

## HS&E Compliance Audit Terms of Reference

### 1.0 Purpose:

- 1.1 To assess compliance of Institutes and Departments (Academic and Support) under the AU Health, Safety and Environment Policies and Procedures
- 1.2 To assess the management of risk in line with Institute and Departmental HSE Handbooks, reflecting AU HS&E Policies and Procedures
- 1.3 To identify any high risk activities and practices
- 1.4 To ensure that goods and services financed have been considered under relevant health and safety law.
- 1.5 To confirm the management system and document control of health and safety documentation, such as risk and COSHH assessments.
- 1.6 Proactively review activities and their control processes, providing recommendations for improvement.

### 2.0 Scope:

- 2.1 All University institutes and research groups fall within the remit of the Institute/Departmental audit and are scheduled at appropriate intervals.
- 2.2 The audit will consider the adequacy of arrangements in place to ensure the completion and communication of health and safety assurance documentation.
- 2.3 Areas under review will be prioritised by their level of risk. Representative areas will be audited.
- 2.4 The scope covers the control, management and governance of University risks, but does not question policies and procedures approved by Council.
- 2.5 Specific scopes are presented on an individual audit basis and agreed in writing
- 2.6 The overall audit scope should reflect the AU HS&E Policies and Procedures and therefore the Departmental handbooks.

### 3.0 Definitions and Abbreviations:

- 3.1 *Internal Audit*: A systematic, independent and documented process for obtaining audit evidence and evaluating it objectively to identify any health, safety or environmental concerns.
- 3.2 *AU HS&E*: Aberystwyth University Health, Safety and Environment Department.
- 3.3 *ToR*: Terms of Reference.
- 3.4 *NCR*: Non-conformance report.

### 4.0 General:

4.1 The AU HS&E Department will ensure that AU Policies and Procedures reflect current HSE legislation. Any changes in AU HS&E policies and practices will be communicated to the Institutes and Departments on publication.

### **5.0 Responsibilities:**

5.1 The Institute Manager/HoD will arrange a meeting with the auditor(s) to discuss this ToR and amend as appropriate to their facilities and activities.

5.2 The Institute Manager/HoDs will arrange group representatives for individual sections of the agreed audit schedule.

5.3 The Institute Manager/HoDs will define areas which will be audited on the audit schedule and discuss this with the appointed auditor(s).

5.4 A group representative will need to be available to show the auditor(s) around facilities at agreed times.

5.5 A group representative must be available to present and review paperwork at the agreed times.

5.6 The Institute Manager/HoDs are responsible for retaining copies of the audit report, either electronically or in hard copy.

5.7 The Institute Manager/HoDs will be responsible for rectifying any actions or observations highlighted in the audit report.

Institute Manager/HoD shall update progress on agreed action points and recommendations

### **6.0 Procedure**

6.1 A meeting prior to the audit will be arranged where the ToR, scope and schedule will be agreed with the appropriate managers.

6.2 The appointed auditor shall undertake each incremental audit in accordance with the defined scope, audit criteria and schedule.

6.2.1 During the audit, the appointed auditor shall classify their findings relative to each element of the audit criteria, as a recommendation or action.

6.2.2 Upon completion of the incremental audit, the appointed auditor shall produce an audit report for the Institute Manager/HoDs, summarising their findings.

6.2.3 The auditor(s) shall detail any agreed actions and recommendations in the audit report.

6.2.4 A re-visit shall be arranged if necessary to check the implementation of any major actions

6.2.5 The actions shall be reviewed at an appropriate time as defined by the audit schedule.

**7.0 Safety:**

7.1 All relevant Health and Safety Policies and Procedures must be adhered to.

**8.0 Associated Documentation:**

8.1 Audit schedule

8.2 Action requests recorded on the AU HS&E NCR SharePoint page

8.3 Audit report