DOCUMENT MANAGEMENT & CONTROL GUIDELINE

OVERVIEW

(1) Victoria University (VU) is committed to implementing a document management system that meets the requirements of ISO 45001:2018 (Clause 7.5) Occupational Health and Safety Management Systems.

(2) This guideline document outlines and communicates the process for developing documents related to the Workplace Health, Safety & Wellbeing Management System (HSWMS).

(3) VU recognises the importance of effective HSW document control to:

- ensure accurate information is available to relevant stakeholders,
- maintain consistency in managing health and safety risks, and
- support quality control and continuous improvement efforts.

PURPOSE & SCOPE

(4) The purpose of this guideline is to support the establishment and maintenance of effective practices for managing HSW documents, so that they:
`
- can be readily located and accessed
- are periodically reviewed, updated, and endorsed as needed
- have obsolete versions identified and removed from points of issue and use.

(5) HSW documentation and data should be legible, clearly dated (with revision dates), readily identifiable, and maintained in an orderly manner for an appropriate retention period.

(6) It is recommended that HSW documentation be reviewed at least every three years, or sooner if significant changes occur.

DEFINITION & ACRONYMS

(7) **HSW:** Health, Safety & Wellbeing.

(8) **HSWMS (Health, Safety & Wellbeing Management System):** The suite of documents, resources, and tools systematically implemented to manage workplace health and safety risks, accessible via the VU Policy Library.

(9) **HSW Controlled Document:** Documents for which the distribution and status need to be kept current to ensure users have the most recent approved version.

(10) **HSW Document Controller:** A member of the HSW team responsible for coordinating document control activities at the organisational level.

(11) **Local HSW Document:** Documents developed by business units to address local needs (e.g., task-specific guidelines, Safe Work Instructions, or lab-specific safety documents).

(12) **University HSW Document:** Documents developed by the VU HSW team intended for use across all departments and business units under the HSWMS.

POLICY

(13) Refer to the Health and Safety Policy

RESPONSIBILITIES

HSW DOCUMENT CONTROLLER	The HSW Document Controller should be responsible for : • coordinate the implementation of effective HSW document control practices, • develop documentation, assign control numbers, and establish record-keeping protocols, • review and endorse University HSW documents, and • provide guidance and advice on developing Local HSW documents.
HSW TEAM	The HSW team should be responsible for : • oversee document design to ensure consistency with required formats, • create University-wide HSW documents as needed, • facilitate consultation, stakeholder communication, document review, verification, retention, and secure disposal processes.

DOCUMENT DESIGN

(1) HSW documents shall be created using approved University templates to ensure consistency in style, format and document control properties.

(2) Exceptions to standard templates include evacuation diagrams, safety posters, OHS Alerts and brochures.

(3) Business Units must consult the HSW team regarding document design and control requirements.

DOCUMENT PROPERTIES

(4) Each document must include a unique control number in the format:

HSW– Element Number–Document Type Acronym–Sequential Number–Version, e.g., HSW-3.1-F-03-0.0.

(5) The HSW prefix is constant. Every HSW document number will start with HSW.

Document Type	Acronym
Manual	MAN
Policy	POL
Procedure	PR
Safe Work Procedures	SWP
Work Instruction	WI
Guidelines	GL
Forms & Checklists	F

(6) Versioning protocols:

a. Minor amendments (e.g., spelling or formatting corrections) result in an incremental increase in the decimal version number (e.g., 1.0 → 1.1).

b. Major amendments require an increase in the whole version number (e.g., 1.1 → 2.0).

(7) Current review authorization date and next review date, scheduled within three years.

(8) Document headers including the University logo (right-aligned) and document title (left-aligned).

HAZARD MANAGEMENT (IDENTIFICATION & RISK ASSESSMENT)

HSW RISK MANAGEMENT FORM

(9) Document footers containing preparation details, revision dates, document number, approval details, and page numbering.

Prepared By:	Sr. Advisor HSW	Date Revised:	10/07/2022	Document No:	HSW-1.4-F-05-1.0
Approved By:	HSW Document Controller	Next Revision Date:	10/07/2025	Page	1 of 5

Health, Safety & Wellbeing Document Creation & Amendment

(10) All requests to create and modify University HSW Documents or Local HSW Documents must be submitted to the HSW Document Controller via email.

(11) Each request must include confirmation of approval and endorsement from the Head of School or Director of the originating business unit.

(12) Documents will be developed or amended based on priority, which will be established through consultation between the relevant business unit, the HSW Document Controller and the Health & Safety Representative(s).

Consultation and Communication

(13) All relevant stakeholders shall be consulted during document development.

(14) Evidence of consultation, such as meeting minutes, memorandums, emails, or records on the VU Policy Library bulletin board, must be retained.

(15) Prior to publication, appropriate strategies for effectively communicating documents to relevant personnel shall be considered.

Location of HSW Documents

(16) **University HSW Documents:** The HSW team shall coordinate with relevant departments to ensure documents are published in the VU Policy Library and SharePoint.

(17) **Local HSW Documents:** Department/School/College/Business Unit shall ensure documents are available on departmental websites or SharePoint.

Obsolete Documents

(18) Obsolete documents should be promptly identified and removed from all relevant web pages and distribution points.

(19) Departments/Business Units should notify the HSW team when Local HSW documents become obsolete.

(20) The HSW team should communicate the status of obsolete University HSW documents to relevant stakeholders.