting performance |
| Strategic priority 4: Defining and promoting the shared levers for change | Review |

# 4. Strategic priority 1 – Defining and evaluation shared issues

## Victorian public sector Leading the Way governance

The diagram below summarises the Leading the Way governance model operating within the Victorian public sector and highlights the links between (and membership of) the various senior leadership forums.

Figure 2: Victorian public sector Leading the Way governance model

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**Public Sector OHS Leadership Group:** The OHS Leadership Group is a strategic government forum that has whole-of-government responsibility for OHS leadership. This group meets regularly to exchange information and coordinate responses to state based initiatives or input to national initiatives. It is convened and chaired by the Minister for Finance.

**Public Sector Inter-Departmental Committee (IDC):** The purpose of the IDC is to provide operational support to the Public Sector OHS Leadership group in fostering a commitment to healthy and safe workplaces in the public sector. The IDC provides a forum particularly for high‐risk and large public sector employers, associated worker representatives and WorkSafe to develop initiatives and safety practices to improve public sector health and safety outcomes.

**IDC Sub-committee:** The IDC sub-committee will design, develop and assist with the implementation of Leading the Way across the Victorian public sector. IDC sub-committee members will be champions for each component of the Leading the Way approach and will provide mentoring to departments in the application of each component. The IDC sub-committee may also collate department benchmarking reports and present these to the IDC.

## Defining and Evaluating shared issues across Victorian public sector

The OHS Leadership Group will be responsible for:

* setting and reviewing the strategic priorities under Leading the Way
* agreeing to the initiatives designed to deliver the Leading the Way strategic priorities
* considering recommendations from the IDC relating to whole-of-government initiatives
* monitoring OHS performance reports
* enquiring into performance trends, and
* promoting innovation and continuous improvement in OHS across the Victorian public sector

The IDC will be responsible for:

* enquiring into and reporting to the OHS Leadership Group on public sector OHS performance and safety practices
* considering departmental OHS performance reports raised through implementation of Leading the Way
* investigating and identifying key trends, issues, barriers and innovations affecting public sector safety culture, senior management commitment, accountability, OHS systems improvement, and
* making recommendations to the OHS Leadership Group on ways that performance under Leading the Way can be strengthened in the Victorian public sector.

The IDC sub-committee will be responsible for:

* designing, developing and reviewing Leading the Way
* assisting with the implementation of Leading the Way across the Victorian public sector
* collating department OHS performance reports
* presenting OHS performance reports to IDC, and
* supporting the IDC in any other related matters.

# 5.Strategic priority 2 – Building and promoting leadership

Building and promoting leadership across the key focus areas in Leading the Way is essential to improving OHS performance in the Victorian public sector. The focus areas are:

* senior management commitment
* OHS systems
* accountability
* safety culture

Senior management’s active and visible commitment to systematic OHS management is critical to success. Senior management can have a powerful influence on the development of a positive safety culture where the health, safety, and wellbeing of employees is the key priority. Senior management also carry key accountabilities for the delivery of OHS improvement initiatives.

## 5.1 Terminology

The Leading the Way approach makes a distinction between roles and accountabilities as they relate to OHS management and safety culture. Each role makes important contributions to overall success. The terms used are top management, senior management, management, workers and worker representative. These terms and their use are consistent with the relevant Australian Standards listed in Section 8 References and as defined in the Glossary (Appendix 2).

Figure 3 summarises how these terms are used within Leading the Way.

Figure 3: Management and worker structure



## 5.2 Leading the Way framework

The Leading the Way framework in Figure 4 below shows that improvement in each of focus areas facilitates upwards progression in the organisational safety maturity model to deliver improved OHS outcomes.

The framework illustrates that to achieve the desired outcomes in each of the focus areas, the foundation must first be built through design, implementation and review of OHS management systems and processes. These systems and processes are then supported by programs and initiatives to influence and develop a positive organisational safety culture.

Figure 4: Leading the Way framework



##

## 5.3 Leading the Way maturity model

The Leading the Way maturity model (Figure 5 over page) provides guidance on what constitutes a mature OHS system and a mature safety culture. The model has been adapted for the Victorian public sector using authoritative safety maturity models (including Hudson 1999, HSE 2001 and others listed in Section 8 References).

The Leading the Way maturity model illustrates the interrelationship between OHS systems maturity and safety culture maturity to achieve sustainable OHS performance outcomes. The maturity model describes the recognised stages of safety maturity and the factors that contribute to improving OHS outcomes. The model also highlights the role of all parties in achieving improved outcomes with organisational leadership being particularly influential.

Improved OHS outcomes require both systematic and consistent management of OHS risks as well as the development of safety cultural elements that enable engagement, consultation, learning and safety leadership at all levels.

Figure 5: Leading the Way maturity model\*



Table 1: Characteristics of Leading the Way maturity model stages\*

| Characteristics | Unstructured | Foundation | Consolidating | Leading and learning |
| --- | --- | --- | --- | --- |
| Safety champions | No champions or individuals only | Safety professionals | Senior management | Collaborative leadership with workers and senior management |
| Focus | Response to damaging events; minimum compliance | Active prevention; compliance improvement; systematic OHS risk minimisation | Safety leadership; OHS management system effective | Engagement at all levels; OHS systems permanent |
| Features | Ad hoc responses to incidents; lack of engagement at most levels; hazards not recognised and not controlled  | Management commitment and resourcing; establishing and implementing systemic OHS risk management procedures and practices; building management capability; engaging with workers; enabling easy and effective reporting and analysis | OHS management systems and practices are consistently implemented and regularly reviewed effectiveness; OHS management and leadership capability developed at all levels; OHS management integrated into business planning, processes and decision making; OHS management processes integrated into service delivery and management of client OHS | Continually seeking opportunities to improve; all workforce engaged in and owns OHS improvement processes; learning and sharing outside organisation; OHS embedded into business thinking |
| Levers for change | Develop OHS management systems; management participation; worker representation; worker induction and training | Compliance improvement; Level of OHS systems implementation; people manager training; worker engagement and participation | Systems review and improvement; consistency implementation; safety climate survey/results | Innovative solutions; continual improvement; case studies |

## 5.4 Leading the Way self-assessment tool

The Leading the Way self-assessment tool assists government departments to determine their general level of safety maturity in each of the focus areas and it provides an overview of maturity levels for safety systems and safety culture.

This is not an independently validated tool, but does reflect the elements of OHS management systems identified in the Australian Standards, as well as elements of a mature safety culture widely recognised in OHS literature.

Both management and worker perceptions of their leaders contribute to creating and maintaining a positive safety culture and a reduction in workplace injuries. So, while the OHS team may coordinate the self-assessment, it should be completed with input from a range of stakeholder viewpoints including:

* senior management
* management
* OHS specialists (e.g. OHS manager, OHS advisors, health and safety representatives)
* workers and their representatives.

Differences between stakeholder ratings can highlight areas for further analysis and improvement.

### 5.4.1 Using the self-assessment tool

The term ‘senior management’ is used most often in the criteria. However, a few criteria specify ‘top management’ i.e. those senior management reporting directly to the board or equivalent. These criteria reflect the responsibilities specified for top management in the relevant Australian Standards cited in the Reference list.

Use the scoring system to respond to each statement in the four focus areas. Err on the side of a lower score if there is any uncertainly about the level of implementation on a particular criterion.

Once all statements within the self-assessment tool have been scored, tally up the scores for each focus areas, as well as for the safety systems and culture components. Safety systems and safety culture criteria are distributed across the focus areas and are colour coded: blue for systems; green for culture. These scores will assist each department to estimate its maturity level according to the Leading the Way maturity model.

Results from the Leading the Way self-assessment should be used in conjunction with the range of other Leading the Way performance data and risk profiles to identify priorities and to plan actions for monitoring and continuous improvement.

Government departments should use the findings of the Leading the Way self-assessment to identify aspects of their OHS systems and safety culture that require more detailed analysis through:

* formal evaluation of the OHS management system (OHSMS) to determine implementation status and effectiveness
* data analysis to determine physical and psychological risk priorities
* use of safety culture and/or organisational culture assessment tools.

Note: Consideration must be given to compliance with the OHS provisions included in the enterprise agreements with employee representatives and unions.

Scoring system

|  |  |
| --- | --- |
| Level achieved | Description |
| 0 | No evidence of implementation |
| 1 | Limited systematic OHS risk management; reactive response; limited consultation and engagement with workers |
| 2 | OHS systems implemented for active prevention; management commitment and capability development; worker participation |
| 3 | OHS systems are consistently used, effective and integrated; strong leadership and managers actively engage with the workers on OHS matters |
| 4 | Opportunities sought to continually improve OHS systems; ownership and leadership of performance shared at all levels; learnings broadly shared |



### 5.4.2 Senior management commitment

Self-assessment of senior management commitment

|  |  |  |
| --- | --- | --- |
| Criterion number | Criterion | Score0 - 4 |
| **Safety systems** |
| (1) | The organisation has a current policy statement approved by top management that outlines their commitment to development of a systematic approach to OHS |  |
| (2) | Top management establish key objectives towards continual improvement in OHS management |  |
| (3) | Top management representative (s) has overall responsibility of OHS systems and reports to the executive board on performance  |  |
| (4) | Senior management undertake a review of the OHS program to generate and implement recommendations to improve performance |  |
| Safety systems score |  |
| **Safety culture** |  |
| (5) | Senior management reinforce the importance of a safe and healthy workplace |  |
| (6) | Senior management demonstrate sound understanding of the organisation’s legal obligations and how to fulfil them  |  |
| (7) | Senior management ensure that the protection of health, safety and wellbeing of workers and others to whom a duty is owed is a systematic part of organisational decision making |  |
| (8) | Senior management sponsor key OHS initiatives |  |
| (9) | Senior management support and enable (e.g. provision of resources, time) workplace managers to implement OHS policy, systems and improvement strategy |  |
| (10) | Senior management lead and influence organisational safety culture in a positive way |  |
| (11) | Senior management actively engage with workers (and/or worker representatives) in matters relating to OHS |  |
| (12) | Senior management demonstrate support for worker representatives, OHS consultative structures and processes |  |
| (13) | All levels of management actively acquire and maintain their knowledge and skills to manage workplace health, safety and wellbeing |  |
|  | Safety culture score  |  |
|  | Total focus area score |  |

### 5.4.3 Safety culture

Self-assessment of safety culture

|  |  |  |
| --- | --- | --- |
| Criterion number | Criterion | Score0 - 4 |
| **Safety culture** |  |
| (1) | The behaviour and actions of senior management demonstrate that protecting the health, safety and wellbeing of workers is of high importance to the organisation |  |
| (2) | The workers perceive senior management is exhibiting leadership in OHS |  |
| (3) | Workers and workers’ representatives feel empowered to raise OHS issues in the workplace |  |
| (4) | OHS vision, strategy and performance expectations are communicated by senior management and cascade through managers to all levels of the organisation |  |
| (5) | There is trust between all levels of management and workers with respect to managing OHS in the workplace |  |
| (6) | There is frequent formal and informal communication between workers and management in relation to OHS matters |  |
| (7) | All levels of management and workers are engaged in OHS improvement. |  |
| (8) | There is flexibility and adaptability to changing conditions within the workplace to ensure the continuing health, safety and wellbeing of workers |  |
| (9) | The organisation promotes and supports health, safety and wellbeing of workers and clients |  |
| (10) | Everyone in the organisation believes they have a right to work in a safe and healthy environment |  |
| (11) | Health, safety and wellbeing is considered just as important as operational objectives, service delivery and quality |  |
| (12) | The organisation communicates learnings from reports on health, safety and wellbeing issues |  |
|  | Safety culture score |  |
|  | Total focus area score |  |

### 5.4.4 OHS systems

Self-assessment of OHS systems

| Criterion number | Criterion | Score0 - 4 |
| --- | --- | --- |
| **Safety systems**  |
| (1) | An OHS policy has been endorsed and supported by top management |  |
| (2) | The organisation has documented its OHS policy, plans, procedures, work instructions and these are subject to document and data control procedures |  |
| (3) | The organisation reviews OHS procedures to ensure these reflect current legislative requirements, leading practice, emerging hazards and key risks |  |
| (4) | OHS objectives and targets are established for all levels of the organisation and are consistent with the organisation’s OHS policy |  |
| (5) | Performance indicators are set and consistent with the objectives and targets for the organisation |  |
| (6) | OHS management plans are used to define how an organisation will meet its objectives and targets |  |
| (7) | OHS management plans are developed from using systematic review of injury, incident and hazard data, legal compliance, management system gaps and identified opportunities for improvement  |  |
| (8) | Progress towards meeting objectives and targets is monitored and corrective action taken if required |  |
| (9) | Sufficient resources are provided to ensure effective OHS management |  |
| (10) | All levels of the organisation have been allocated and understand their responsibilities and accountabilities for OHS management |  |
| (11) | The organisation identifies OHS training needs (including induction) and competency requirements (including legislative competency requirements) for workers, managers, senior management and other relevant persons (including contractors and visitors) |  |
| (12) | The organisation provides access to OHS training to meet identified needs and ensure required competencies are developed and maintained  |  |
| (13) | Workers are consulted on OHS matters of concern to them and any proposed changes in the workplace that may impact their health and safety |  |
| (14) | The organisation has consulted with workers about the number of designated work groups and a process in place for the election of health and safety representatives by the designated work group |  |
| (15) | The organisation has formal and informal means for communicating OHS information to workers and others  |  |
| (16) | The organisation has procedures and systems for reporting workplace hazard and incident and systems failures that are readily accessible to workers and easy to use  |  |
| (17) | The organisation’s OHS reporting systems enable the timely reporting and monitoring of corrective actions implementation |  |
| (18) | The organisation has documented and implemented a defined approach to hazard identification, risk assessment and risk control (risk management methodology) |  |
| (19) | The organisation has clear, documented procedures to inform workplace managers and workers how to minimise and manage workplace hazards |  |
| (20) | The organisation determines OHS requirements for contracted services and monitors that contractors adhere to OHS requirements  |  |
| (21) | The organisation determines OHS requirements prior to purchasing goods and verifies that these requirements have been met  |  |
| (22) | The organisation has identified and documented a planned response to potential emergency situations |  |
| (23) | The organisation monitors and evaluates its OHS performance including conducting inspections, testing, monitoring, health surveillance, incident investigation and auditing |  |
| (24) | The organisation has procedures for reporting on OHS performance and uses this information to drive improvement  |  |
| (25) | The organisation reviews its approach to OHS management to ensure its continued suitability and effectiveness |  |
|  | Safety systems score  |  |
|  | Total focus area score |  |

### 5.4.5 Accountability

Self-assessment of accountability and responsibility

|  |  |  |
| --- | --- | --- |
| Criterion number | Criterion | Score0 - 4 |
| **Safety systems** |  |
| (1) | Top management representative(s) are clearly endorsed as the organisation’s OHS management representative(s) |  |
| (2) | Specific OHS accountabilities and responsibilities, authorities to act and reporting relationships are defined, documented and communicated | □ |
| **Safety culture** |  |
| (3) | All levels of management and workers are held accountable for OHS performance in accordance with defined responsibilities | □ |
| (4) | Senior management takes action to address under performance and non-conformance  | □ |
| (5) | Senior management recognises, reinforces and supports positive safety performance  | □ |
| (6) | Managers ensure corrective actions arising from inspections, investigations, audits and reviews are implemented and documented in a timely manner | □ |
| (7) | Everyone accepts personal responsibility for ensuring the health and safety of themselves and of others | □ |
|  | Safety systems score  |  |
|  | Safety culture score |  |
|  | Total focus area score |  |

### 5.4.6 Self-assessment summary

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | Senior management commitment | Safety Culture | OHS Systems | Accountability | Overall Score\*\* |
| Safety Systems Score |  | N/A |  |  |  |
| % Safety Systems Score | =(score/4)x25 | N/A | =(score/24)x25 | =(score/2)x25 | =(score/30)x25 |
| Safety Systems Maturity Level\*\*\* |  | N/A |  |  |  |
| Safety Culture Score |  |  | N/A |  |  |
| % Safety Culture Score | =(score/9)x25 | =(score/12)x25 | N/A | =(score/5)x25 | =(score/26)x25 |
| Safety Culture Maturity Level\*\*\* |  |  | N/A |  |  |
| Total Score\* |  |  |  |  |  |
| Total % Score | =(score/13)x25 | =(score/12)x25 | =(score/25)x25 | =(score/7)x25 | =(score/57)x25 |
| Total Maturity Level\*\*\* |  |  |  |  |  |

\* Total Score = Safety Systems Score + Safety Culture Score

\*\* Overall Score = Sum of each focus area score

\*\*\* To determine maturity level, apply the % score to the scale below to determine maturity level (e.g. a score of 58% would indicate a maturity level of Consolidation)

****

## 5.5 Leading the Way Action Plan

The Leading the Way Action Plan is the tool to articulate and drive each department’s OHS improvement strategy.

### 5.5.1 Identifying improvement actions

Government departments can use analysis of the self-assessment results to identify strengths, weaknesses and opportunities for improvement in each focus area. Departments should establish measureable targets for improvement.

The Leading the Way self-assessment data should be used in conjunction with other OHS performance data to identify priorities for action.

The Leading the Way maturity model lends guidance to selecting the most useful change actions for the current level of safety maturity.

Departments should select improvement actions across all four Leading the Way focus areas.

### 5.5.2 Documenting the Action Plan

Departments can use either the sample Action Plan template shown in section 5.4.1 or their own template, provided it is consistent with all elements the sample action plan.

The priority rating assigned to each action should be according to the department’s own risk management methodology.

Development of the action plan should include consultation with:

* the department’s OHS professionals or advisors and
* workers and their representatives, through OHS consultative forums or processes.

The evaluation column should include evidence demonstrating that the action has been implemented and is effective.

### 5.5.3 Monitoring progress of actions

Progress and implementation of action items should be monitored against timelines and reported to senior management.

Departments may periodically re-assess against the maturity curve using the self-assessment tools to gauge whether actions taken are improving their performance in the particular focus area(s).

### 5.5.4 Sample Action Plan Template

|  |  |  |  |
| --- | --- | --- | --- |
| Year | (e.g. January 20XX to December 20XX) | Workplace(s): |  |
| Owner: | (e.g. OHS Committee) | Date completed: |  |

Note: The action plan presented in the following table is a sample only.

| Focus area criteria | Action(s) | Priority | Responsibility | Timeline | Budget | Status | Evaluation |
| --- | --- | --- | --- | --- | --- | --- | --- |
| (e.g.) Senior management commitment to OHS | Senior management nominee to develop an OHS policy in consultation with workers | High | Senior management nominee | 1 June 20XX | $5000 | Action completed 31/05/20XX | Management review of OHS management system |
| Chief Executive Officer endorses OHS policy and communicates expectation of effective implementation | High | Chief Executive Officer | 30 June 20XX | $1000 | In progress | Audit detects:* OHS policy signed by CEO displayed in the workplace
* Staff aware of OHS policy requirements
 |
| (e.g.) Workers and workers representatives feel empowered to raise OHS issues in the workplace | OHS issues are included on all meeting agenda templates | Medium | Executive assistant | 15 September 20XX | $2000 | In progress | Meeting minutes include details of OHS issues raised, include actions/responsibility and monitoring and close out of actions  |
| Performance indicators include number of hazards/incidents raised | High | Senior management nominee | 30 April 20XX | $5000 | In progress | Staff performance management plans.Objectives & targets for teams, divisions, organisation.Reporting. Incident reporting & investigation. Hazard register |
|  | Reward & recognition category for individual/team raising and resolving OHS issues (improving health and safety) | Medium | HR Manager | 1 July 20XX | $3000 | Ongoing | Number of reward & recognition awards for category |
| An agreed OHS issue resolution procedure is developed in consultation with workers and their representatives | High | OHS Manager | 30 April 20XX | $2500 | Action completed 1 April 20XX | Management review of OHS management system |
| (e.g.) OHS training needs identified and training provided | Review and update procedure detailing how to identify and define the OHS training needs of workers | Medium | OHS Manager | 15 August 20XX | $1000 | Not started | Document management processes followedAudit results |
| Conduct consultation with workers to review their OHS training needs | Medium | OHS Manager | 15 September 20XX | $2500 | Not started | Worker feedback |
| Update training needs analysis (TNA) for next year | Low | OHS Manager | 15 October 20XX | $1000 | Not started | Training & Development Manager review conducted |
| Develop a training plan for next year | Medium | OHS Manager | 30 November 20XX | $5000 | Not started | Competency assessments. Audit detects:* implementation of training plan
* updating of TNA
* worker participation in training

Evaluation of training outcomes and training providers |

# 6. Strategic priority 3 – Building and promoting ownership and accountability

## 6.1 Performance indicators

Establishing performance indicators enables a systematic approach to review OHS performance and is useful when an organisation is seeking to:

* establish and measure improvement against its baseline
* measure progress in meeting its objectives and targets
* allow for evidence based planning for continual improvement, and
* compare performance against other departments and learn from the experience of others.

Finding the appropriate performance indicators can be a difficult task. The aim is to measure both the bottom-line results of health and safety as well as how well a department is performing in preventing accidents and incidents. To achieve this, a combination of lag and lead safety performance indicators should be used.

### 6.1.1 Lead indicators

Lead indicators (sometimes referred to as ‘process indicators’) provide a means for departments to measure progress towards achieving their objectives and targets. They provide a measure of activities, interventions or initiatives designed to drive improvement and positively impact performance. Lead indicators are therefore predictors of future performance.

|  |
| --- |
| **Example:**Lead indicators may include:* hazards reported
* % incident investigations completed
* % workers trained
* survey results
* OHS management system development and improvement
* OHS management system implementation (e.g. average OHSMS audit result)
* number of audits conducted
* % of corrective actions completed (audits/ investigations)
* % of management participating in OHS audits
* worker representation (Health and Safety representatives and OHS committees)
* number senior management participating in OHS management systems review
* senior management participation in OHS consultative forums (numbers and % attendance
 |

### 6.1.2 Lag indicators

Lag indicators (sometimes referred to as ‘outcome indicators’) reflect system or operational performance. However, they generally reflect results of past actions. This is because there is often a delay period between implementation of an improvement initiative and achieving measurable changes in outcome results (frequency and severity of injuries/claims).

Outcome performance results are generally the product of a range of interventions rather than being directly attributable to a single initiative. Lag indicators often measure failure in performance (e.g. number of injuries).

Lag indicators may hide potential risks, for example, a low number of injuries is not necessarily indicative that risk controls have been effectively implemented. Similarly, rare but catastrophic risks are often not identified from lag data alone.

|  |
| --- |
| **Example:**Lag indicators include:* total claims
* fatality
* 13 and 26 week claims
* claim costs
* time lost – days/ shifts
* claims by targeted affliction e.g. mental injury, occupational violence (reported under Minimum Data Set)
* legislative compliance e.g. total number of notices issued/ total inspector visits, prosecutions
 |

Advantages of using lag indicators include that they:

* are relatively easy to collect
* are generally well understood, and
* may be used for comparing performance when a common definition and collection process is adopted.

## 6.2 Leading the Way reporting

Reporting performance is an important component in building accountability, promoting ownership and forms the basis for continuous improvement.

Under Leading the Way, OHS performance will be reported in two ways:

* reporting of lead or process indicators
* reporting of lag or outcome indicators.

Appendix 1 illustrates the categorisation of selected lead (process) and lag (outcome) measures across the four Leading the Way focus areas.

**Process reporting** supports the Leading the Way need for flexibility, with measures and methodologies tailored to the priorities of departments. Departments will be collecting and reporting their own process indicators.

**Outcomes reporting** supports the Leading the Way need state-wide consistency, with an agreed set of measures and associated data collection methodology used to compare across all departments. Outcomes indictors will be collected for each department by WorkSafe Victoria.

### 6.2.1 Data collection and analysis – process reporting

Departments will need to establish a data collection procedure(s) using qualitative, quantitative or mixed methods. The data collection process will need to include documentation of the data collected, as well as the data collection methods used.

Collated data should be reviewed and analysed to understand the ‘story’ the data is reflecting; including where the department is performing well, and whether there are opportunities for improvement. Analysis should include discussing the results with relevant stakeholders.

Staff at all levels within the organisation have responsibility and accountability to contribute to data collection to support OHS improvement. Table 2 provides an example of how a department may allocate responsibility and accountability for data collection, analysis and reporting for a nominated performance indicator. Departments may elect to include a similar table within their data collection procedure(s). These accountabilities can be readily integrated into position descriptions and performance plans.

The quality and consistency of reported data can be an indicator of the degree of capability, participation and ownership of health and safety across the organisation (i.e. an indicator of safety maturity).

Table 2: Sample approach to data collection

| Data | Senior management | Managers | Employees |
| --- | --- | --- | --- |
| Performance indicator | * Monitor and analyses performance data against vision, policy, objectives and targets
* Participate in management reviews
* Model participation in programs, report incidents or hazards, consultation
* Revises strategy and direction if required
* Lead organisation level OHS consultation
* Sponsor and resource improvement initiatives
 | * Participate in audits, training, investigations
* Allocate responsibility for corrective actions
* Ensure completion of corrective actions
* Design and/or implement policy and procedures
* Collects and analyses data
* Reports data across organisation (as relevant)
* Contribute to reviews of processes and procedures
* Use consultative processes
 | * Participate in program (e.g. training, audit)
* Report incidents and hazards
* Comply with and use policies and procedures
* Engage in consultation processes
* Contribute to positive solutions to identified issues
* Contribute to maintaining a safe and healthy working environment
 |

Analysis of results for each performance indicator should be used to identify strengths in performance and the underlying reasons. Departments are encouraged to consider documenting case studies on their successes as part of Leading the Way reporting. Case studies provide an opportunity to showcase areas of strong performance and highlight capability to provide assistance to other departments and agencies. Success stories are also relevant to all stages of organisational maturity. Learnings from initiatives that did not have the expected outcomes are also worth sharing.

## 6.3 Process reporting

There is value in publicly (or semi-publicly) reporting selected performance indicator results of OHS processes, for both accountability and to share leading practices. Where practicable, Leading the Way will establish common definitions for process (lead) indicator measures. However, differences in OHS systems maturity and organisational capability may mean there will be some variation in interpretation and application.

Process reporting affords the Victorian public sector rich opportunities to showcase specific areas of strength and potentially establish benchmarking partnerships with other organisations seeking to improve their performance.

Process reporting also holds senior management accountable for continual improvement in safety management and ensures they are acting as enablers for the development of a positive safety culture.

The agreed indicators for Leading the Way process reporting are provided in Table 3. The range of process (lead) indicators includes minimum measures based on legislative requirements, together with additional measures for departments that have moved to Foundation level maturity and beyond. The set of process measures provides both consistency and a degree of flexibility in performance reporting.

A more comprehensive (but not exhaustive) list is included in Appendix 1, with a categorisation to the Leading the Way focus areas.

The indicators illustrate performance across the four focus areas and should relate directly to the department’s improvement priorities and action plan.

The department may elect to report the results of their self-assessments in these focus areas, but if so, the department will need to indicate that these results are subjective.

The process indicators listed also provide levers for individual accountability and engagement at all levels. For example:

* senior management commitment to consultation and review
* management responsibility for implementation of OHS management systems (audit results), conducting incident investigations and completing corrective actions
* Individual responsibility for hazard and incident reporting, using OHS procedures and maintaining a safe workplace (audit results).

Departments that do not have mature information systems in place for OHS reporting and data analysis should make note of this in their reporting and identify it as a key action for improvement.

Table 3A: Leading the Way base process measures for all departments\*

| Data\* | Example definitions |
| --- | --- |
| Hazards | The number of hazards reported in the 12-month period to 30 June each year using the department’s hazard reporting system. Hazard reporting should be viewed as a positive indicator of worker OHS engagement and ownershipThis may be expressed as a rate to allow comparison year-on-year or across departments with a common approach to hazard reporting, common definition and process for data collection. Example if practicable:* Number of hazards reported per 100 full time equivalent workers (FTE)
 |
| Incidents & incident investigations | The number of incidents reported in the 12-month period to 30 June each year using the department’s incident reporting systemThis may be expressed as a rate per 100 FTE.Of the total number of incidents reported in the 12-month period to 30 June each year using the department’s incident reporting system, the percentage of these for which investigations have been completed in the 12month period to 30 June.% incident investigations completed = (total number of investigations completed/ total number of incidents) x 100 |
| Corrective actions and completed actions | The number of corrective actions included within the corrective actions register in the 12-month period to 30 June each year. Of the total number of corrective actions included in the corrective actions register in the 12-month period to 30 June each year, the percentage of these that have been completed% corrective actions completed = (number of corrective actions completed/total number of corrective actions) x 100This may be further categorised as % of high priority corrective actions completed, % of low priority corrective actions completed (etc.) |
| OHSMS development and improvement  | Number of procedures developed and approved and/orNumber of procedures reviewed and refined |
| Training completed | Of the total number of staff employed at the departments, in the 12-month period to 30 June each year the percentage of those that have completed a specified training programs (e.g. OHS induction, OHS management)General OHS induction and training* Worker induction
* Management training
* Senior management training

% of staff completed training = (number of targeted group completed training / total number of staff in targeted group) x 100This may be further categorised as % of senior managers that completed training, % of staff completed training (etc.). |
| Worker consultation and representation  | Number of elected Health and Safety representatives (HSRs) and Deputy Health and Safety representatives (DHSRs)Number of OHS Committees  |
| Senior management commitment – consultation  | Number of senior managers as members of OHS consultative forums% of participation in forums (% senior management attendance at allocated forum, as per minutes) |

\* Data collected by the department.

Table 3B: Leading the Way ature process measures for departments with safety maturity level of Foundation or higher\*

| Data\* | Example definitions |
| --- | --- |
| Audits^ & audit schedule^ audit as defined in glossary | The number of audits conducted in the 12-month period to 30 June each year as part of the organisation’s audit program (e.g. OHSMS, PHMS audits)This may be expressed as a rate: % of workplaces audited / year**Note:** Departments that do not conduct formal OHSMS audits should report on their processes for review of OHSMS implementation and effectiveness and plans for improvement. |
| OHSMS implementation  | OHSMS implementation as average OHSMS audit score (%) |
| Management engagement and commitment – workplace audits | The number of audits conducted in the 12-month period to 30 June each year as part of the department’s audit program, the percentage of these that have included workplace management involvement% of audits involving workplace management = (number of audits involving management / total number of audits conducted) x 100 |
| Senior management commitment – OHSMS review  | Number of senior management participating in departmental OHSMS review and evaluation at least once per two-year cycle |

\* Data collected by the department.

## 6.4 Outcomes reporting

The performance indicators defined in Table 4 below should be reported by departments for the purpose of benchmarking or comparing performance. To ensure the benchmarking provides an equivalent comparison, it is important that indicators selected:

* are defined and that this definition is commonly applied across the benchmark departments, and
* provide data can be measured and quantified.

When benchmarking, opportunities may exist for those departments and agencies that are performing well in a particular area to showcase the strategies that have been implemented to achieve these results.

Leading the Way outcome data is collected by, and sourced from, WorkSafe Victoria.

Table 4: Leading the Way outcome measures for all departments#

| Data\* | Definitions |
| --- | --- |
| Claims per 100 FTE | The number of standardised claims\* reported to agents in the 12-month period to 30 June each year, divided by the per 100 full time equivalent employees (FTE) |
| Claims exceeding 13-weeks (expressed as a percentage of all claims for that organisation) | The number of standardised claims\* to agents in the 12-month period to 31 March each year, that exceed 13 weeks of weekly payments divided by the total number of claims.Claims are included if the employer has paid the time loss excess (10 days of earnings) and the injured worker has been reimbursed for at least 10 additional days of work or on reduced hours.  |
| Claims exceeding 26 weeks (expressed as per of all claims for that organisation) | The number of standardised claims\* to agents in the 12-month period to 31 March each year that exceed 26 weeks of weekly payments divided by the total number of claims. Claims are included if the employer has paid the time loss excess (10 days of earnings) and the injured worker has been reimbursed for at least 10 additional days of work or on reduced hours |
| Fatality | The number of compensable fatalities occurring at the workplace in the 12-month period to 30 June each year. |
| Average fully developed costs - claims | For a group of claims, it is the sum of all payments to date plus the sum of the estimates of the future costs for those claims divided by the number of claims in the group.Group = number of standardised claims\* reported to agents in the 12-month period to 30 June each year. Claims are only included if the employer has paid the time loss excess (10 days of earnings). |
| Average number of days/shifts lost per workers compensation claim | The number of days/shifts lost on average on standardised claims\* reported to agents in the 12-month period to 31 March each year |
| Legislative compliance\*\* | Total number of WorkSafe Victoria Notices issued in 12 months to 30 June.Can be expressed as a rate of notices issued / inspector visit.Total prosecutions  |

# Data collected by WorkSafe Victoria.

\*\* For governance committee reporting

# 7. Strategic priority 4 – Defining and promoting the shared levers for change

The Leading the Way maturity model identifies key levers for change at each maturity level and the recommended process indicators provide key measures for those levers.

Reporting and benchmarking performance on both process and outcomes measures through the Leading the Way governance structure provides the opportunity for departments to collaborate on resolving common issues, share expertise, learnings and solutions and collectively demonstrate government as leader and exemplar in health and safety.

## 7.1 Performance reporting and benchmarking

### 7.1.1 Benchmarking

Benchmarking performance supports sound decision making, organisational learning and continuous improvement. This is the primary objective of performance reporting and benchmarking under Leading the Way.

There are many forms of benchmarking.

Departments should benchmark their performance against themselves, that is performance trends against a defined baseline (baseline benchmarking). This supports departments to evaluate the impact of initiatives on OHS performance.

Departments may also benchmark performance against one another (comparison benchmarking) both through the outcome reporting and show casing areas of improvement identified through the process reporting.

### 7.1.2 Reporting timeframes and methodology

Departments will prepare OHS annual performance reports for senior Whole-of-Victorian-Government forum using the templates in 7.2 and 7.3 or an alternative agreed template.

These performance reports will be presented to OHS Leadership Group in October of each year.

The OHS performance report template below is designed to measure performance across similar departments and progress against baseline data.

Key to trend indicators

|  |  |
| --- | --- |
| ↑ x% | Green is an improvement of 5% or more on the base period |
| -- | Yellow is within 5%. |
| ↓ x% | Red is a deterioration of 5% or more |

## 7.2 Process report template

Annual report (October)

| Year: 20XX | Basic processes | Mature processes |
| --- | --- | --- |
| Hazards\* | Incidents\* | Corrective actions\* | OHSMS\* | Training\* | Worker representation\* | OHSMS Audit\* | Manager engage-ment – work-place audit\* | Senior\* management commitment - OHSMS review | OHSMS review\* |
| Department of Economic Development, Jobs, Transport and Resources |  |  |  |  |  |  |  |  |  |  |
| Department of Education and Training |  |  |  |  |  |  |  |  |  |  |
| Department of Environment, Land, Water and Planning |  |  |  |  |  |  |  |  |  |  |
| Department of Justice and Regulation |  |  |  |  |  |  |  |  |  |  |
| Department of Premier and Cabinet |  |  |  |  |  |  |  |  |  |  |
| Department of State Development, Business and Innovation |  |  |  |  |  |  |  |  |  |  |
| Department of Treasury and Finance |  |  |  |  |  |  |  |  |  |  |
| Department of Health and Human Services |  |  |  |  |  |  |  |  |  |  |
| Victoria Police |  |  |  |  |  |  |  |  |  |  |
| WorkSafe Victoria |  |  |  |  |  |  |  |  |  |  |

Equivalent report for relevant metrics would be presented for process performance for targeted mental health improvement area under the Minimum Data Set (MDS).

## 7.3 Outcomes report template

Annual report (October)

| Year: 20XX | Claims | 13-week claims | 26-week claims | Fatalities | Average claim cost | Average days/shifts lost | Legislative compliance |
| --- | --- | --- | --- | --- | --- | --- | --- |
| Department of Economic Development, Jobs, Transport and Resources |  |  |  |  |  |  |  |
| Department of Education and Training |  |  |  |  |  |  |  |
| Department of Environment, Land, Water and Planning |  |  |  |  |  |  |  |
| Department of Justice and Regulation |  |  |  |  |  |  |  |
| Department of Premier and Cabinet |  |  |  |  |  |  |  |
| Department of State Development, Business and Innovation |  |  |  |  |  |  |  |
| Department of Treasury and Finance |  |  |  |  |  |  |  |
| Department of Health and Human Services |  |  |  |  |  |  |  |
| Victoria Police |  |  |  |  |  |  |  |
| WorkSafe Victoria |  |  |  |  |  |  |  |

Equivalent report for relevant metrics would be presented for outcome performance for targeted mental health improvement area under the Minimum Data Set (MDS) e.g.

* Mental injury
* Occupational Violence

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# Appendix 1: Process (lead) and outcome (lag) performance indicators

Examples of outcome (lag) performance indicators

| Performance indicator | Senior management commitment | Safety culture | OHS systems | Accountability | Return to work |
| --- | --- | --- | --- | --- | --- |
| Fatalities |  |  |  | Tick |  |
| Injuries |  |  |  | Tick | Tick |
| Incidents |  |  |  | Tick |  |
| Claims |  |  |  | Tick | Tick |
| Claim costs |  |  |  | Tick | Tick |
| Prosecutions/fines | Tick |  | Tick | Tick | Tick |
| Compliance WSV notice/ visit rate |  |  | Tick | Tick | Tick |
| Return to work index |  |  |  |  | Tick |

Examples of process (lead) performance indicators

| Performance indicator | Senior management commitment | Safety culture | OHS systems | Accountability | Return to work |
| --- | --- | --- | --- | --- | --- |
| Objectives & targets | Tick | Tick | Tick | Tick |  |
| OHS communications | Tick | Tick | Tick |  |  |
| Senior management participation in OHS consultative forums | Tick | Tick | Tick | Tick |  |
| Consultation records |  | Tick | Tick | Tick | Tick |
| Designated work groups |  | Tick | Tick |  |  |
| Health and safety representatives |  | Tick | Tick |  |  |
| Number of inspections | Tick |  | Tick |  |  |
| Number of hazards reported | Tick | Tick |  |  |  |
| % corrective actions completed | Tick |  | Tick | Tick | Tick |
| % workers trained | Tick | Tick | Tick |  | Tick |
| % senior managers trained | Tick |  | Tick | Tick | Tick |
| Number of risk assessments |  |  | Tick |  |  |
| Number of safety meetings |  | Tick | Tick |  |  |
| Survey results |  | Tick |  |  | Tick |
| Time between reporting incident and investigation |  | Tick | Tick | Tick |  |
| Number of OHSMS procedures developed or reviewed | Tick |  | Tick |  |  |
| Number of audits conducted |  |  | Tick |  | Tick |
| % workplaces audited  |  |  | Tick | Tick |  |
| % audits conducted with workplace management |  | Tick | Tick | Tick |  |
| % OHSMS implementation | Tick | Tick | Tick | Tick |  |
| Number of senior management participating in OHS systems review  | Tick | Tick | Tick | Tick |  |
| Number of OHS issues raised | Tick | Tick | Tick |  |  |

# Appendix 2: Glossary

Definitions are from References 1, 7, 13, 20, 21, 22, 24

**Audit:** The systematic and independent examination against defined criteria to determine whether health and safety activities and related results comply with planned arrangements and whether these arrangements are implemented and whether these arrangements are suitable to achieve the organisation’s policy and objectives

**Benchmarking:** Tool for improving performance by learning from best practices and understanding the processes by which improvements have been achieved

**Baseline benchmarking:** Measure of improvement against established baseline point

**Comparison benchmarking:** Comparison of performance against similar organisations

**Continuous improvement:** The process of enhancing health and safety to achieve improvements in overall health and safety performance, in line with the organisation’s health and safety policy

**Management:** Person/s who has, to any extent, the management or control of a workplace

**OHS objectives:** Overall health and safety goal in terms of health and safety performance, arising from the health and safety policy that an organisation sets itself to achieve, and which are quantified where practicable

**OHS performance:** The measureable results of the OHSMS related to the organisations control of health and safety risks, based on its OHS policy, objectives and targets. Performance measurement includes measurement of OHS management activities and results

**OHS policy:** Statement by the organisation of its intentions and principles in relation to its overall health and safety performance which provides a framework for action and for setting its health and safety objectives and targets

**OHS target:** A detailed performance requirement, quantified wherever practicable and pertaining to the organisation, that arises from the health and safety objectives, and that needs to be met in order to achieve those objectives

**Performance benchmarking:** Comparison of an area of interest using one or more indicators resulting in a standard, or point of reference and depending upon having a standardised method for collecting and reporting the data underpinning the indicators on which the comparisons will be based

**Performance indictors:** A selected indicator of how effectively a process is operating against objectives. These indicators can be quantitative or qualitative and the choice is dependent on the types of element being used to measure, as appropriate to the organisation

**Process benchmarking:** Analysis of a sequence of activities and comparisons with similar functions to determine the best practice organisations, to determine the quality of the organisation’s own processes and to improve those processes

**Process:** A set of inter-related resources and activities that transform inputs into outputs

**Stakeholder:** Any person or organisation with the workplace that can affect or be affected by or perceive themselves to be affected by the decisions or activities related to health and safety factors within the workplace

Safety culture reflects the attitudes, values and priorities of management and workers and their impact on the development, implementation, performance, oversight and enforcement of safety and health in the workplace

**Senior management:** An individual, or a group of individuals, with executive responsibility for the organisation

**Top management:** The level of management within an organisation directly accountable to its governing body

**Worker:** A person employed by the organisation or a person under the day-to-day control of the organisation, whether pain or unpaid

**Worker representative:** A non-managerial worker who is a member of the OHS committee, representative of other workers in accordance with requirements of law or collective agreements or selected by non-managerial workers for other reasons

**Workplace:** A place, whether or not a building or structure, where workers or self-employed persons work