



## Annual Audit – Inspection Action Sheets

HSRs and the WHS Committee will conduct with the safety support officer and the workplace supervisor /manager an annual audit of all Inspection Action Sheets for each work area. On completion this form will be forwarded by the HSR or WHS Committee to the Manager Administration for any action and filing.

<b>Work Area</b>	
<b>Supervisor/Manager</b>	
<b>Safety Support Officer</b>	
<b>HSR or WHS Committee Member Conducting Audit</b>	
<b>Date of Audit</b>	

Are the Inspection Action Sheets in an Orderly and Accessible Manner? Yes  No

Number of Inspections Required Annually	<input type="checkbox"/>	Number Completed	<input type="checkbox"/>
How Many Level 1 Risks Recorded	<input type="checkbox"/>	Number Unresolved	<input type="checkbox"/>
How Many Level 2 Risks Recorded	<input type="checkbox"/>	Number Unresolved	<input type="checkbox"/>
How Many Level 3 Risks Recorded	<input type="checkbox"/>	Number Unresolved	<input type="checkbox"/>
How Many Level 4 Risks Recorded	<input type="checkbox"/>	Number Unresolved	<input type="checkbox"/>
How Many Level 5 Risks Recorded	<input type="checkbox"/>	Number Unresolved	<input type="checkbox"/>
How Many Level 6 Risks Recorded	<input type="checkbox"/>	Number Unresolved	<input type="checkbox"/>

**Comments:**

What part of the Inspection Process Needs Review? \_\_\_\_\_  
 \_\_\_\_\_

What part of the Action Process Needs Review? \_\_\_\_\_  
 \_\_\_\_\_

\_\_\_\_\_  
**Auditor – WHS Committee**

\_\_\_\_\_  
**Supervisor/Manager**

\_\_\_\_\_  
**WHS Chairperson**

\_\_\_\_\_  
**Manager Administration**

\_\_\_\_\_  
**Date**

\_\_\_\_\_  
**Date**

\_\_\_\_\_  
**Date**

\_\_\_\_\_  
**Date**