

This Management Plan forms part of the Brendan McKenna Earthmoving Integrated Management System (IMS). It supports annual review of the health and safety components of the IMS and assists the business to verify legal compliance, operational control, consultation, corrective action and continual improvement.

Purpose

The purpose of this Management Plan is to define how Brendan McKenna Earthmoving conducts an annual Health and Safety Management System audit and review as part of the IMS. The annual audit confirms that health and safety processes remain suitable, legally compliant, understood by workers and effective in controlling workplace risk.

The annual audit is used to identify non-conformances, improvement opportunities, corrective actions and updates required to IMS documents, registers, SWMS, procedures, training records and operational controls.

Scope

This Management Plan applies to Brendan McKenna Earthmoving operations, including civil, earthmoving, vegetation, forestry, conservation park and client-controlled worksites. It applies to management, supervisors, workers, subcontractors and any person involved in implementing or reviewing the health and safety components of the IMS.

The audit may include, but is not limited to, WHS policies, procedures, SWMS, risk registers, incident and corrective action records, consultation records, training and competency records, plant and equipment records, inspections, client requirements and legal compliance obligations.

Responsibilities

Role	Responsibility
Director	Approve this Management Plan, ensure the annual audit is completed, review audit outcomes and allocate resources for corrective actions.
Management / HSR / Delegated Representative	Coordinate the annual audit, consult with workers, review WHS records, update IMS registers and monitor action close-out.
Supervisors	Provide site records, participate in consultation, verify implementation of controls and support corrective actions at site level.
Workers and Subcontractors	Participate in consultation, follow IMS requirements, report hazards/incidents and provide feedback on system effectiveness.
Document Controller / Administration	Maintain controlled documents, retain audit records and update registers following approved changes.

Audit Frequency and Triggers

A formal health and safety annual audit must be completed at least once every 12 months. Additional reviews may be completed following significant changes or events, including:

- serious incident, notifiable incident, injury trend or repeated near miss;
- new or changed legislation, codes of practice, regulator guidance or client requirements;
- new plant, high-risk activity, work method or project type;
- major organisational change, new IMS process or change in key responsibility;
- audit finding, non-conformance, improvement notice, prohibition notice or client audit requirement.

Annual Audit Inputs

The following information should be reviewed where relevant to determine whether the health and safety components of the IMS remain effective:

- WHS legal and other compliance obligations;
- IMS scope, policies, procedures and controlled documents;
- Master WHS Risk Register and associated risk assessments;
- SWMS Register and project-specific SWMS;
- incident, near miss, hazard, NCR and corrective action records;
- inspection, audit and monitoring records;
- training, competency, induction and licence records;
- plant and equipment inspection, service and maintenance records;
- consultation records, toolbox talks, pre-starts and safety meeting records;
- contractor, subcontractor and supplier controls;
- emergency preparedness and communication arrangements;
- client, QPWS, forestry, environmental or government site requirements where applicable;
- previous audit findings and status of outstanding actions.

Procedure

The annual audit process must be planned, documented and followed through to closure. The process below is to be used as the minimum requirement.

Audit Step	Requirement
Step 1 - Plan the audit	Confirm audit date, scope, records required, people to be consulted and any site/project areas to be reviewed.
Step 2 - Seek consultation and feedback	Seek input from management, supervisors, workers and subcontractors on health and safety issues, system gaps, recurring hazards and improvement opportunities.
Step 3 - Review legal and IMS requirements	Check whether WHS legislation, regulations, codes of practice, client obligations and IMS requirements are current and reflected in controlled documents.
Step 4 - Review records and operational controls	Review incidents, inspections, audits, training, risk assessments, SWMS, plant records and consultation records to confirm controls are implemented and effective.
Step 5 - Identify findings	Record compliant areas, non-conformances, system gaps, repeated issues and opportunities for improvement.
Step 6 - Develop corrective actions	Document actions in the relevant Action Plan, NCR / Corrective Action Register or IMS Action Plan. Each action must include a responsible person, due date and priority.
Step 7 - Management review and approval	Review audit outcomes with the Director and relevant management personnel. Agree required changes to documents, registers, training or operational controls.
Step 8 - Close out and verify	Monitor actions to completion and verify that changes have been implemented and are effective. Retain evidence of close-out.

Audit Findings and Action Plan

Audit findings must be recorded clearly so that the business can track, prioritise and close out corrective actions. Findings should be classified using the categories below:

- Conformance - requirement is met and evidence is available.
- Improvement Opportunity - system is working but could be strengthened.
- Minor Non-Conformance - requirement is partially met or evidence is incomplete.
- Major Non-Conformance - requirement is not met, controls are ineffective, or there is a significant legal, safety or operational risk.

Corrective actions must be entered into the relevant IMS register and must include the issue, action required, responsible person, due date, status and close-out evidence. Actions must be reviewed until completed.

Records to be Retained

The following records must be retained as evidence of the annual audit and review process:

- completed annual audit checklist or audit notes;
- consultation records and worker feedback;
- meeting agenda, minutes and attendance records;
- updated risk registers, SWMS registers or controlled document records;
- corrective action plan and close-out evidence;
- management review record or approval notes;
- evidence of any updated training, communication or toolbox talks.

Document and Register Updates

Where the audit identifies the need to amend IMS documents or registers, changes must be controlled through the IMS document control process. Updated documents must show the current version, review date, owner and approval status. Superseded versions must be removed from active use and retained only where required for record-keeping.

Relevant updates may include the IMS Document Register, Master WHS Risk Register, Legal and Other Requirements Register, Incident / NCR / Corrective Action Register, Training and Competency Register, SWMS Register, Plant and Equipment Register and Management Review Register.

Related Information

- Work Health and Safety Act 2011 (Qld)
- Work Health and Safety Regulation 2011 (Qld)
- ISO 45001:2018 Occupational health and safety management systems
- Managing the Work Environment and Facilities Code of Practice (Qld)
- How to Manage Work Health and Safety Risks Code of Practice
- Brendan McKenna Earthmoving Integrated Management System (IMS)
- IMS Document Register
- Master WHS Risk Register
- Incident / NCR / Corrective Action Register
- IMS Action Plan and Management Review Register

Controlled Document Location

Controlled IMS documents and records are maintained through the Brendan McKenna Earthmoving controlled document system and relevant IMS registers. Workers must use the current approved version available through the company system and must not rely on uncontrolled printed or saved copies unless verified as current.

Controlled document location: <https://kb.mckgroup.com.au/>

Approved By	Position	Signature	Date
Brendan McKenna	Director		27/05/2026