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1.0 Purpose

The purpose of the Document & Record Management element is to outline the requirements for creation, maintenance and management of health and safety documents across Memorial University (university); as well as the recordkeeping requirements for records required to be maintained as part of the university’s Health and Safety Management System (HSMS) in accordance with provincial occupational health and safety legislation.

2.0 Scope

This element applies to all documents and records created as part of the university’s HSMS in accordance with provincial occupational health and safety legislation. This includes policies, procedures, guidelines, manuals, forms, instructional documents, checklists and fact sheets created by Environmental Health and Safety (EHS) and/or individual work units.

3.0 Definitions

Controlled Document - A reference document which, through the course of its lifecycle may be reviewed, modified and distributed several times.

Major Revision - A change to a document that has an operational impact on an academic or administrative unit.

Minor Revision - Formatting and changes derived from major changes to other documents. A minor change does not have an operational impact on an academic or administrative unit.

4.0 Responsibilities

4.1 Senior Executives, Deans and Directors

Including Unit Heads and Managers are responsible to:

- ensure this element is communicated to members of the university community, as required and that compliance is maintained;
- review and approve documents created at the unit level, and
- monitor the adequacy and effectiveness of this element and make recommendations for improvement to EHS.
4.2. **Supervisors**

Ensure:

- this element is implemented within areas of their control;
- documentation and records are generated as part of HSMS activities in the workplace and compliance is maintained; and
- the adequacy and effectiveness of this element and make recommendations for improvement to EHS.

4.3. **Workplace Health and Safety Committees**

- Support and promote the implementation of this element.
- Monitor the adequacy and effectiveness of this element and make recommendations for improvement to EHS.

4.4. **Member of the University Community**

- Comply with this element in the use of system documentation and the creation of records generated as part of HSMS activities in the workplace.

4.5. **Environmental Health and Safety (EHS) Unit**

- Responsible and accountable for the documents created by EHS as part of the HSMS. This responsibility includes development, maintenance, review, and evaluation of documents.
- Maintain a [master HSMS document control registry](#) for all overarching system documentation.
- Provide guidance to all levels of management, employees and students on the development, maintenance, review, evaluation and approval of documents and ensure this element is reviewed every three years and updated as required.
- Provide Enterprise Risk Management committee (ERMC) necessary information regarding newly created documents or documents that have undergone major revisions, requesting approval of documents once necessary consultation process has occurred.
5.0 Document and Record Hierarchy

Memorial University is guided by the following hierarchy for documentation and records management:

<table>
<thead>
<tr>
<th>Level</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>Policy</td>
<td>Overall statement and commitment to health and safety</td>
</tr>
<tr>
<td>HSMS Manual</td>
<td>Overarching document that identifies system elements and outlines their integration within the HSMS</td>
</tr>
<tr>
<td>HSMS Elements</td>
<td>Provides oversight and guidance on how elements within the HSMS are implemented</td>
</tr>
<tr>
<td>Standard Operating Procedures (SOP)</td>
<td>Established procedures to follow when performing a specific task</td>
</tr>
<tr>
<td>Forms, Checklists, Records, etc.</td>
<td>Documents that furnish objective evidence of activities performed or results achieved, records the outcomes</td>
</tr>
</tbody>
</table>

Figure 1: Document and Record Hierarchy
6.0 Procedure

6.1 Development of Controlled Documents

The creation of a document to be introduced to the HSMS may be initiated by EHS, ERMC, Senior Executive, Dean, Director or Unit Head.

Possible reasons for creating new documents include the following:

- Legislative requirement;
- System failure reported or identified during an incident investigation;
- Internal or external evaluation findings;
- Outcome of system reviews;
- Suggestion from employees;
- Change of university business activities or structure; and
- Industry or organizational best practice initiatives.

Individual units may develop health and safety documents (i.e. manuals, instructional documents, checklists, forms, brochures, posters and fact sheets) as required. Consultation with EHS is required to ensure that documents are consistent with HSMS requirements.

6.2 Documentation Format

All controlled documents, created as part of the HSMS, must conform to a standard template. EHS has created and will maintain templates for the various documentation requirements of the HSMS on the EHS website.

6.3 Document Title

Each controlled document created for the HSMS requires the following document properties in the document title:

- Name of document, including the document type (procedure, guideline, etc); and
- Month and year the document was approved for implementation (most recent approval).

6.4 Document Footer

To indicate the status of each document and prevent the use of obsolete or outdated documents, each controlled document created for the HSMS is required to display the following document properties in the footer:

- Unique document control name including version number;
- Date of first issue;
- Page numbers;
• Statement indicating printed documents are uncontrolled; and
• Sentence indicating where the latest electronic version of the document can be found.

If a document changes type, e.g. guideline to procedure, it will be given a new date of issue.

6.5. Template for Standard Footer

6.6. Approval Process for Controlled Documents

Consultation on new and revised HSMS documents, created by EHS, is required prior to finalization. Consultation process must comply with the HSMS – Communication – v1 element. The university’s ERMC has approval authority for the HSMS.

This approval process involves:

• Outlining the basis for the new or revised documentation;
• Describing the input sought leading to the development or amendment of the draft for circulation;
• Obtaining other specialist expertise where relevant, on matters relating to specific subject matter; and
• Stakeholder engagement in the consultation process including an opportunity to review and provide feedback on new or revised draft documentation (where applicable).

Regardless of the document creator, new or revised draft documents must be communicated to relevant stakeholders. Evidence of consultation shall be documented through meeting minutes, memorandums or emails and records maintained. Feedback shall be reviewed and incorporated into draft documents, where relevant, and a final draft prepared by the document creator for approval.

6.7. Control of Documentation

Documented information which HSMS requires or created as part of the HSMS are controlled to ensure each document is:

• available,
• suitable for use; and
• adequately protected.

Electronic versions of documents EHS creates as part of the HSMS are accessible on the EHS website, with the source files for the web documents maintained on the EHS shared drive.

Documents which units create specific to their operation, as part of the HSMS, must be accessible to all personnel requiring access.
6.8. Modifications and Revisions

All controlled documents must be reviewed at least once every three years. All major revisions require approval as indicated in section 6.6.

6.9. Version Control of Documents

- A document must be identified as version 1 when it is a new document or if a document changes type, e.g. guideline to procedure.
- A document must be given the next consecutive number following a major change, e.g. version 1, version 2, etc.
- A minor change must be given decimal point changes with the integer of the version, e.g. version 1.1, version 1.2, etc.

6.10. Document Control Registry

EHS will maintain a master HSMS document control registry for all overarching system documentation. Individual units are required to maintain a document control procedure for documents created within their unit.

The master control document registry will include the following:

- Document Number
- Document Title
- Version Number
- Date Created
- Date Reviewed
- Document Owner (Position and Name)

Refer to template section of EHS website for a document control registry template.

6.11. Obsolete Documents and Disposal of Documents

Obsolete controlled documents are those which are no longer required, replaced or superseded as determined by the needs of the HSMS. Documents identified as obsolete shall be removed from points of issue, archived electronically (where possible) or in hard copy and retained for system evaluation purposes and legal requirements (where relevant). Hard copies of confidential or sensitive documents requiring disposal must be done so through a secure records disposal agreement. If a unit doesn’t have access to a secure disposal service then documents must be shredded prior to being placed in a paper recycling bin.
6.12. Record Management

Records are necessary to demonstrate conformity to the requirements of the HSMS and the results achieved. All groups are responsible for ensuring that records created as part the HSMS are maintained remain legible, identifiable and traceable.