



Australian Government

Department of Immigration and Border Protection

Attachment A

DECISION RECORD

Request Details

FOI Request FA14/06/01178
File Number ADF2014/22785

Scope of request

"I write seeking information under the Freedom of Information Act, specifically the Ernst and Young review of Workplace Health and Safety, listed as Audit 24 and due to have been completed on 20 June."

Documents in scope

1. Internal Audit Report – Review of Workplace Health & Safety – Draft Final Report – 17 June 2014 (16pg)

Authority to make decision

I am an officer authorised under section 23 of the FOI Act to make decisions in respect of requests to access documents or to amend or annotate departmental records.

Information considered

In reaching my decision, I have considered the following:

- ✓ The *Freedom of Information Act 1982*;
- ✓ Departmental files and/or documents (identified above); and
- ✓ The Australian Information Commissioner's Guidelines relating to access to documents held by government.

Reasons for decision

I am satisfied that I have been provided with all the relevant documents to consider in my decision. I have considered the documents and am satisfied that no exemptions apply. Therefore, I am releasing the relevant documents in full.

Mel Heggart
Authorised decision maker
FOI & Privacy Policy Section
Parliamentary and Executive Coordination Branch
Department of Immigration and Border Protection
Phone (02) 6264 3131
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4 August 2014



Australian Government

Department of Immigration and Border Protection

Attachment B

SCHEDULE OF DOCUMENTS TO DECISION RECORD

FOI Request FA14/06/01178
File Number ADF2014/22785

1. Other documents;

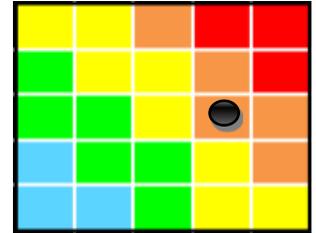
Pages	Description	Decision	Legislation
16	Internal Audit Report – Review of Workplace Health & Safety – Draft Final Report – 17 June 2014	Release in full	



Australian Government

Department of Immigration and Border Protection

Internal Audit Report Review of Workplace Health and Safety Draft Final Report



Date: 17 June 2014

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Milestones

Audit reference	6/ 2013 – 2014
Revised date report sent to DAC	
Work undertaken by	EY

Milestone	Agreed completion date	Revised completion date
Planning	4/04/2014	27/04/2014
Fieldwork	2/05/2014	20/05/2014
Final report with management comments to DAC secretariat	13/06/2014	13/06/2014

Task	Planned date	Actual date	Variance (days)	Reason for variance
Commencement of planning stage	17/03/2014	17/03/2014	-	
Scoping meeting (draft audit plan based on high level scope)	01/04/2014	01/04/2014	-	
Draft plan to IA	24/04/2014	24/04/2014	-	
Draft plan to lead accountable	24/04/2014	24/04/2014	-	
Draft plan to DAC	24/04/2014	02/05/2014	8	
Final DAC approval of plan (Completion of planning)	27/04/2014	07/05/2014	10	Delays in finalising internal audit plan.
Order Form approval	27/04/2014	07/05/2014	10	Follow-On from above
Entry interview	28/04/2014	12/05/2014	14	Follow-On from above
Commencement of fieldwork stage	28/04/2014	09/05/2014	11	Follow-On from above
Completion of fieldwork	20/05/2014	27/05/2014	7	Follow-On from above
Draft discussion paper to lead accountable	20/05/2014	8/06/2014	18	Initial Timeframes were optimistic
Exit interview	23/05/2014	12/06/2014	20	
Draft audit report to IA	28/05/2014	13/06/2014	15	
Draft audit report to lead accountable for management comments	28/05/2014	13/06/2014	15	
Final draft report with management comments to audit manager	03/06/2014	16/06/2014	13	
Final draft report to DAC	13/06/2014	17/06/2014	4	

1. Executive Summary

1.1 Context and scope

The *Work Health and Safety Act 2011* (the 'WHS Act') commenced on 1 January 2012. This introduced a number of fundamental changes to the way the Department and its employees and contractors manage workplace health and safety (WHS) risks and incidents. Key requirements include:

- A person conducting a business or undertaking (PCBU) must provide and maintain a work environment that is without risks to the health and safety of workers (i.e. employees and contractors) so far as is reasonably practicable
- An Officer¹ of a PCBU must exercise due diligence to acquire knowledge of WHS hazards and risks, ensure and verify the provision of appropriate resources and processes to minimise WHS risks and ensure appropriate processes are in place for receiving and considering information relating to incidents, hazards and risks

The complex and dynamic environment in which the Department operates requires the Department to have a dedicated focus on work health and safety (WHS). Failure of the Department to establish effective assurance mechanisms to track the Department's compliance with new WHS laws may expose the Department and individual Officers and workers to the risk of regulatory action, and in some cases, may lead to criminal offences under the WHS laws.

The objective of this internal audit was to assess whether the Department is meeting the due diligence requirements for Officers under the WHS Act.

The scope of the internal audit was to perform a gap analysis of the Department's compliance with Officers' due diligence requirements under the WHS Act as detailed in section 27(5) of the WHS Act. This comprised analysing compliance against the following requirements:

- s27(5)(a) Taking reasonable steps to acquire and keep up-to-date *knowledge* of WHS matters
- s27(5)(b) Taking reasonable steps to gain an *understanding* of the hazards and risks associated with the Department's operations
- s27(5)(c) Taking reasonable steps to use appropriate *resources* and processes to eliminate or minimise WHS risks
- s27(5)(d) Taking reasonable steps to ensure appropriate *system processes* are in place to receive, consider and to respond to information regarding incidents, hazards and risks
- s27(5)(e) Taking reasonable steps to ensure the Department implements processes for *comply* with obligations under the WHS Act
- s27(5)(f) Taking reasonable steps to *verify* the provision and use of the resources and processes referred to in (c) to (e)

1.2 Key findings and recommendations

A commitment to health and safety of workers is evident at the Department and a variety of health and safety risk identification, prevention and management programs are in place to assist officers in meeting their due diligence requirements. This includes the Professional Support Framework for all employees deployed to high risk facilities, which incorporates a resilience and support program, medical assessments and vaccinations, onsite counselling support, post-deployment debriefs, Immigration Detention Facility (IDF) manager support program and professional support training.

There is a WHS risk assessment process which must be completed in the planning phase of compliance, community status resolution and identity activities with a standard operating procedure on mitigating common risks. There are also WHS training courses provided to all employees, a

¹ As per Comcare, *Guidance for Officers in Exercising Due Diligence*, "Officers are senior managers who determine how a PCBU will operate and they make, or participate in making, decisions on allocating resources which affect health and safety."

hazard inspection and workplace environment scan program for all Department controlled facilities, incident reporting processes and governance committees including the National OHS Committee. These programs assist Officers in meeting the due diligence requirements around acquiring knowledge of WHS matters, understanding hazards and risks, using appropriate resources to minimise WHS risks and using system processes to receive and respond to information regarding incidents, hazards and risks.

Internal Audit has performed a gap analysis that details the Department's compliance with Officers' due diligence requirements under the WHS Act. Refer to Appendix A .Internal Audit has identified improvement opportunities to strengthen the Department's compliance with Officers' due diligence requirements under the WHS Act.

These improvement opportunities address the specific gaps identified at Appendix A, and are particularly focused on strengthening the internal assurance and governance over WHS at the Department. Internal Audit's recommendations primarily relate to:

- WHS related information provided to staff and management;
- Resources available to staff to enable the effective management of WHS risks, including the sufficiency of services provided under the Department's EAP and the management of trend analysis and reporting using information technology systems; and
- Central management of WHS risk assessments and assurance activities, including incorporating hazard inspection trends into risk assessments approved by senior management, establishing a process to track OPC issues raised in quarterly reports and incorporating Divisional risk assessments into assurance programs.

On the basis of the risks presented by the identified control weaknesses, the 'Possible' likelihood of these risks arising and the 'High' consequences of their impact on the Department, Internal Audit's assessment utilising the Department's risk matrix of these findings is 'High'.

Appendix B contains the detailed scope and approach for this internal audit. Appendix C includes the list of stakeholders consulted during this internal audit and Appendix D contains the list of documents reviewed.

The total number of findings identified and their associated priority are detailed in the table below.

Extreme	High	Medium	Low / Business Process Improvements (BPIs)
0	1	0	0

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We report the following finding and recommendations:

2.1 High	<p>Finding</p> <p>Executives and senior managers are officers under the WHS Act and accordingly have due diligence responsibilities under s27 (5) of the Act. A gap analysis has been performed that details the Department's compliance with Officers' due diligence requirements under the WHS Act. Refer to Appendix A. Executives and senior managers are not currently taking all reasonable steps to exercise their due diligence responsibilities.</p> <p>Risk exposure</p> <p>The implications of the Department being unable to demonstrate compliance with all relevant requirements of the WHS Act and Regulations may include:</p> <ul style="list-style-type: none">• Not protecting workers against harm to their health, safety and welfare through the elimination or minimisation of risks arising from work (which is the main objective of the WHS Act as per section 3(1))• Reputational risk to the Department including political, media and public scrutiny• Risk of penalties (fines of up to \$3M for body corporate or \$600k for an Officer and imprisonment) as defined under s.31-33 of the WHS Act for failure to comply with health and safety duty <p>Recommendation</p> <p>Internal Audit recommends that the Department:</p> <ol style="list-style-type: none">A. Ensure all divisions complete and forward a WHS risk assessment register to the Health and Safety Section at the National Office as part of the annual business planning process. A process should be put in place to ensure that trends and key findings from the hazard inspection program are used to update the risk assessment registers.B. Following the receipt and review of the divisional WHS risk assessment registers for FY14, the WHS assurance work plan be reviewed to prioritise high risk divisions and activities. Assurance activities should then be performed at high risk facilities and divisions including legal compliance reviews to test policies, procedures and practices in place for complying with the WHS Act.C. A review of the current EAP services be performed in consultation with Offshore Detention Operations to determine the effectiveness of the current services and whether they need to be extended or modified to ensure appropriate resources are in place to minimise and manage health and wellbeing risks associated with working at Offshore Processing Facilities. After this review, the levels of service provided and resources available to staff should be widely communicated including to OPCs to ensure that staff understand the WHS resources available to them to minimise risks to health and safety.D. Formal corrective actions be raised to close out the issues identified in the January to March 2014 Quarterly Summary report for Offshore Processing Centres. The corrective actions should be monitored by the National OHS Committee in consultation with relevant Offshore Processing Centre personnel.E. Options for the utilisation of information technology systems be investigated to determine how the incident and claims trend reporting processes could be streamlined, made less manual and provide more useful analysis of information in a timely manner.F. The suite of WHS policies be reviewed for currency, opportunity for consolidation and effectiveness in enabling divisions to identify and manage their WHS risks and updates made accordingly. Following this review, key risk identification, prevention and management policies should be issued to Assistant Secretaries and Directors.G. A specific executive and senior manager training module on managing WHS risks be developed which includes due diligence requirements under the WHS Act and specific activities that executives and senior managers should perform to exercise these requirements.
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Freedom of Information Act 1982

Management response

Agree.

2.1A: The department ensures each division completes an annual risk assessment as part of the annual business planning process. The Health and Safety section in national office will continue to coordinate this activity, including the maintenance of the risk assessment register.

The department will review its current process of updating the risk assessment register to incorporate the findings from the Hazard Inspection Report programme to ensure continuity and currency when significant changes to business operations/policy occur. The department will also ensure that the First Assistant Secretary for each division is involved in the Hazard Inspection process.

Area responsible for implementation: PSSD – WEB – Health and Safety
Implementation date: 30 September 2014

2.1B: The department will review and update the WHS assurance work from FY14 to ensure the high risk divisions and activities are given priority in line with current resourcing capability in performing this body work. A revised programme of work will be implemented by 31 July 2014.

Area responsible for implementation: PSSD – WEB – Health and Safety
Implementation date: 30 June 2015

2.1C: The department implemented the Professional Support Framework (PSF) in early 2014 to provide enhanced EAP services to staff deployed at the Offshore Processing Centres (OPCs). This included providing on-site EAP services to the OPCs four days a month from March 2014. Based on service provider, business area and staff feedback, on-site EAP service levels are currently being reviewed in consultation with Offshore Processing Operations. This will determine whether current services need to be extended or modified. Once there is agreement the OPC network will be advised of the changes. This will be reviewed on a quarterly basis or as required.

The department will look to further streamline WHS communication to staff deployed to the OPCs and the OPC business area to ensure there is a better understanding of the PSF process and on-site EAP service levels.

Area responsible for implementation: PSSD – WEB – Health and Safety & Offshore Processing Coordination section
Implementation date: 30 September 2014

2.1D: The department will implement a formal process to ensure the issues raised in the January 2014 to March 2014 OPC WHS Quarterly Summary are actioned and resolved in a timely manner. This includes the recent implementation of formal, monthly meetings with OPC business areas to monitor progress. Updates will be communicated to relevant stakeholders, including the National OHS Committee.

Area responsible for implementation: PSSD – WEB – Health and Safety & Offshore Processing Coordination section
Implementation date: 30 September 2014

2.1E: The department agrees with the recommendation and is aware of the limitations of having various reporting systems that are not currently linked to provide optimal analysis of information. The department will look to research available options in order to improve this process.

Area responsible for implementation: PSSD & Technology Services Division
Implementation date: 31 December 2014

2.1F: The department agrees with this recommendation and has implemented an action plan to review, consolidate and significantly reduce the number of current WHS policies. This work is occurring in consultation with the relevant business areas. When finalised, the policies will be issued to the relevant Directors and Assistant Secretaries and made available to all staff on the department's intranet.

Area responsible for implementation: PSSD – WEB – Health and Safety
Implementation date: 30 September 2014

2.1G: The department currently has a range of WHS training modules in place for APS and Executive Level staff that address due diligence requirements and management of WHS risks in the workplace.

The department will review its training programme to include the development of a similar training module to target the role and requirements of SES staff in exercising their due diligence and WHS obligations.

Area responsible for implementation: PSSD & Status Resolution Services – Planning & Programming – Workforce Management Training & Support
Implementation date: 31 December 2014

APPENDIX A – Gap analysis

The following gap analysis details the Department's compliance with Officers' due diligence requirements under the WHS Act as detailed in section 27(5) of the WHS Act.

Ref.	Work Health and Safety Act 2011 Reference s27(5) In this section, due diligence includes taking reasonable steps:	Assessment	Recommendation
1	(a) to acquire and keep up-to-date knowledge of work health and safety matters; and	<p>The Department has implemented a range of training programs for executives and senior managers to provide knowledge of the WHS Act and supporting regulations and health and safety principles and practices. This includes new manager training on WHS, pre-deployment training which includes WHS and leadership modules, department wide mandatory e-learning on WHS (annual) and presentations on managing specific hazards on an as needs/requested basis. There are also WHS guidance documents available on the department's intranet site. .</p> <p>However, a specific training program for executives and senior managers on the specific duties and due diligence requirements of officers under the WHS Act is not available.</p>	<p>It is recommended that a specific executive and senior manager training module on managing WHS risks be developed which includes due diligence requirements under the WHS Act and specific activities that executives and senior managers should perform to exercise these requirements.</p>
2	(b) to gain an understanding of the nature of the operations of the business or undertaking of the person conducting the business or undertaking and generally of the hazards and risks associated with those operations; and	<p>WHS risk assessment registers have been received by the Health and Safety section from the Manus and Nauru OPCs, the Accounting and Financial Control Branch, the Compliance and Case Resolution Division (draft), the Technology Services Division, the Financial Strategy and Budgets Branch, the Migration and Visa Policy Division and the Client Strategy & Performance Division. In addition, the <i>Manus and Nauru Offshore Processing Centre – risk analysis</i> (KPMG, 4 April 2014) has been received which includes safety and security risks.</p> <p>Hazard inspections are required to be completed by Work Groups and forwarded to state/territory WHS coordinators and to the Health and Safety Section. A sample of completed inspection reports were sighted by Internal Audit.</p> <p>Internal Audit has identified that although specific risk assessments occur within some of the other divisions which incorporate WHS, a complete WHS risk assessment register is not available for them centrally.</p> <p>Internal Audit notes that interviewees were aware of the requirement for hazard inspections. However, stakeholders consulted were unable to confirm of whether hazard inspections did in fact take place. Stakeholders also advised that they did not see the results of the inspections (either in raw or summary form).</p>	<p>It is recommended that all divisions complete a WHS risk assessment register which is signed off by the relevant Assistant Secretary and provided to the relevant Deputy Secretary as well as to the Health and Safety section.</p> <p>These risk assessments should incorporate trends from the reported hazard inspections and should be updated on an annual basis or when a significant change to operations occurs.</p>

Ref.	Work Health and Safety Act 2011 Reference s27(5) In this section, due diligence includes taking reasonable steps:	Assessment	Recommendation
3	(c) to ensure that the person conducting the business or undertaking has available for use, and uses, appropriate resources and processes to eliminate or minimise risks to health and safety from work carried out as part of the conduct of the business or undertaking; and	<p>The department has implemented a WHS post-deployment briefing program for all deployed personnel. This initiative enables employees to report WHS issues and concerns and provide suggestions on improvements. A range of issues were identified in the January to March 2014 Quarterly Summary report for Offshore Processing Centres (OPCs). The Health and Safety Section has provided responses to addressing these issues.</p> <p>The Department has in place a range of WHS policies (approximately 70). These are available to staff on the Department's intranet. Internal Audit notes that WHS policies and procedures are currently being reviewed.</p> <p>The January to March Quarterly Summary report for Offshore Processing Centres identified some concerns raised by staff in relation to access to the Department's EAP provider. While EAP services were available to staff, communication to staff about service standards and levels of access provided could be improved to ensure staff fully understand the resources available to them. This will prevent misalignment of service level expectations between the Department and employees, particularly at OPCs.</p>	<p>It is recommended that the suite of WHS policies be reviewed for currency, opportunity for consolidation and effectiveness in enabling divisions to identify and manage their WHS risks. Following this review, key risk identification and management policies should be issued to Assistant Secretaries, First Assistant Secretaries and Directors.</p> <p>It is recommended that formal corrective actions be raised to close out the issues noted in the Jan to March 2014 Quarterly Summary Report for OPCs and be monitored by the National OHS Committee in consultation with relevant Offshore Processing Centre personnel.</p> <p>It is further recommended that a review of the current EAP services be performed in consultation with Offshore Detention Operations to determine the effectiveness of the current services and whether they need to be extended or modified to ensure appropriate resources are in place to minimise and manage health and wellbeing risks associated with working at Offshore Processing Facilities. After this review, the levels of service provided and resources available to staff should be widely communicated including to OPCs to ensure that staff understand the WHS resources available to them to minimise risks to health and safety.</p>
4	(d) to ensure that the person conducting the business or undertaking has appropriate processes for receiving and considering information regarding incidents, hazards and risks and responding in a timely way to that information; and	<p>Quarterly reports are prepared at the Group level for reporting to the National OHS Committee which meets quarterly.</p> <p>Internal Audit notes that the current IT reporting systems for incidents and claims does not provide capability to perform detailed analysis of reported information. As such, the summary reporting process for WHS incidents and claims is very manual resulting in KPI reports not being prepared in a timely manner (i.e. only quarterly) and statistics are reported at the Group level only (i.e. analysis at the Divisional level cannot be performed efficiently).</p> <p>This limits the department's ability to identify trends in incidents and claims within divisions and across the department and to determine the effectiveness of risk management programs being implemented, including the roll out of the revised pre-deployment training program.</p>	<p>It is recommended that options for the utilisation of information technology systems be investigated to determine how the analysis of reported incidents and claims could be streamlined, made less manual and provide for more useful analysis of information in a timely manner.</p>

Ref.	Work Health and Safety Act 2011 Reference s27(5) In this section, due diligence includes taking reasonable steps:	Assessment	Recommendation
5	(e) to ensure that the person conducting the business or undertaking has, and implements, processes for complying with any duty or obligation of the person conducting the business or undertaking under this Act; and	A draft 3 year WHS assurance work plan (January 2013 to September 2015) has been developed which includes WHS management system desktop audits, workplace scans at detention facilities, rehabilitation management system audits and monitoring and evaluation of risk assessments. Non-compliances from the legal compliance audit performed were added to the WHS Outcomes Tracking Register.	It is recommended that following the receipt and review of the divisional WHS risk assessment registers, that the WHS assurance work plan be reviewed to prioritise high risk departments and activities.
6	(f) to verify the provision and use of the resources and processes referred to in paragraphs (c) to (e).	Internal Audit has been advised that not all assurance activities have been performed according to the plan due to a lack of resourcing. Only one legal compliance audit has been performed in accordance with the WHS assurance work plan which was the Rehabilitation Management System audit against the requirements of the <i>Safety, Rehabilitation and Compensation Act 1998</i> . Some agreed actions from the legal compliance audit are past their due date (April 2014) per the WHS Outcomes Tracking Register and status updates have not been provided.	It is recommended that legal compliance reviews are performed at high risk facilities and divisions to test policies, procedures and practices in place for complying with the WHS Act.

APPENDIX B – Objective, Scope and Approach

Objective

The objective of this audit was to consider the adequacy of the Department's response to implementing Officers' due diligence requirements required under the WHS Act.

Scope

The scope of the internal audit was to perform a gap analysis of the Department's compliance with Officers' due diligence requirements under the WHS Act as detailed in section 27(5) of the WHS Act. This comprised analysing compliance against the following requirements:

- s27(5)(a) Taking reasonable steps to acquire and keep up-to-date *knowledge* of WHS matters
- s27(5)(b) Taking reasonable steps to gain an *understanding* of the hazards and risks associated with the Department's operations
- s27(5)(c) Taking reasonable steps to use appropriate *resources* and processes to eliminate or minimise WHS risks
- s27(5)(d) Taking reasonable steps to ensure appropriate *system processes* are in place to receive, consider and to respond to information regarding incidents, hazards and risks
- s27(5)(e) Taking reasonable steps to ensure the Department implements processes for *comply* with obligations under the WHS Act
- s27(5)(f) Taking reasonable steps to *verify* the provision and use of the resources and processes referred to in (c) to (e)

Approach

Audit stage	Key activities	Quality
Planning	<ul style="list-style-type: none"> • Identified relevant stakeholders • Engaged with the relevant stakeholders and audit sponsor • Understood expectations, needs and performance measures • Developed and agreed the audit plan with the audit sponsor and Departmental Audit Committee (DAC) • Reviewed any internal policy documents and reports relating to WHS due diligence 	<p>Maintain quality assurance processes throughout the audit.</p>
Fieldwork	<ul style="list-style-type: none"> • Undertook initial <i>interviews</i> with relevant WHS management staff to: <ul style="list-style-type: none"> ○ Obtained background on the Department's WHS management framework and specific due diligence activities ○ Understood who the Department's Officers are ○ Understood which personnel have WHS due diligence responsibilities within the Department ○ Understood at a high level what the key WHS risks are within the Department's operations, services and activities • (Knowledge) Performed a <i>desktop review</i> of WHS training matrices and communication and awareness programs in place for WHS personnel and Officers to be kept up to date with current and emerging WHS issues for the department. • (Understanding) Performed a <i>desktop review</i> of hazard registers and risk assessments for a sample of Departmental divisions and sites to test whether Officers are made aware of key WHS risks and potential legal non-compliances. • (Resources) Performed <i>interviews</i> with key WHS personnel to understand what human and financial resources are assigned to WHS management. • (System processes) Performed <i>interviews</i> with key WHS personnel to understand incident and hazard reporting processes in place and how information is used to identify and respond to systemic issues. Performed <i>sample testing</i> of completed reports to determine the quality of information provided, the timeliness of the submission of reports and the effectiveness of corrective actions implemented. • (Comply) Performed <i>interviews</i> with key WHS personnel to determine how the Department determines whether it is complying with its WHS legal requirements and how it responds to instances of non-compliance. Performed a <i>desktop review</i> of legal compliance audit reports. • (Verify) Performed <i>interviews</i> with key audit personnel to understand what audit programs/activities are in place to verify the Department's WHS management procedures are implemented at sites. Performed <i>sample testing</i> on completed audit reports to determine the adequacy of the audit criteria, the quality of the information reported and the effectiveness of corrective actions. Performed <i>interviews</i> with Officers to determine how they are made aware of and respond to audit results. 	<p>Seek feedback and continually improve on lessons learnt from engagements</p>

Audit stage	Key activities	Quality
Reporting	<ul style="list-style-type: none">• Discussed and confirmed key findings with stakeholders• Prepared the draft report for management comment from the First Assistant Secretary, People Strategy and Services• Obtained management actions, including timing, and incorporate into the draft report• Final report is planned to be tabled at the June 2014 DAC meeting.	
Quality	<ul style="list-style-type: none">• Maintained quality assurance processes throughout the audit• Sought feedback to continually improve on lessons learnt from engagements.	

APPENDIX C – Key stakeholders consulted

Ref.	Name	Position	Purpose
1.	Craig Farrell	FAS, People Strategy and Services	Planning, Reporting
2.	Gavin McCairns	Chief Risk Officer, Risk Fraud and Integrity	Planning, Reporting
3.	Nick Evans	Assistant Secretary, Work Environment Branch	Planning, Fieldwork
4.	Scott Matheson	Assistant Secretary, Offshore Detention Operations	Fieldwork
5.	John Moorhouse	Regional Director Middle East & Africa	Fieldwork
6.	Kruno Kukoc	State Director NSW, Global Manager (GM) Refugee and Humanitarian Visas, GM Family Visas	Fieldwork
7.	Katrina Ashcroft	Director, Health and Safety	Planning, Fieldwork, Reporting
8.	Katrina Neuss	Director, Manus RPC	Fieldwork
9.	Tanya Findlay	Director, Nauru Operations Coordination	Fieldwork
10.	Sally Pfeiffer	Director, Workforce Management, Training and Support Section, People, Planning and Logistics Branch	Fieldwork
11.	Vicki Ludwig	Director, Detention Operations Yongah Hill	Fieldwork
12.	Judith Bedford	Director Compliance NSW & ACT	Fieldwork
13.	Melissa Lackmann	Director QLD Status Resolution	Fieldwork
14.	Ian Dowden	Assistant Director WHS	Planning, Fieldwork, Reporting

APPENDIX D – Documents and reference sources reviewed

Documents and Other Reference Sources Reviewed	
WHS Pre-audit Risk Assessment Template	Quarterly EAP Report Jan - March 2014
WHS Risk Assessment Division Name 2014--15	Real time Claim Monitoring Report
Rehabilitation Management System Audit Book	NOHSC Meeting October13
Checklist for Audit Interview with Managers	Ian Dowden Statement of Attainment
Rehabilitation Management System Audit Case File Checklist	Ian Dowden WHS Auditor Qualifications and Experience
ComCare RMS Audit Workbook	NOHS Committee Meeting 2 May 2014
Individual File Findings	Rehabilitation Management System Audit Report
Rehabilitation Management System Audit March 2014 Action Plan	Rehabilitation Management System Audit Workbook
Work Health Safety Management Systems Audit Plan	Offshore processing centres post deployment WHS brief
Work Health Safety Assurance Framework	WHS Scorecard Dec 2013 quarter
Authorisation and Document Control 5pg	Claim performance report Jan13 to Mar14
Work Health Safety Assurance Manual	Work Health Safety e-learning pack
WHS Assurance Work Plan October 2013	WHS Strategic Intent 2013-16
EY WHS Quality Assurance model Report	Injury Prevention and Management Plan 2013-16
WHS Audit Outcomes Tracking Register	Real Time Claim monitoring service Feb 2014
Authorisation and Document Control 9pg	Self-care & wellbeing on deployment presentation
WHS Assurance Benchmarking Tool	WHS Learning report 30042014
WHS Assurance Strategy	Maximising attendance training presentation
WHS Management System Audit Strategy 2pg	Manager roles and responsibilities
WHS Assurance Review Workplan	Managing unscheduled absences presentation
WHS Strategic Intent 2013-16	WHS on deployment presentation
WHS Draft Risk Assessment 2014	Health and safety for overseas staff presentation
WHS Risk Assessment Technology Services Division 2013-14	WHS training for executive leadership on deployment presentation
WHS Risk Assessment Client Strategy and Performance Division 2013	Supporting employees with a mental illness or injury presentation
WHS Management System Audit Strategy	Onshore and offshore process map
Health and Safety Management Arrangements	Professional support framework
Health and Safety Management Arrangements	Explanatory Statement WHS Declaration 2013
Injury Prevention and Management Plan 2013-16	NOHSC meeting May14
Enterprise Risk Map 2014-15	Minute to Secretary Rehab Management Audit
Graphical Information	Percentage of overseas to all DIBP WHS incidents Jan-Apr14
ComCare – The Management of Work Health and Safety in the Commonwealth Jurisdiction	KPMG - Manus and Nauru Offshore Processing Centre – Risk analysis (MIR)
ComCare – Guidance for Officers in Exercising Due Diligence	Safe Work Australia – Interpretive Guideline – Model Work Health and Safety Act
WHS Incident Register Master Data 2012-2014	DIAC OHS Risk Profile
Updated DIAC Draft Risk Profile Jan 2012	MITA Environmental Scan April 2014
WPHI Work Group Orange 6B Feb 2014	Workplace hazard Inspection - Feb 2014 - Orange 7B
Workplace Hazard Inspection report -Level 3 South Jan 2014	Workplace Hazard Inspection Report - Level 1 South (west) February 2014
WHS Risk Assessment for Manus and Nauru v7 Aug 2013	signed hse report 010514
PSF implementation plan 12.5.14	PSF Summary
IDF Manager Support Program outline v3	NWP February 2014
28012014094054-0001	HI 13Feb14 Level 7 Group A

Documents and Other Reference Sources Reviewed	
17022014072720-0001	AFCB Fraud, Risk and WHS Assessment
CCRD WHS and Fraud Risk Worksheet 2014	CSPD WHS Risks Assessment FINAL - 2013-14
FINAL MVP risk and fraud assessment 14.6.13	FSBB WHS Assessment
FSSD Risk and Fraud Risk Assessment 2013-14 (17 June 2013)	MVP WHS Risk Assessment Template - 2013-14
PPCB Fraud and Risk Assessment	RHIP Risk and Fraud Risk Assessment 2013-14
Susan Ryan Accounting and Financial Control (1 July 2013)	Tony Judge Property (1 July 2013)
TSD Risk and Fraud Risk Basements 2013 – 14	VSSME Risk & Fraud Risk Assessment Template 2013-14