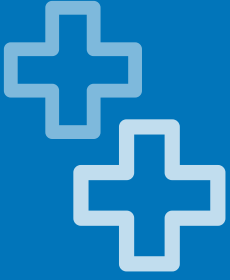


1medical



1Medical Health and Safety Handbook

01 June 2023

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1 INTRODUCTION

1.1 HEALTH AND SAFETY IN THE WORKPLACE

1Medical Pty Ltd (**the Organisation**) will do everything reasonably practicable to ensure that workers can undertake their work in a healthy and safe manner. We all play a crucial role in achieving a workplace that is free of injury and illness. The Organisation will work towards achieving this goal by providing workers with the necessary resources.

1.2 PURPOSE OF THE HEALTH AND SAFETY MANUAL

The purpose of this Health and Safety Manual is to establish the minimum standards and guidelines that are reasonably practicable for this Organisation to manage the hazards and risks in the workplace. In addition to this manual, the Organisation utilises a Health and Safety Handbook and a number of forms to assist in managing health and safety.

These standards will provide greater consistency, certainty and clarity across the Organisation to make it easier to understand health and safety duties and responsibilities.

All workers will be given the opportunity to read this information and are encouraged to participate in following and improving health and safety in the Organisation.

2 HEALTH AND SAFETY POLICY STATEMENT

1Medical Pty Ltd and its officers recognise that the health and safety of all workers and visitors is of the utmost importance and vital to the success of our business. As such we aim to continuously improve health and safety in the workplace through consultation and increased health and safety awareness of management and workers.

Through the co-operative efforts of management and workers, we are committed to:

- providing a safe environment for all workers and visitors to our workplace
- providing and maintaining buildings, plant and equipment in safe working condition
- supporting the on-going training and assessment of workers
- developing, implementing and monitoring safe work practices
- continuously improving the standards of health and safety in the workplace
- managing risks in the workplace
- providing information, instruction and supervision.

The focus of 1Medical Pty Ltd's health and safety management system is preventing hazards. We will develop a framework for health and safety management and a plan for systematic risk assessment and control of hazards, to progressively improve safe behaviours and safe systems of work across the business.

Michelle Morgan
Operations And Compliance

on behalf of **1Medical Pty Ltd**

Date: 01 June 2023

3 WORKPLACE INJURY MANAGEMENT AND RETURN TO WORK POLICY STATEMENT

The Organisation is committed to the prevention of illness and injury to its employees by providing a healthy and safe working environment. The purpose of this policy is to support our injury management program which provides a framework for a coordinated and integrated approach to workplace injury and illness. The Organisation recognises that management and workers have a social and economic interest in the promotion of a safe return to work for its employees.

Across all of the Organisation operations, we develop, implement and maintain effective Workplace Injury Management procedures that are compliant with our legislative requirements. This is achieved by:

- ensuring that the Organisation develops and implements a return to work program in consultation with employees.
- ensuring that contact is made with the injured employee as soon as practicable after the injury
- ensuring that returning to work as soon as possible is the normal expectation, with an injury management plan created where required
- ensuring that participation in a return to work program does not disadvantage employees in any way
- providing access to accredited rehabilitation providers, where required, to ensure the provision of quality rehabilitation services. An employee may however choose their own rehabilitation provider
- consulting with employees and their representatives regarding the rehabilitation program
- cooperating with any onsite reporting and rehabilitation requirements, and
- appointing a workplace based return to work coordinator or recovery at work co-ordinator where required.

Michelle Morgan
Operations And Compliance

on behalf of **1Medical Pty Ltd**

Date: 01 June 2023

4 HEALTH AND SAFETY RESPONSIBILITIES

4.1 INTRODUCTION

Every person in the workplace, whether an owner, employer, supervisor, contractor or worker has a role to play in ensuring the workplace is safe and free of risks.

The Organisation's health and safety system is designed to ensure the health and safety of every person at work. However, its success is dependent upon every person understanding and implementing their general duties and their overall responsibilities.

The aim of the Organisation is to ensure a positive health and safety culture where health and safety is valued as a way we do business.

4.2 ORGANISATION'S RESPONSIBILITIES

The Organisation has a duty to ensure, so far as reasonably practicable, the health and safety at work of all its workers. In particular, it is responsible for:

- providing and maintaining its workplaces and the working environment in a healthy and safe condition and providing safe systems of work
- identifying, controlling and monitoring hazards in the workplace
- ensuring the safe use, handling, storage and transportation of plant, equipment and substances
- providing sufficient information, training, instruction and supervision necessary to maintain a healthy and safe workplace and to allow workers to undertake the work safely and without risk to themselves or others at work
- provide, support and promote effective consultation with workers in a manner agreed to by the workers, regarding health and safety matters
- providing adequate facilities for the welfare of workers, and
- monitoring the workplace and the health and safety of workers to assist in preventing injury and illness.

4.3 MANAGER/SUPERVISOR RESPONSIBILITIES

Managers/supervisors are responsible for:

- maintaining a working environment that is safe and without risk to health
- implementing safe systems of work by ensuring safe products and systems are used
- maintaining the workplace, plant, machinery and substances
- implementing the required and appropriate information, training, instruction and supervision of workers

- ensuring workers do not undertake any work in which they have not received the appropriate training or instruction or do not have the appropriate skills or experience to undertake the work safely and without risk to themselves or others at work
- ensuring workers do not undertake any work in which they do not have the required qualifications or authorisations to do so
- identifying and controlling hazards in the workplace
- ensuring that the agreed health and safety consultation mechanisms are adhered to
- ensuring all relevant health and safety laws are complied with
- using the resources provided for health and safety
- ensuring workplace rules, procedures, systems of work and health and safety controls are maintained and regularly reviewed
- ensuring that all relevant health and safety inspections or audits are undertaken as scheduled and that all findings and recommendations are suitably actioned
- ensuring an appropriate investigation is undertaken for all related workplace incidents and that such investigations identify causation and corrective actions, wherever possible
- promoting health and safety in the workplace, and
- maintaining consultative mechanisms.

4.4 WORKER RESPONSIBILITIES

Workers are responsible for:

- not undertaking any work required without the appropriate training, skills, experience, qualifications or authorisations to undertake the work safely and without risk to themselves or others at work
- taking reasonable care for the health and safety of themselves and others who may be affected by their actions or omissions in the workplace
- co-operating with management to ensure all health and safety obligations are complied with
- co-operating with any reasonable health and safety policy, procedure or instruction given by the Organisation or employer that has been notified to workers
- ensuring all health and safety equipment is used correctly
- using and maintaining the required Personal Protective Equipment (**PPE**)
- reporting any incidents or injuries sustained while working and seeking appropriate first aid when required
- advise management as soon as practicable of any symptoms that may lead to adverse health issues arising from work activities or of any health issue, or of any health issue or condition that may be adversely affected by work activities
- reporting any unsafe conditions, equipment or practices to management, as soon as practicable

- not using any plant or equipment that has not been deemed safe to use
- rectifying minor health and safety issues where authorised and safe to do so
- co-operating with any health and safety initiative, review, inspection or investigation
- actively participate in the development and review of procedures designed to eliminate or minimise work related risks
- actively participating in any return to work or recovery at work program
- ensuring that any plant or equipment that may be issued to them or used by them has undergone any required and applicable inspection and/or testing within the prerequisite timeframe
- ensuring they are not under the influence of alcohol, drugs or medication of any kind where doing so could adversely affect their ability to perform their duties safely or efficiently or be in breach of the Organisation's workplace policies, and
- ensuring that they present to the workplace fit for duty and do not undertake any task or work activity for which they are not fit to do or where their health, safety or welfare may be compromised by undertaking such a task or activity.

5 CONSULTATION

5.1 INTRODUCTION

Consultation is a legal requirement and an essential part of managing health and safety in the workplace. It is most effective when it includes communication and co-operation between everyone at work to help ensure that workplace hazards and risks are identified, assessed and controlled. The arrangements for consultation will facilitate drawing upon everyone's knowledge and understanding of the workplace and the work involved to achieve positive health and safety outcomes.

5.2 CONSULTATION STATEMENT

The Organisation is committed to protecting the health and safety of all its workers. Injury and illness is needless, costly and preventable.

The Organisation will consult with workers regarding the implementation of practices and systems that will ensure the health and safety of workers. Worker involvement at all levels is essential for ensuring a healthy and safe workplace.

The Organisation's health and safety consultation arrangements fall into the generic category of 'Agreed Arrangements'.

The primary medium for consultation is direct dialogue between management and workers. Consultation at this level is fundamental to the successful management of health and safety risks.

Consultation on health and safety issues must be meaningful and effective to allow each worker to contribute to decisions that may affect their health and safety at work.

All workers will be given the opportunity to express their views and contribute in a timely manner to the resolution of health and safety issues that affect them. These views will be valued and taken into account by those making decisions.

The consultation arrangements at the Organisation will be monitored and reviewed as the need arises to ensure they continue to be meaningful and effective.

5.3 ORGANISATION'S RESPONSIBILITIES

The Organisation will consult with workers in relation to:

- identifying hazards and assessing risks arising from the work carried out or to be carried out
- eliminating or minimising identified hazards and risks
- the adequacy of facilities for the welfare of workers
- proposed changes that may affect the health and safety of workers, and
- proposed changes to key health and safety policies and procedures, including those relating to consultation, dispute resolution, the monitoring of the health of workers, conditions in the workplace, and the provision of information and training for workers.

5.4 CONSULTATION PROCEDURES

i) Staff meetings

The Organisation recognises the involvement of workers as essential in identifying potential hazards that can be eliminated, or minimised, before injuries occur. To facilitate this, the Organisation will make health and safety an agenda item at regular staff meetings.

Staff/team meetings will be used to:

- notify and remind workers of health and safety policies and procedures
- provide a forum for workers to have their say about health and safety issues, and
- maintain awareness of health and safety.

Where required, specific health and safety issues will be raised, incidents and accidents reviewed, procedures developed and communicated, and health and safety alerts discussed.

Meetings will be used to induct workers into new or amended health and safety procedures and 'sign off' their understanding of the controls provided for the specific work in which they will be involved.

If a worker is absent from a staff meeting, the worker will be provided with any relevant information and training upon their return to work.

ii) Noticeboards

A health and safety noticeboard will be positioned in a conspicuous place in the workplace.

The noticeboard will display the following:

- the Organisation's **Health and Safety Policy**
- information regarding the Organisation's **Injury Management and Return-to-Work** program, which should be reviewed and amended in line with any specific requirements of your workers compensation insurer
- the relevant state/territory workers compensation or return to work poster
- the workers compensation information summary available from your insurer
- copies of the Organisation's **Incident Report Form** and **Hazard Report Form**
- the Organisation's agreed Safety Consultation Statement outlining the agreed arrangements for reporting and managing safety issues
- a list of designated first aid personnel and their contact details, and
- a list of emergency wardens.

In addition, minutes of the most recent consultation meetings will be displayed on the noticeboard or otherwise made available to all workers.

6 RISK MANAGEMENT

6.1 INTRODUCTION

Risk management is the key process in ensuring a safe and healthy workplace. In health and safety terms, risk management is the process of identifying situations which have the potential to cause harm to people or property, and then taking appropriate steps to prevent the hazardous situation occurring or reduce the risk of injury and illness to workers.

The Organisation has a duty to undertake risk management activities to ensure the health and safety of its workers, contractors, visitors and others in the workplace. The Organisation will as far as is reasonably practicable, ensure that the workplace is free from hazards that could cause injury or illness.

Control of hazards takes a variety of forms depending on the nature of the hazard and must be based on the hierarchy of control options emphasising the elimination of the hazard at its source.

6.2 THE RISK MANAGEMENT PROCESS

The risk management process consists of four well-defined steps. These are as follows:

Step 1: *Identifying* - Identifying the problem that could cause harm, this is known as hazard identification

Step 2: *Assessing* - Determining how serious a problem it is, the likelihood of an incident/accident occurring and the consequence and potential severity, this is known as risk assessment

Step 3: *Controlling* - Deciding what needs to be done to solve the problem, this is known as risk elimination or control

Step 4: *Monitoring and Reviewing* – This involves reviewing the actions taken to determine the effectiveness of the controls implemented.

i) Hazard identification

Hazard identification aims to determine what hazards exist (or could foreseeably exist), so that control measures can be implemented to address the hazard before it causes any harm.

Hazard identification activities will include:

- conducting workplace inspections to identify hazards
- regular work area observations and discussions with workers
- identifying and assessing hazards on an ongoing basis
- assessing products and services prior to purchasing to identify potential risks
- undertaking incident and injury investigations and reviewing past incident and accidents data
- talking to workers performing the task to find out what they consider as safety issues

- reviewing any information already available, for example safety data sheets, manufacturer's specifications and instructions and safe operating procedure to see what hazards have already been identified and how these are controlled and
- thinking creatively about what could happen if something went wrong.

Hazards identified will be recorded using the Organisation's online health and safety tool system, **BrightSafe**, either through the web or on its mobile platform.

ii) Risk assessment

Once a hazard has been identified and recorded, the Organisation, in consultation with workers, will conduct a Risk Assessment using the **BrightSafe Risk Assessment** tool to determine how likely it is that someone may be harmed by the hazard and how serious the injury or illness could be.

The risk assessment will provide the Organisation knowledge to make informed decisions about controlling risks in the workplace. In doing so, the Organisation will consider:

- the effectiveness of existing control measures in controlling all types of harm
- how work is actually undertaken
- situations that may occur infrequently or would be considered abnormal
- any harm that may be caused during maintenance and cleaning and
- any harm that may be caused during breakdowns of plant or equipment or failures of health and safety control measures.

To estimate the severity or degree of harm that could result from each hazard the Organisation will consider all factors that may impact upon the severity of the injury or illness, such as:

- the type of harm that may be caused
- the factors that may influence the severity of harm that occurs
- the number of persons exposed to the hazard or activities undertaken by the Organisation that may cause harm and
- potential emergency situations that may occur.

If a hazard is obvious and the risk of injury or illness is high, action will be taken immediately to control the risk, even if only as an interim measure. Where a control is implemented as an interim measure, a thorough risk assessment will be conducted to decide on more permanent control measures.

When assessing the risk of injury or illness the following information regarding the hazard will be reviewed where relevant:

- any hazard information supplied with a product or substance such as safety data sheets
- workers experience with similar hazards or from incident/injury data
- guidance materials available from government health and safety bodies/regulators in relation to particular hazards, processes or work tasks

- industry codes of practice
- relevant Australian Standards
- the working environment, including the layout and condition of the premises and equipment and the materials used in the workplace
- the capability, skill, experience and age of people ordinarily undertaking the work
- the training, supervision and work procedures being used and
- any reasonably foreseeable changes in the working conditions and environment.

Once the above information has been considered, an initial risk ranking can be applied to the hazard to enable the Organisation to set priorities for control measures. The likelihood that a hazard will cause harm and the potential consequence or severity of the harm will influence decisions about the control measures required.

As such, the risk ranking matrix provided in the **BrightSafe Risk Assessment** tool will be used to help provide a priority list for control actions.

The Organisation will rate the likelihood of a hazard causing harm as one of the following:

- almost certain – expected to occur in most circumstances
- likely – has occurred before and will probably occur in most circumstances.
- possible – might occur occasionally and could happen
- unlikely – could possibly happen at some time or
- rare – is practically impossible but may happen in exceptional circumstances.

The Organisation will rate the seriousness of the injury or illness that the hazard can cause as one of the following:

- severe – extensive damage to property or fatality
- major – major damage to property or hospitalisation with potential to result in permanent impairment
- moderate – moderate damage to property or multiple injuries, and person unable to resume normal duties in the short-medium term
- minor – minor damage to property or first aid treatment/precautionary medical attention only, and person likely to immediately resume normal duties or
- marginal – no injury/minor first aid treatment only or consequences that can be dealt with by routine operations.

In consultation with the relevant workers, the Organisation will confirm the risk rating, and the control measures to be implemented and actions will be recorded using the **BrightSafe Risk Assessment** tool.

iii) Hazard elimination or risk control

Once the hazards in the workplace have been identified and assessed, priorities will be set determining what action is to be taken to eliminate or control the hazard. Control of risk takes a variety of forms depending on the nature of the hazard and will be based on the 'hierarchy of control' options emphasising the elimination of the hazard at its source, or if this is not reasonably practicable, then reducing the risks to the worker. The hierarchy of control measures will be applied when determining control measures for each identified hazard in the workplace.

Where a hazard is identified, the Organisation will use the below hierarchy to determine the most effective and appropriate control measure:

- **Level 1** controls provide the highest level of health and safety protection and are the most reliable in preventing harm. They involve eliminating the hazard from the workplace, for example, by bringing a job to ground level to eliminate the need to work at heights
- **Level 2** controls provide a medium level of health and safety protection, and as such will only be used if a Level 1 control is not reasonably practicable. Level 2 controls may involve:
 - substituting (either wholly or partly) the hazard from the workplace with something that presents a lesser risk. For example, substituting a non-toxic, organic cleaner for a toxic cleaner
 - isolating the hazard so that no worker is exposed to it. For example, removing power or energy from a malfunctioning piece of equipment, or blocking access to an area of the workplace deemed hazardous and
 - implementing engineering solutions that reduce the risk of the hazard impacting the worker. For example, erecting a guard or barrier to prevent a worker from reaching into machinery whilst it is operating
- **Level 3** controls provide the lowest level of health and safety protection, and as such will only be used if a Level 1 or Level 2 control is not reasonably practicable. These controls will be used in conjunction with a Level 2 control to reduce the risk to an acceptable level. This may involve:
 - implementing administrative controls to reduce the exposure of workers to the remaining risk. For example, training everyone to work safely, writing a safe operating procedure, rotating the work or managing the time workers are exposed to the risk and
 - providing PPE in conjunction with other Level 2 and Level 3 controls.

Agreed control measures should not introduce any new hazards or risks to the workplace. The implemented controls are recorded through the **BrightSafe Risk Assessment** tool. Periodic review of control measures must be undertaken to determine their suitability and effectiveness.

Any risks which have not been eliminated and/or still require a control measure, should be updated on a **Risk Register**, which will be used to assist in the monitoring and review process.

Management of the Organisation will ensure that controls are being appropriately and consistently applied throughout the workplace.

iv) Monitoring and review

The risk management process requires regular monitoring and review to ensure that the actions taken are effective and the control measures implemented are appropriate. The review may include reviewing related policies, procedures, risk assessments and control measures and will be undertaken whenever:

- the control measure is not effective in controlling the risk
- a change at the workplace that is likely to give rise to a new or different health and safety risk that the control measure may not effectively control
- a new hazard or risk is identified
- the results of consultation indicate that a review is necessary and
- there is an incident in a related area of work.

A review date to monitor and review implemented control measures will be selected on the **BrightSafe Risk Assessment** tool and responsibilities for the review will be recorded.

6.3 WORKER RESPONSIBILITIES

The overall success of our risk management program is very much dependent upon the active participation of workers who will be given the opportunity to express their views and contribute in a timely manner to the resolution of health and safety issues that affect them.

These views will be valued and considered by those making decisions. To this end, in addition to their overall health and safety responsibilities, workers are responsible for:

- identifying any hazards that could present a risk to the health and safety of themselves, their colleagues or others and where it is safe to do so, immediately take steps to prevent the hazard from posing a health or safety risk
- reporting any hazards to management that they may identify and completing the **Hazard Report Form**
- actively participate in the risk management program, including workplace inspections, risk assessments using the **BrightSafe Risk Assessment** tool and the development and review of controls and procedures designed to eliminate or minimise work related risks and
- actively participate in the defined consultation and issue resolution forums to help to continuously improve our management and control of workplace risks.

7 INCIDENT AND INJURY REPORTING

7.1 INTRODUCTION

The reporting of incidents, injuries and near hits/misses is essential for the identification of hazards in the workplace. Depending on the nature of an incident or injury, there may also be a legal obligation to report this to a state regulatory body.

To ensure compliance with these obligations, incidents and injuries will be reported in accordance with the below procedures.

7.2 REPORTING REQUIREMENTS

All incidents resulting in or with the potential for injury or property damage will be reported. Investigations of incidents will be undertaken at a level consistent with the actual or potential for injury/damage, with the goal of preventing future occurrences.

i) Internal reporting and investigation procedures

Minor injuries which require no treatment, or first aid treatment only, will be recorded on the **First Aid Treatment Log/Register of Injuries**.

An incident, injury, illness or near hit/miss that requires (or has the potential to require) medical treatment will be reported on the **Incident Report Form**. This will be done as soon as possible by the affected worker (or delegate) and no later than 24 hours after the event.

If full details of the incident, injury, investigation and corrective actions are not available within this timeframe, the essential details of the incident or injury as they are known will be submitted initially.

Reported incidents and injuries will be promptly investigated by appropriate management using the **Incident Investigation Form**. The investigation will identify the causes of the incident and assess any hazards that need to be controlled. Management will discuss the incident with relevant workers and decide on suitable risk controls to be implemented using the risk management process.

The investigation and corrective actions are to be summarised on the **Incident Report Form**.

ii) External reporting requirements

The Organisation will notify the relevant state health and safety regulator immediately by phone of any dangerous or notifiable incident and will secure and not interfere with the incident site. Where required notice in writing shall be provided within 48 hours of the event.

A dangerous or notifiable incident is:

- an incident involving the death of a worker
- an incident involving a *serious injury or illness* of a worker, or
- an incident otherwise considered a *dangerous incident*.

A *serious injury or illness* of a worker means an injury or illness requiring the worker to have:

- immediate treatment as an in-patient in a hospital
- immediate treatment for:
 - the amputation of any part of his or her body
 - a serious head injury
 - a serious eye injury
 - a serious burn
 - the separation of skin from an underlying tissue (such as de-gloving or scalping)
 - a spinal injury
 - the loss of a bodily function
 - serious lacerations
- medical treatment within 48 hours of exposure to a substance.

A *dangerous incident* means an incident in relation to a workplace that exposes a worker or any other person to a serious risk to health and safety emanating from an immediate or imminent exposure to:

- an uncontrolled escape, spillage or leakage of a substance
- an uncontrolled implosion, explosion or fire
- an uncontrolled escape of gas or steam
- an uncontrolled escape of a pressurised substance
- electric shock
- the fall or release from a height of any plant, substance or thing
- the collapse, overturning, failure or malfunction of, or damage to, any plant that is required to be authorised for use in accordance with applicable health and safety regulations
- the collapse or partial collapse of a structure
- the collapse or failure of an excavation or of any shoring supporting an excavation
- the inrush of water, mud or gas in workings, in an underground excavation or tunnel, or
- the interruption of the main system of ventilation in an underground excavation or tunnel.

In addition, the Organisation will notify its workers compensation insurer within 48 hours of any injury or illness that has the potential to result in a workers compensation claim.

7.3 INCIDENT NOTIFICATION

One of the most important initial actions to any accident or incident is to notify those who have input, support and resources which may be required to ensure the injured worker is cared for, legislative obligations are met, and effective investigation and control measures established.

As little time as possible will be lost between the time of the accident or incident and the beginning of the response.

For significant injuries, fatalities and incidents notifiable to the authorities, management will arrange, without delay, to contact and advise the following as applicable:

- directors/other management as soon as possible following the event and not more than 24 hours after the event
- return to work coordinator and workers compensation claims officer
- workers compensation insurer
- the police, where there has been a fatality
- trauma debriefing service
- group insurance manager (if a contractor or member of the public is injured or private property damage is sustained), and
- next of kin (either the workers manager or supervisor will communicate this information).

8 INJURY MANAGEMENT AND RETURN-TO-WORK

8.1 INTRODUCTION

The Organisation is committed to the return to work of workers suffering a workplace related injury or illness.

As part of this commitment, it will:

- prevent workplace injury and illness by providing a safe and healthy working environment
- participate in the development of an injury management plan where required and ensure that injury management commences as soon as possible after a worker is injured
- support injured workers and ensure that early return to work is a normal expectation
- provide suitable duties for injured workers as soon as possible
- ensure that injured workers (and anyone representing them) are aware of their rights and responsibilities and the responsibility to provide accurate information about the injury and its cause
- consult with workers and, where applicable, unions to ensure that the return-to-work program operates as smoothly as possible
- maintain the confidentiality of records relating to injured workers, and
- not dismiss a worker as a result of a work-related injury for the period defined under the jurisdiction's worker's compensation legislation.

8.2 PROCEDURES

To support the above, the Organisation has established the below procedures:

i) Notification of injuries

All injuries must be notified to management as soon as practicable.

All minor injuries will be recorded on the **First Aid Treatment Log/Register of Injuries**.

All injuries requiring medical treatment must be notified to management as soon as practicable using the **Incident Report Form**.

The Organisation's workers compensation insurers will be notified of any injuries that may require compensation within 48 hours.

ii) Recovery

All injured workers will receive appropriate first aid or medical treatment as soon as possible.

Injured workers will be permitted to nominate a treating doctor who will be responsible for the medical management of the injury and assist in planning return to work.

iii) Return to work

A suitable person will be arranged to explain the return to work process to injured workers.

The injured worker will be offered the assistance of an accredited rehabilitation provider if it becomes evident that they are not likely to resume their pre-injury duties, or cannot do so without changes to the workplace or work practices.

iv) Suitable duties

An individual return to work plan will be developed when injured workers are, according to medical advice, capable of returning to work.

Injured workers will be provided with suitable duties that are consistent with medical advice and are meaningful, productive and appropriate to the worker's physical and psychological condition.

Depending on the individual circumstances of injured workers, suitable duties may be at the same workplace or a different workplace, the same job with modified duties or a different job, and may involve modified hours of work.

v) Non work-related injury

Where the company can accommodate a worker with a non-work-related injury, it will make every endeavour to do so. A return to work plan will be developed, in consultation with the worker and his/her treating practitioner, when modified duties can be provided.

vi) Dispute resolution

If disagreements about the return to work program or suitable duties arise, the Organisation will work with injured workers and their representatives to try to resolve the issue.

If all parties are unable to resolve the dispute, the Organisation will seek to involve the workers compensation insurer, an accredited rehabilitation provider, the treating doctor or an injury management consultant.

9 EMERGENCY PROCEDURES

9.1 INTRODUCTION

Building and premises emergencies may arise at any time. They can develop from a number of causes including fire, chemical spills, gas leaks, bomb threats, structural faults and civil disturbance. Any of these may threaten the safety of workers.

The Organisation is committed to establishing and maintaining procedures to control emergency situations that could adversely affect workers.

9.2 EMERGENCY PLANS

The Organisation will ensure the workplace has procedures in place to address emergency situations.

Where necessary, emergency personnel will be nominated, trained and ready to act in an emergency situation. Training of such personnel may include attendance at emergency procedure training conducted by the building owner.

Where an emergency situation does arise, the emergency personnel will be responsible for taking control of the situation and ensuring all workers are evacuated from the workplace in accordance with the workplace emergency procedures.

Emergency evacuation exercises will be conducted annually to test emergency procedures. All workers will be required to participate in the emergency evacuation exercises. The exercises will be observed, and the outcomes reviewed, to determine the effectiveness of the procedures in place.

The emergency procedures will be communicated to all workers and visitors as part of the induction process.

The emergency procedure, or a summary of, will be readily accessible by workers or displayed in a prominent location within the workplace.

i) Medical emergencies

In the event a medical emergency arises, and someone requires emergency medical attention, the following procedure will be adopted:

- the situation will be assessed to ensure personnel safety
- help will be summoned from others in the immediate vicinity, or a nominated first aid officer. The affected worker will not be left unless it is unavoidable, and
- the alarm will be raised, and emergency services contacted. Clear instructions will be provided to emergency services on:
 - the location of the worker and directions to the workplace
 - the details of casualty (type of injury, age and condition of worker)
 - the time of injury or illness.

ii) Bomb threat

In the event a bomb threat is received, the following procedure will be adopted:

- the worker receiving the bomb threat by telephone should not hang up, but instead should stay on the phone and take notes of the conversation
- the caller should be kept on the line for as long as possible, and asked to repeat the information provided and for additional information about the threat
- where possible, someone else should listen in to the call, and
- management, and any building security/management, should be contacted to evaluate whether an emergency evacuation is required.

If an evacuation is ordered in response to a bomb threat, all workers should quickly check their work area for any unusual objects and mark these with a sheet of paper without touching the object. They should then leave the building as instructed. The location of any unusual objects must be reported to the floor warden, building security or the attending emergency services.

iii) Fire

In the event a worker discovers a fire, the following procedure will be adopted:

- the worker should assess the situation and the safety of anyone in the immediate vicinity
- the worker should immediately call for help or operate the nearest fire alarm and have someone advise the nominated emergency co-ordinator or fire warden
- where it is safe to do so, the worker should attempt to put out the fire with a nearby fire extinguisher, aiming the extinguisher at the base of the flame, and
- if it is not safe to do so, the fire increases in size, or the extinguisher runs out, the worker should evacuate to the nearest evacuation assembly point.

In the event a fire alarm is sounded, the following procedure will be adopted:

- warden/management staff will contact emergency services
- all workers should leave the building immediately via the nearest emergency exit to the nearest evacuation assembly point, and
- any missing worker will be reported to a fire warden or emergency services.

Fire exits will be kept clear from obstruction at all times. Fire extinguishers will be located in conspicuous, readily accessible locations in the workplace. A clearance of 1000mm must be maintained around each fire extinguisher. Signage that complies with AS 2444-2001 Portable fire extinguishers and fire blankets will be displayed. All workers must know their evacuation route and assembly point in case of a fire.

At all times workers should remain calm. Workers should not run, panic or take belongings with them when evacuating. The building will not be re-entered until it has been cleared as safe to do so by the emergency co-ordinator/fire warden or emergency services.

iv) **Chemical spill**

Appropriate emergency/clean up equipment is to be made available and maintained prior to a chemical spill occurring.

Specific advice on how to manage a chemical spill is contained within the product's Safety Data Sheet (SDS). Workers are to have access to and be familiar with each product's SDS so that appropriate health and safety control measures are implemented.

In the event of a minor chemical spill or leak, the following procedure will be adopted:

- the chemical will be cleaned up in accordance with the product's SDS, including the requirement to wear certain PPE
- if the spilt chemical is a flammable liquid, ensure that ignition sources are eliminated
- the spill or leak will be contained to prevent the chemical from spreading. This may be achieved with spill containment equipment or by placing a small leaking container into a larger container to contain the leak
- if required, isolate the area where the chemical has been spilt to control access
- clean the spill immediately
- dispose of waste in accordance with local regulations and do not mix substances in the waste bin because they might react, and
- notify your manager and complete an **Incident Report Form**. In certain situations, there may be a requirement to notify the state regulator.

v) **Infield or remote emergency**

In the event an infield or remote emergency takes place, the following procedure will be adopted:

- determine physical location by urban street reference, rural address number, geographical feature and/or GPS coordinates (where available)
- confirm location using GPS mapping software, and obtain/confirm location coordinates for emergency services
- contact the appropriate emergency service or breakdown service to respond to the last known location of the worker
- establish who will be responsible to coordinate the recovery of workers and assets
- draft a log of events, maintain contact with workers requiring assistance, and relay instructions for the emergency response, and
- maintain contact with affected workers until emergency services or breakdown services reaches location.

vi) **Environmental incident**

In the event an environmental incident occurs, the following procedure will be adopted:

- immediately implement control or containment measures if safe to do so
- request medical aid where worker exposure warrants health intervention
- notify the state Environment Protection Authority (EPA) and any other relevant agencies
- where remediation is required, engage an accredited waste management company to clean up the site
- establish and maintain an accurate record of incident notifications, communication and actions, and
- complete appropriate health assessments of employees exposed to contaminants, seek State Health Department advice on requirements for medical intervention.

9.3 INCIDENT REPORT

Where the workplace is affected by an emergency, the Organisation will complete an **Incident Report Form** as soon as reasonably practicable to identify the causes of the emergency, any control measures that can be implemented to prevent re-occurrence and improvements to the above emergency procedures.

10 FIRST AID

10.1 INTRODUCTION

First aid is the emergency care of sick or injured persons.

The Organisation is committed to ensuring that a first aid service is available and accessible at all times to provide immediate and effective first-aid to workers or others who have been injured or become ill at our workplace.

The overall objective of this service is to reduce the severity of the injury or illness.

10.2 FIRST AID KITS

When considering how to provide first aid, the Organisation will consider all relevant matters including:

- the nature of the work being carried out in the workplace
- the nature of the hazards in the workplace
- the size, location and nature of the workplace, and
- the number and composition of workers in the workplace.

First aid kits provided in the workplace will:

- be constructed of hardy material, and if appropriate, be capable of being locked (the key being easily accessible in cases of emergency)
- be clearly and legibly marked on the outside with the words FIRST AID and a safety information sign complying with AS/NZS 1319
- contain nothing except first aid equipment and resources in appropriate quantities
- be audited on a regular basis and contents replenished as required, and
- be kept clean.

The first aid kit will have attached to the inside of the lid:

- an inventory of the first aid equipment and resources which the kit is required to contain
- a notebook and pen for the purposes of recording information regarding treatment and usage
- cardiopulmonary resuscitation (CPR) flow chart, and
- a **First Aid Treatment Log/Register of Injuries** form, or instructions on where to obtain the form.

The Organisation will nominate a person/s, who will be responsible for monitoring and maintaining the first aid kit. The nominated person will:

- undertake regular checks to ensure the kit contains a complete set of the required items

- ensure any items used are replaced as soon as practicable after use
- ensure that the contents are in good working order, have not deteriorated, are within their expiry date and sterile products are sealed and have not been tampered with, and
- maintain a record of first aid kit inspection details indicating the date of inspection and the person who undertook the inspection.

10.3 FIRST AID PERSONNEL

A first aid officer will be appointed to be in charge of the first aid kit and will be readily available to render first aid when necessary.

A notice will be displayed in a prominent position near the first aid kit clearly showing:

- the name and telephone number (if applicable) of the appointed first aid officer/s, and
- the place where each first aid officer is normally located in the workplace.

As a low risk workplace, the Organisation will designate at least one first aider for every 50 workers engaged in the workplace.

10.4 ADDITIONAL FIRST AID PERSONNEL

The Organisation will consider the following factors in determining whether additional first aid officers are required:

- the maximum number of workers in the workplace at any one time
- the nature of the work being carried out in the workplace, in particular whether workers are at a risk of being exposed to hazards that could require immediate first aid treatment
- the location and proximity of the workplace to emergency services
- the way in which work is arranged and the access each worker has to a first aider, and
- any other factors that indicate that additional first aiders may be needed (for example, engaging workers on shift work, seasonal work, number of other persons in the workplace and industry specific hazards).

10.5 REGISTER OF INJURIES AND TREATMENT

The Organisation will provide and maintain a workplace **First Aid Treatment Log/Register of Injuries**. Management will ensure the details of any workplace injury or illness are recorded on this register.

The register of injuries will:

- be kept in a readily accessible area of the workplace
- be made available for inspection when requested by an authorised inspector, and
- be kept for at least five years after the date of the last entry made in it.

10.6 INCIDENT RESPONSE

The Organisation will take all steps necessary to provide emergency rescue and medical help to workers suffering a workplace related injury or illness.

Where an injury or illness requires immediate urgent attention, an ambulance will be called. When calling an ambulance, clear concise information will be relayed identifying the workers location and severity of the injury or illness.

Where the injury or illness requires the worker to leave the workplace for medical treatment, management will accompany the affected worker to provide all appropriate assistance. Where management are unavailable, another worker will accompany the affected worker, especially if there are concerns about the workers ability to travel.

Management will take any actions that will prevent or minimise the risk of further accidents, injury or property damage. For example, the accident site or equipment involved will be secured rendering it safe.

11 HEALTH AND SAFETY TRAINING

11.1 INTRODUCTION

The Organisation will provide the necessary health and safety training to ensure that work can be performed in a healthy and safe manner in the workplace.

Training will focus on the hazards and risks associated with the work, along with the control measures required to ensure the health and safety of the workers.

The Organisation will ensure that no worker will commence work where they may be exposed to a hazard/s without having received the appropriate level of induction and/or training and instruction to complete the tasks safely.

11.2 AIMS OF HEALTH AND SAFETY TRAINING

The Organisation's commitment to health and safety training is communicated through the **Health and Safety Policy**.

Health and safety training are conducted to ensure that:

- appropriate health and safety information, instruction, training and supervision is provided to all workers
- health and safety competencies for all workers are identified and reviewed and the appropriate training provided
- health and safety competencies of contractors, labour hire workers, volunteers and visitors are assessed prior to engagement, and
- workers receive training in the health and safety requirements appropriate to their position and tasks (including re-training where necessary).

Records of training conducted will be retained by the Organisation.

11.3 HEALTH AND SAFETY TRAINING PROVIDED

The Organisation will provide the following:

- health and safety inductions for all workers
- first aid training for nominated first aid officers
- emergency evacuation training for nominated fire wardens if appointed
- training on health and safety obligations for officers
- risk management training for workers, and
- skill training for plant and equipment.

A record of training will be kept using the **Skills Matrix** form, detailing when a worker was trained, and if required, when the skill expires and retraining is required. For example, CPR refresher training is required every year and first aid training is required every three years.

12 INSPECTION, TESTING AND MAINTENANCE

12.1 INTRODUCTION

A requirement of health and safety legislation is to ensure that the workplace and working environment is safe and without risks as far as is reasonably practicable and all plant and equipment is safe to use and/or operate when it is appropriately and properly used.

To this end, the Organisation will ensure that the workplace, working environment and all plant and equipment is regularly inspected, tested where necessary and maintained in accordance with the manufacturer's instructions, or as otherwise required.

Such activities must be sufficient to ensure a safe and healthy workplace as far as is reasonably practicable and to ensure the Organisation meets its compliance responsibilities.

12.2 REQUIREMENTS FOR INSPECTION, TESTING AND MAINTENANCE

In relation to the Organisation's responsibilities to undertake workplace inspections and to inspect, test and maintain plant and equipment appropriately, the Organisation will:

- undertake appropriate workplace and/or site inspections at least every six months and
- inspect, test and maintain all plant and equipment, including portable electrical apparatus and low risk items such as storage facilities, workstations, furniture and photocopiers, in accordance with the manufacturer's recommendations, or as otherwise required.

Records of the inspection, testing and maintenance activities will be appropriately maintained on either an internal register, record/report supplied by the tester or in item specific records such as a logbook or checklist to confirm that such activities are undertaken.

In addition, informal inspections must be undertaken on all plant and equipment prior to each use or operation.

Any item failing an inspection or test will be quarantined, tagged out of service and isolated from use until it has been repaired and deemed safe for use. Items that cannot be repaired will be disposed of in an appropriate manner.

12.3 REVIEW OF INSPECTION AND TESTING INTERVALS

Inspection and testing intervals will be reviewed:

- at least annually
- after an incident where a failure is attributed to inadequate inspection, testing or maintenance
- when manufacturer or legislative requirements change and
- in response to safety alerts.

12.4 WORKER RESPONSIBILITIES

To eliminate or minimise the risks related to the use, handling, storage, maintenance and/or disposal of plant or equipment, workers will:

- ensure that they have sufficient skills and competencies to undertake work that requires the use, handling, storage, maintenance and/or disposal of plant or equipment
- actively participate in the risk management strategies designed to inspect and maintain the workplace, test and maintain emergency procedures, and inspect, test and maintain plant and equipment
- understand the Organisation's emergency preparedness and response plan
- only use plant and equipment for its intended purpose
- follow any reasonable work instruction given to them designed to protect their health and safety or that of others at the workplace
- not unduly alter the design, operation, functions or characteristics of any plant or equipment without appropriate authorisation or approval
- not inspect, repair, adjust, maintain and/or clean any item of plant or equipment unless they are authorised to do so
- ensure that any defects that are detected will be reported to their supervisor or manager and ensure that a **Hazard Report Form** is completed and
- ensure that any incident associated with plant or equipment will be reported to their supervisor or manager and ensure that an **Incident Report Form** is completed.

13 DRUGS AND ALCOHOL

13.1 INTRODUCTION

The Organisation is committed to ensuring the health, safety and welfare of all workers and to prevent and reduce harm associated with people being impaired by drugs or alcohol at work.

The misuse of drugs or alcohol by workers can affect their health or safety and that of other workers and members of the general public as well as having adverse effects on work performance, behaviour or attendance at the workplace.

This policy applies to all workers, including contractors.

13.2 ORGANISATION'S RESPONSIBILITIES

Where a manager suspects or is informed that a worker may be unfit to perform their duties due to drug or alcohol misuse, it is management's responsibility to assess the risk and take appropriate action. This may include:

- directing any worker reasonably suspected of being under the influence of drugs or alcohol to immediately cease work and move away from the work area
- directing any such workers to a medical practitioner nominated by the Organisation for the purpose of undergoing testing to confirm whether the worker is in fact under the influence of drugs or alcohol
- arranging for on-site testing for workers accused of being under the influence of drugs and alcohol
- arranging for transport home for any worker suspected of being under the influence of drugs or alcohol
- counselling workers who are found to be in breach of these guidelines, and
- authorising appropriate assistance for a worker whose performance is affected by drugs and/or alcohol.

Where the worker is deemed to be unfit for work due to the misuse of drugs or alcohol, he or she will usually be required to take leave without pay. In addition, disciplinary action may be taken against the affected worker.

13.3 WORKER RESPONSIBILITIES

Workers are responsible for:

- ensuring they are fit for duty at all times while working
- ensuring they are not under the influence of alcohol, drugs or medication of any kind where doing so could adversely affect their ability to perform their duties safely or efficiently
- complying with statutory limits for blood alcohol and drug content while operating any machinery in or in connection with the performance of their duties
- questioning their doctor or pharmacist as to the potential effects or side effects when using any prescription or over-the-counter medication, and whether they are still able to perform their job safely (including driving, where applicable)

- notifying management when using any prescription or over-the-counter medication that may impair their ability to safely and effectively perform their job
- ensuring they do not use, possess or distribute any alcohol, drugs or medication of any kind while at work, nor use the Organisation's resources to do so at any time
- notifying management if they suspect another worker or visitor to be adversely affected by alcohol, drugs or medication of any kind, and
- complying with any reasonable request by management, or an authorised tester, to undergo testing and participate in rehabilitation programs in accordance with the Organisation's Policy.

13.4 MEDICATION

Workers who are using prescription or over-the-counter drugs that may impair their ability to safely and effectively perform their job must notify management immediately.

Where a worker is taking prescribed or over the counter medication, they must question their doctor or pharmacist in regard to the effect, or side-effect, if any, that their medication(s) may have on their ability to perform work safely and efficiently, and their ability to drive (where relevant).

14 HEALTH AND SAFETY ISSUES RESOLUTION

14.1 INTRODUCTION

Issues may arise anywhere within the Organisation in relation to health and safety matters. Often these can be resolved at the source or where the original issue is raised. However, where an issue cannot be resolved to the satisfaction of any party following consultation and discussion on the matter, an issues resolution process will ensure that the matter is resolved in a fair and equitable manner.

When a health and safety issue arises, the parties must make reasonable efforts to achieve a timely, final and effective resolution of the issue.

Any party to the issue may inform the other party of the issue as it may relate to:

- work carried out at the workplace, and/or
- the conduct of the Organisation.

When informing any other party of an issue, there must be a defined issue to resolve and the nature and scope of the issue must be identified. All parties involved in the issue must make reasonable efforts to come to an effective, timely and final solution of the matter.

14.2 ORGANISATION'S RESPONSIBILITIES

The Organisation will consult with workers to ensure that there is genuine agreement on the Issues Resolution Procedure and will ensure that:

- all workers have sufficient knowledge and understanding of the issues resolution procedures, and
- all issues raised are addressed in a timely and effective manner.

Where issues are raised by other parties within the Organisation that have not been resolved at the local level, the Organisation will agree to meet or communicate with all parties to the issue in a genuine attempt to resolve the issue, taking into account:

- the overall risk to workers or other parties to the issue
- the number and location of workers and other parties affected by the issue
- the measures or controls required to resolve the risk, and
- the person responsible for implementing the resolution measures or controls.

The Organisation will ensure that their representative to any consultation and communication designed to resolve an issue is sufficiently competent to act on its behalf, has sufficient knowledge and understanding of the issues resolution process and has the appropriate level of seniority in the decision-making process.

14.3 SUPERVISOR'S RESPONSIBILITIES

When presented with a health and safety issue, the supervisor will ensure that the individual reporting the issue has completed a **Hazard Report Form** or an **Incident Report Form**. Where an issue cannot be resolved at the

localised level and/or the supervisor is unable to resolve the issue through effective consultation with the worker/s affected, the matter will be escalated to the next level of management.

14.4 WORKER RESPONSIBILITIES

Workers are encouraged to resolve minor health and safety issues at the source of the issue, where they are authorised and it is safe to do so.

Where the issue cannot be resolved at the initial level, the issue should be raised with the supervisor of the area concerned. Every endeavour should be made to resolve health and safety matters at departmental level before referring them to the next level within the Organisation.

Where an issue raised by workers has been considered by all levels within the Organisation and cannot be effectively resolved following genuine consultation and communication, a worker or their representative may refer the health and safety issue to their industrial union, representative association or State or Territory health and safety regulator for assistance with resolution.

14.5 ISSUES RESOLUTION OUTCOMES

Where an issue is resolved, all identified health and safety issues and their subsequent resolution will be recorded to allow the Organisation to identify potential future risks and endeavour to prevent a recurrence.

Where the issue is resolved and any party to the issue requests, details of the issue and the resolution will be set out in a written agreement.

Where a written agreement is prepared:

- all parties to the issue must be satisfied that it accurately reflects the resolution, and
- the agreement will be provided to all people involved with the issue and/or their representative if requested.

Where an issue remains unresolved following all reasonable efforts being made to resolve it, any party to the issue can ask the regulator to appoint an inspector to assist at the workplace. Such a request can be made regardless of whether or not there is agreement about what is deemed to be reasonable efforts to resolve the issue.

15 MENTAL HEALTH

15.1 INTRODUCTION

The working environment can often present hazards that may impact on the mental health of workers, potentially causing the worker to suffer a psychological injury or exacerbating a pre-existing condition. This may occur at a physical workplace, or any location or situation related to work or in which work is performed.

Hazards in the workplace that may impact upon the mental health of workers, and therefore potentially result in psychological injuries, include the physical workplace environment, the nature and complexity of the work itself, work procedures, behaviour of workers towards one another, the structure of the Organisation, the potential exposure to violent or traumatic events and the introduction or work restrictions that are beyond the control of the Organisation.

The Organisation is therefore committed to helping to support the overall mental wellbeing of its workers and ensuring that the risk of psychological injuries in the workplace is eliminated as far as is reasonably practical and is effectively and pro-actively managed through a risk management approach.

15.2 IDENTIFYING MENTAL HEALTH RISKS

Workplace hazards that may result in mental health risks and psychological injuries include anything in the overall design or management of work and/or the workplace that increases the risk of work related stress and results in a physical, mental or emotional reaction.

Such hazards may be identified by:

- having conversations with workers, supervisors and managers
- inspecting the workplace to see how work is carried out
- identifying how workers interact with each other during work activities
- reviewing relevant information and records such as reporting systems including incident reports, workers' compensation claims, staff surveys, grievance records, absenteeism and staff turnover data
- using surveys to gather information from workers, supervisors and managers and
- ensuring regular feedback from isolated workers such as those working from home is taken into consideration.

The Organisation recognises that individuals respond to hazards in different ways and that individual differences such as age, existing disabilities, injuries or illnesses as well as life experiences may make some workers more susceptible to harm from exposure to the same hazard. It is also recognised that there may be more than one aspect of the working environment or workplace that is contributing to the mental health of workers and the risk of psychological injuries.

To clearly identify the risk of psychological injuries to workers, the Organisation will ensure that the job, task and role hazards are identified, particularly where:

- work requires sustained high physical, mental and or emotional effort, including long work hours, shift work and related fatigue, excessive workloads, emotionally distressing work or episodes, exposure to

traumatic events, and exposure to extremes in the work environment such as prolonged exposure to physical and environmental workplace hazards

- work requires only low levels of physical, mental or emotional effort, including repetitive and/or monotonous tasks
- workers have a low level of control over the work being undertaken and are not involved in decisions that may impact upon them
- work is performed in an area of the workplace that may have minimal support from supervisors and co-workers such as remote or isolated workers
- workers may not have received sufficient training, information and instruction to undertake the work required safely and correctly
- there may be known or potential poor relationships or conflict between management and workers or between co-workers. This includes the identification of workplace bullying, aggression, harassment (including sexual harassment), discrimination, or other unreasonable behaviour by co-workers, supervisors or clients
- there may be a perceived lack of fairness by workers in addressing organisational issues and resource allocation or where performance issues have been inappropriately or poorly managed
- the role being undertaken by workers is not clearly defined, involves frequent changes or conflicts in expectations, procedures or performance standards
- the workplace is undergoing structural or organisational change and
- the workplace is undergoing structural or organisational change whether initiated by the Organisation or by demands or restrictions placed upon the workplace that are beyond the control of the Organisation.

15.3 ASSESSING MENTAL HEALTH RISKS

As part of the risk management approach, the Organisation will ensure that any work related hazards that could impact upon a worker's mental health are assessed to determine the seriousness of these hazards.

The first step in assessing mental health risks will be to focus on those parts of the Organisation where risks to the mental health of workers have already been identified or where a potential of such risk has been identified.

The most suitable assessment methodology must be used, taking into account the nature of the risk and the process must also take into account the workers views of any known or potential work-related mental health hazards.

In assessing these risks, the following factors should be taken into account:

- the social and physical environment, such as the individual or group of workers':
 - role within the Organisation
 - opportunities for career development and their overall status within the Organisation, including remuneration levels
 - conflicting home/work demands

- overall working environment, including physical and environmental conditions, the condition of plant and machinery used at work and the presence of workplace hazards such as hazardous noise, hazardous manual handling and hazardous chemicals
- the way that work and systems of work are organised, such as:
 - the complexity, content and demands of the work required
 - the workload expectations and pace of the work
 - work schedules and working hours
 - work procedures
 - the extent of participation and control that workers have over the work
- the way that work is managed, including:
 - the level and quality of supervision provided to workers
 - the level of information, instruction and training provided to workers and whether it is sufficient to enable workers to do their work safely and correctly and allows them to meet the Organisation's expectations
 - the level of resources allocated to undertake the work
- interpersonal relationships, particularly where there may be poor existing relationships resulting from:
 - breakdowns in relations between management/supervisors and workers
 - breakdowns in relationships between co-workers
- organisational or structural change within the business, including restructures or potential sale of the business and
- the introduction of new or additional resources or processes that may change the way work is undertaken.

15.4 CONTROLLING MENTAL HEALTH RISKS

The Organisation recognises that the management of work related mental health issues and the psychological health and safety of workers starts with a clear and open commitment from the Organisation. To this end, the Organisation will ensure as far as is practical that:

- any work related factor that may impact upon the mental health of workers is identified, recognised, assessed and controlled, including where such impact is not able to be controlled by the Organisation such as a change in Government policy
- the work expectations of workers are clearly identifiable, for example through job descriptions, relevant policies and work procedures
- all workers are provided with an appropriate induction that includes information related to the Organisation's commitment to the mental health of workers and the workers responsibilities related to helping to ensure a healthy and safe workplace

- all workers have sufficient training, instructions, tools and equipment to do their work safely
- the skills and experience of workers is appropriately utilised by the Organisation, and workers are not routinely underutilised or used in areas of work where they have not been deemed competent
- all managers and supervisors are provided with sufficient training in the identification, prevention and management of mental health risks and in good management practices
- all managers and supervisors understand the procedures and processes in place, including those relating to the taking of reasonable management action, to eliminate or minimise the risks of work related mental health risks and psychological injuries to workers
- there is adequate and appropriate supervision of workers and that there is a mechanism for consultation between management, supervisors and workers in relation to mental health risks in the workplace
- all managers and supervisors understand the Organisation's operations, including the hazards to the mental health of workers and the overall health and safety of workers
- all workers understand the applicable organisational operations that may impact upon their mental wellbeing and the processes and procedures in place to eliminate, minimise and report any mental health risks
- the physical work environment is safe with appropriate and adequate plant and equipment for workers to perform their jobs properly and safely
- the systems of work are safe when properly followed and that they take into account the establishment of realistic deadlines, access to adequate breaks and leave and include fair and equitable work scheduling and rostering
- there are appropriate resources and processes in place to eliminate or manage mental health risks and the risk of work-related psychological injuries
- the resources and processes designed to eliminate or manage mental health risks and the risks of work-related psychological injuries are effectively and efficiently implemented, managed and utilised
- there are appropriate processes for receiving, monitoring and reviewing information on incidents, hazards and risks related to the mental health of workers
- any reports or information related to potential work-related mental health issues are responded to in a timely way
- investigations in relation to mental health issues will be completed in a timely manner, and (if substantiated) appropriate action will be taken promptly to prevent reoccurrence
- it acquires up to date knowledge of work related mental health matters, the risks to the psychological health of workers and general health and safety matters
- a process is in place to verify that resources and processes are provided and used to manage work-related risks to the mental health of workers
- there are sufficient resources in place to assist workers with non-workplace related mental health issues and their overall mental health, including the provision of confidential counselling for affected workers, whether work related or not

- workers receive adequate and appropriate feedback on work performance and that due recognition is given for positive performance
- it is able to offer a safe and effective return to work to any worker who may be returning to work following mental health issues or may have sustained a psychological injury and
- regular monitoring and review of the effectiveness of measures are in place to eliminate or reduce mental health hazards and the risks of workers sustaining a psychological injury.

15.5 BULLYING AND HARASSMENT

A major risk to the mental health and wellbeing of workers is bullying or harassment at the workplace. Regardless of whether bullying or harassment occurs via physical, verbal or non-verbal conduct, it can be a major risk factor for psychological injuries potentially resulting in anxiety, depression and suicide, and can adversely affect the psychological and physical health of a worker.

In line with its policy in relation to mental health risks, the Organisation will ensure that effective control measures are put in place to address and resolve workplace issues early, thereby minimising the risk of workplace bullying or harassment.

Bullying is repeated, offensive, abusive, intimidating, insulting or unreasonable behaviour directed towards an individual or a group, which makes the recipient(s) feel threatened, humiliated or vulnerable. Whether intentional or not, bullying creates a risk to health and safety and will not be tolerated by the Organisation. It includes, but is not limited to:

- abusive, insulting or offensive language or comments
- physical or emotional threats
- aggressive and intimidating conduct
- belittling or humiliating comments
- victimisation
- practical jokes or initiation
- unjustified criticism or complaints
- deliberately excluding someone from work related activities
- withholding information that is vital for effective work performance
- setting unreasonable timelines or constantly changing deadlines
- setting tasks that are unreasonably below or beyond a person's skill level
- denying access to information, supervision, consultation or resources to the detriment of the worker
- spreading misinformation or malicious rumours and
- changing work arrangements such as rosters and leave to deliberately inconvenience a particular worker or workers.

Harassment is any unwanted physical, verbal or non-verbal conduct based on grounds of age, disability, gender identity, marriage and civil partnership, pregnancy or maternity, race, religion or belief, sex or sexual orientation which affects the dignity of anyone at work or creates an intimidating, hostile, degrading, humiliating or offensive environment. Whether intentional or not, harassment creates a risk to health and safety and will not be tolerated by the Organisation. It includes, but is not limited to:

- insensitive jokes and pranks
- lewd or abusive comments about appearance
- deliberate exclusion from conversations
- displaying abusive or offensive writing or material
- unwelcome touching and
- abusive, threatening or insulting words or behaviour.

Where any incidents of bullying or harassment are identified, it will be addressed via a disciplinary procedure in line with our disciplinary policies and procedures.

If the behaviour involves violence such as physical assault or the threat of physical assault, the matter will be reported to the police.

15.6 WORKER RESPONSIBILITIES

The Organisation recognises that the management of work related mental health issues and the psychological health and safety of workers starts with a clear and open commitment from the Organisation. However, the overall success of our risk management strategies is also dependent upon workers understanding their responsibilities in relation to helping to minimise the risks to their own mental health and the mental wellbeing of others at work.

To this end, workers are responsible for ensuring that they:

- have received an appropriate induction that includes information related to the Organisation's commitment to the mental health of workers and the workers responsibilities related to helping to ensure a healthy and safe workplace
- understand the Organisation's commitment to the overall mental health of workers and the policies and procedures developed to help identify, assess and control risks to mental health in the workplace
- understand their role at work, ensure that it has been clearly identified and it is clearly within the scope of their skills, knowledge and experience
- have received sufficient training, instructions, tools and equipment to do their work safely

- actively participate in the consultation mechanisms or forums designed to help ensure their health and safety at work, including those targeted at the overall mental health of workers
- understand the applicable organisational operations that may impact upon their mental wellbeing, including those beyond the control of the Organisation, and the processes and procedures in place to eliminate, minimise and report any mental health risks
- comply with all systems of work and procedures that are designed to help ensure their health and safety and the health and safety of others at work, including those specifically designed to eliminate or minimise mental health risks
- utilise the applicable reporting procedure to report any work related hazard to their own mental health or the mental wellbeing of others at work as soon as it becomes evident, include any incidence of bullying or harassment (as outlined below) affecting themselves or another worker and
- receive adequate, appropriate and timely feedback on work performance.

In minimising the mental health risks to others in the workplace, workers must not act or behave in a manner that could be considered bullying or harassment. Such behaviour creates a risk to health and safety and, whether intentional or not, will not be tolerated by the Organisation.

16 SEXUAL HARASSMENT

16.1 INTRODUCTION

1Medical (the Employer) is committed to the provision of a fair, healthy and safe workplace in which everyone is treated with dignity and respect and in which no individual or group feels offended, threatened or intimidated. Everyone in the workplace has the right to a workplace that is safe and free from sexual harassment.

Sexual harassment is a legally recognised form of sex discrimination. Sexual harassment and sex discrimination are both unlawful under the Sex Discrimination Act and Fair Work Act.

Sexual harassment in any form will not be tolerated. We recognise that sexual harassment can seriously affect workers' working lives by detracting from a productive working environment and can seriously impact on the health, confidence, morale and performance of those affected by it, including anyone who witnesses or has knowledge of the unwanted or unacceptable behaviour.

16.2 SEXUAL HARASSMENT

Sexual harassment is a specific and serious form of harassment. It is unwelcome sexual behaviour, which could be expected to make a person feel offended, humiliated or intimidated. Sexual harassment can be physical, spoken or written. It can include:

- inappropriate physical contact, such as unwelcome touching
- inappropriate staring or leering
- making a suggestive comment or joke
- sharing sexually explicit pictures or posters, sending sexually explicit emails or messages
- making an unwanted invitation to go out on a date
- a request for sex
- intrusive questioning about a person's private life or body
- unnecessary familiarity, such as deliberately brushing up against a person
- an insult or a taunt of a sexual nature
- harassment on the grounds of sex
- behaviour that may also be considered to be an offence under criminal law, such as physical assault, indecent exposure, sexual assault, stalking or obscene communications.

Behaviour that may be considered sexual harassment in one situation may not be in others, for example flirtation or love and affection between two consenting individuals which is mutual, consensual or reciprocated is not sexual harassment.

A single incident is enough to constitute sexual harassment – it doesn't have to be repeated. If substantiated, sexual harassment is considered serious misconduct under the Fair Work Act and can amount to a valid reason for termination without notice.

Sexual harassment does not necessarily have to take place in the workplace to be unlawful. Sexual harassment in the course of employment can occur during work hours, at work-related events such as training or social events, between people sharing the same workplace, or even between colleagues outside of work.

Manager and supervisors have an additional responsibility to ensure the safety and welfare of their employees this includes modelling appropriate standards of behaviour, taking steps to educate and make staff aware of their obligations under this policy and the law and responding quickly and appropriately to any form of sexual harassment.

The Employer takes sexual harassment seriously. This policy requires all staff (including apprentices and trainees) volunteers as well as contractors to ensure their behaviour is respectful and appropriate. These examples are not exhaustive and disciplinary action up to and including termination of employment, will be taken against workers committing any form of sexual harassment. Appropriate action in relation to an employee will include disciplinary action in accordance with the Employer's disciplinary and disciplinary termination procedure. For other workers, appropriate action may include termination of their engagement with the Employer

16.3 SEXUAL HARASSMENT COMPLAINT PROCEDURES

i) Informal complaint

We recognise that complaints of sexual harassment can be of a sensitive or intimate nature and that it may not be appropriate for you to raise the issue through our normal grievance procedure. In these circumstances you are encouraged to raise such issues with a senior colleague of your choice (whether or not that person has a direct supervisory responsibility for you) as a confidential helper.

If you are the victim of sexual harassment, we encourage you to make it clear to the alleged harasser on an informal basis that their behaviour is unwelcome and ask the individual to stop. If you feel unable to do this verbally then you should hand a written request to the individual, and your confidential helper can assist you in this.

ii) Formal complaint

Where the informal approach fails or if the sexual harassment is more serious, you should bring the matter to the immediate attention of management as a formal written complaint and again your confidential helper can assist you in this. If possible, you should keep notes of the sexual harassment so that the written complaint can include:

- the name of the alleged sexual harasser;

- the nature of the alleged incident of sexual harassment;
- the dates and times when the alleged incident of sexual harassment occurred
- the names of any witnesses any action already taken by you to stop the alleged sexual harassment.

On receipt of a formal complaint we will take action to separate you from the alleged harasser to enable an uninterrupted investigation to take place. This may involve a temporary transfer of the alleged harasser to another work area or suspension of employees (with contractual pay) until the matter has been resolved.

The person dealing with the complaint will invite you to attend a meeting, at a reasonable time and location, to discuss the matter and carry out a thorough investigation. You have the right to be accompanied at such a meeting by your confidential helper or another work colleague of your choice and you must take all reasonable steps to attend. Those involved in the investigation will be expected to act in confidence and any breach of confidence will be a disciplinary matter.

On conclusion of the investigation which will normally be within ten working days of the meeting with you, a report of the findings and of the investigator's decision will be sent, in writing, to you and to the alleged bully or harasser.

Due to the serious nature of sexual harassment, if you decide to not proceed with a formal or informal complaint, the Employer reserves the right to consider appropriate action in the circumstances in order to ensure the safety and wellbeing of its employees. The Employer will consider the seriousness of the behaviour and circumstances in taking action this may include a review of current processes for preventing and responding to sexual harassment, providing training and reminders to employees of their general obligations not to sexually harass others, following up with you on your concerns as well as monitoring behaviour in the workplace.

16.4 GENERAL NOTES

If the report concludes that the allegation is well founded, appropriate action will be taken against the harasser.

If you bring a complaint of sexual harassment you will not be victimised for having brought the complaint. However, if the report concludes that the complaint is both untrue and has been brought with malicious intent, appropriate action will be taken against you. Appropriate action in relation to an employee will include disciplinary action in accordance with the Employer's disciplinary and disciplinary termination procedure. For other workers, appropriate action may include termination of their engagement with the Employer.

17 HAZARDOUS MANUAL HANDLING

17.1 INTRODUCTION

Hazardous manual handling describes any work requiring a person to lift, lower, push, pull, hold, carry, move or restrain any animate or inanimate object and involves one or more of the following:

- repetitive or sustained force
- high or sudden force
- awkward posture, and/or
- exposure to vibration

Some manual handling and ergonomic activities are hazardous and may cause musculoskeletal disorders. Manual handling injuries are the most common type of workplace injuries across Australia.

The Organisation and particularly the managers and supervisors have a duty to ensure that effective procedures are implemented to identify, assess and control manual handling hazards. Hazardous manual handling tasks in the workplace will be addressed via a risk management approach.

The risk management process is to be carried out in consultation with the workers who are required to perform manual handling. Representatives of workers, such as health and safety committee members or representatives, will also be consulted as required or requested.

17.2 IDENTIFYING MANUAL HANDLING HAZARDS

Manual handling hazards can be identified by:

- observing how workers perform the work
- reviewing injury and incident records, and
- consulting with the workers performing the manual handling.

17.3 ASSESSING MANUAL HANDLING RISKS

As part of the hazard management approach, the Organisation has an obligation to ensure that any manual handling that poses a risk of injury to workers are assessed to determine the seriousness of these hazards. To assist in accurately assessing manual handling risks a checklist has been developed and needs to be completed for each identified activity. This checklist is on the **Hazardous Manual Handling Risk Assessment Form**.

In assessing risks arising from manual handling, the following factors will be taken into account:

- the positions, posture, actions and movements adopted by workers in performing manual handling
 - the layout of the workplace and workstation
 - the duration and frequency of tasks performed by workers
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- the location of loads and distances moved manually
- the weights and forces of loads that are manually handled
- the characteristics of loads and equipment available to assist in manual handling tasks
- the skills and experience of workers who are performing manual handling tasks, along with any special needs or requirements they may have
- any clothing (including protective clothing) that is available or worn whilst performing manual handling, and
- any other factors considered relevant to the workers.

This risk assessment process is to be carried out in consultation with the workers who are required to perform manual handling. Representatives of workers, such as health and safety committee members or representatives, will also be consulted.

In assessing manual handling risks in the workplace, the **Hazardous Manual Handling Risk Assessment** will be used.

In assessing risks arising from manual handling, the following factors will be taken into account:

- the positions, posture, actions and movements adopted by workers in performing manual handling
- the layout of the workplace
- environmental conditions (including heat, cold and vibrations) that impact the worker directly
- the duration and frequency of tasks performed by workers
- the location of loads and distances moved manually
- the weights and forces of loads that are manually handled
- the characteristics of loads and equipment available to assist in manual handling tasks
- the skills and experience of workers who are performing manual handling tasks, along with any special needs or requirements they may have
- any clothing (including protective clothing) that is available or worn whilst performing manual handling, and
- any other factors considered relevant to the workers.

17.4 CONTROLLING MANUAL HANDLING RISKS

The Organisation will ensure, as far as reasonably practicable, that the risks associated with manual handling in the workplace are controlled. The process of controlling manual handling risks will be determined in consultation with the workers who are required to carry out the manual handling.

In the event that manual handling has been assessed as a risk, the Organisation will redesign the manual handling to eliminate or control the risk factors and ensure that workers involved in manual handling receive appropriate training, including training in safe manual handling techniques.



Where redesign of the manual handling is not possible, the Organisation will:

- provide mechanical aids, PPE and/or arrange for team lifting in order to reduce the risk, and/or
 - ensure that workers receive appropriate training in safe methods of manual handling appropriate for the work identified, and in the correct use of mechanical aids, protective equipment and group lifting procedures.
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18 OFFICE SAFETY

18.1 INTRODUCTION

Although working in an office, whether it be at home or at the Organisation's place of work, may appear to be a relatively safe environment to work in, there are many hazards which may potentially cause injury and health problems to workers. Such risks may include:

- risks related to the overall working environment such as the office layout, lighting, floor surfaces and indoor air quality
- office ergonomics and working with computers
- electrical risks
- risks related to kitchen and facility usage, including the use of hazardous chemicals
- the use and maintenance of office equipment
- manual handling risks
- general housekeeping
- storage of items such as records stored in filing cabinets and
- mental health risks from the work itself or interpersonal relationships.

The Organisation is therefore committed to ensuring that all office hazards are identified and the risks are assessed and controlled, as far as reasonably practicable, through the application of risk management principles and in consultation with the workers involved.

It is important to understand that an uncomfortable work environment can affect productivity and increase the likelihood of work-related health issues, in particular ergonomic factors can lead to musculoskeletal injuries (**MSIs**). Controlling hazards such as incorporating good ergonomics practices within the workplace can enhance the working environment, as well as assist in decreasing stress levels within the workplace and improving worker morale and performance.

The **Guide to Office Ergonomics** outlines specific guidelines for office ergonomics. This will be used in conjunction with the **Ergonomics Checklist** to ensure safe workstation setup.

18.2 ORGANISATION RESPONSIBILITIES

The Organisation has a duty to ensure, so far as is reasonably practicable, the health, safety and welfare at work of all its workers whilst working in an office environment. In particular, it is responsible for ensuring that:

- in consultation with workers, any hazards associated with working in an office are identified, assessed and controlled
 - all workers have sufficient training, instruction and supervision to undertake office work in a safe manner
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- all workers have the appropriate, training, qualifications and authorisations to undertake their office-based duties
 - all workers understand the risks involved in working in an office and can identify hazards in the workplace
 - the working environment does not present any risks to workers and others when being properly used and that due consideration is given to the design and security of the office and its layout, the availability and control of natural light, that lighting is sufficient for general office duties and additional task lighting is supplied where required, that there is sufficient supply of fresh, quality air, there is sufficient means to heat and cool the office and the flooring is such that it is designed to help prevent slips, trips and falls
 - safe work procedures and practices are developed to help ensure the safety of workers and others working in the office. Such procedures and practices will include:
 - good housekeeping practices
 - standards for cleanliness and hygiene of the office and related facilities
 - safe procedures and storage of hazardous chemicals in or near the office
 - safe procedures to help ensure the ergonomic safety of workstations
 - safe procedures for manual handling tasks and the storage of items and
 - safe procedures for the use of office machinery such as photocopiers
 - the provision of suitable mechanical aids for lifting and storing items, including safety steps and other mechanical aids where required
 - workstations meet ergonomic guidelines and the needs of workers, including
 - in consultation with affected workers, identifying and assessing the risk factors related to office ergonomics that could lead to MSIs, and eliminating or minimising the risks through the application of appropriate controls, including procurement and design of office-based plant and equipment
 - suitably informing office workers of the risk of MSIs and provide appropriate training in the ergonomically correct use of furniture, equipment and tools and
 - supporting and encouraging MSI prevention activities, such as workers regularly undertaking office stretching and relaxation exercises adequate and safe storage facilities are provided
 - the office has suitable and appropriate emergency preparedness plans in place and procedures to ensure that access and egress passageways remain unobstructed and provide a minimum clearance of 1,000mm (i.e. one metre) or as otherwise required by local ordinances, in the event of an emergency evacuation being required
 - the maintenance of office plant and equipment and the working environment itself is appropriate to help prevent risks in the workplace, and that identified hazards are rectified as soon as practical
 - all potential mental health risks are identified and managed in accordance with the Organisation's **Mental Health** policy
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- all portable electrical equipment is fit for purpose and suitably tested and tagged in accordance with the Organisation's **Electrical Safety** policy and
- the measures implemented for office-based workers are regularly reviewed and if necessary, revised.

18.3 WORKER RESPONSIBILITIES

A number of our workers will be required to undertake office duties as a normal part of their work. This may range from full time office duties for staff in roles such as management and administration to part time or irregular office work for staff such as supervisors and schedulers.

Regardless of their role or the time or location they spend undertaking office-based work, workers will be responsible for ensuring that they:

- have sufficient training, instruction and supervision to undertake office work in a safe manner
 - have the appropriate, training, qualifications and authorisations to undertake specific office-based duties, including the safe use or maintenance of office plant and equipment and related items or supplies
 - understand the risks involved in working in an office and can identify hazards in the workplace
 - understand and can implement the safe work procedures and practices that have been developed to help ensure their safety and the safety of others working in the office
 - actively participate in identifying hazards in the office environment and implementing any corrective actions where authorised to do so, or bringing the hazard to the attention of management
 - know how to maintain their workstation and work area in a manner that is consistent with ergonomic guidelines, including:
 - being advised of the risk of MSIs and have been instructed in the ergonomically correct use of office furniture, equipment and tools and sound ergonomic practices
 - following established safe work practices designed to eliminate the risk of MSIs, particularly in relation to the correct chair, workstation, computer and worker interface adjustments
 - actively participate in the overall development and review of workplace practices related to office ergonomics
 - actively participate in MSI prevention programs, including exercise programs and regular office stretching and relaxation exercises and
 - providing appropriate healthcare documentation to supervisors or managers where medically prescribed adaptations may be required to the standard issue of office furniture, equipment or tools
 - maintain their personal work areas in a neat and tidy state, remove any potential trip hazards immediately where possible and adhere to any related organisational policies
 - do not place obstructions of any sort in passageways, walkways or stairways, particularly emergency exits, or near any firefighting or emergency response equipment
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- follow all safe procedures related to manual handling and safe storage of items such as records and archives
 - follow any office or facilities protocols related to spillages or breakages to ensure they are attended to immediately or as soon as possible
 - dispose of rubbish and waste regularly and appropriately
 - follow any reasonable instruction given by the Organisation that is designed to ensure their health and safety or the health and safety of others, including those related to the functions and operations of the office, emergency responses and security protocols
 - notify management of any hazards that cannot be immediately rectified using the **Hazard Report Form**, including the ergonomic fit of their workstation, equipment or tools required to do their job and
 - report any potential risk of MSIs or incidents to themselves or others at work relating to office-based work using the **Incident Report Form**.
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19 INFECTION CONTROL IN THE WORKPLACE

19.1 INTRODUCTION

The broad definition of infection is the invasion of tissue by pathogenic organisms. Infections generally result from a combination of factors, including:

- the presence of micro-organisms
- a compromised or weakened status of the host and
- the chain of transmission of the micro-organism.

Bacteria, viruses and other organisms, which can cause disease in humans, may be found wherever people live and work.

This policy is designed to be consistent with the Organisation's health and safety framework. Its objective is to identify the requirements of infection prevention and control, and the development of safe work practices based upon risk management procedures. Therefore, the risks associated with infections in the workplace will be addressed via a risk management approach.

However, this policy is also designed to support any advice or directions from government health authorities. Therefore, no part of this policy either stated or implied, is designed to compromise any public health advice or directions that may be issued from time to time and which may require additional controls to be implemented.

19.2 IDENTIFYING INFECTION TRANSMISSION HAZARDS

Micro-organisms are transmitted by various routes and the same infective agent may be transmitted by more than one route. There are several main routes of transmission:

- blood borne transmission through such things as sharp tools or contact with cuts or scratches
- direct contact through person to person contact or via contaminated articles or equipment
- droplet transmission such as through sneezing, coughing or talking
- airborne transmission through microscopic droplets or dust particles
- gastrointestinal infection through contaminated food or fluid or via an infected food handler and/or
- vector borne infections transmitted by carrier insects or animals such as mosquitoes, flies or rats.

The source of infection may be clients/customers, staff or visitors and the person may either be acutely ill or in the incubation (window) period of a disease. They may be a chronic carrier or colonised with the infective agent but have no apparent disease.

Contaminated items in the environment, including surfaces, equipment or food are other possible sources of infection.

The ability to resist infection varies depending upon age and underlying medical conditions. Other factors such as nutritional status or drug therapy may also reduce a person's immunity, making them more susceptible to infection.

Persons who have been recently exposed to trauma or who have recently undergone surgery, or invasive therapeutic and/or diagnostic procedures will also have an increased susceptibility to infection.

19.3 ASSESSING INFECTION TRANSMISSION HAZARDS

As part of the risk management approach, the Organisation has an obligation to ensure that persons and visitors to the workplace are not exposed to any infections, as far as is reasonably practicable.

Given the nature of our work, it is safe to assume that any infection brought into the workplace will pose a risk of injury to persons at the workplace. When approaching a task or duty, consideration must be given to the potential pathological agents involved, the transmission paths of the agents and who may potentially be at risk. The overall risk can then be analysed and assessed based on:

- what are the aspects of the task or procedure that facilitates transmission of infection
- what existing controls are in place
- what is the likelihood of transmission
- what are the likely consequences of transmission and
- what factors will increase or decrease the risk of transmission.

19.4 CONTROLLING INFECTION TRANSMISSION HAZARDS

The Organisation will ensure, as far as reasonably practicable, that the risks associated with infections in the workplace are controlled. The process of controlling exposure to infection transmission risks will be determined in consultation with all personnel in the workplace who are required to carry out the task and will include:

- the development of infection control principles
- the development of administrative requirements designed to minimise the risk of infection transmission
- the development of effective work practices and procedures
- the implementation of an immunisation program
- ensuring that all staff required to undertake a task that may potentially expose them to infection through their work have enough training, skills, knowledge, level of competence and education and/or qualifications to undertake the task and
- a regular review of our policies and procedures.

If exposure to infections within the workplace have been assessed as a risk, consistent with national and international requirements, the Organisation will adopt a three-level approach to infection control precautions.

The three-level approach involves:

- Level 1 – General: infection control procedures for the prevention or minimisation of transmission for all persons at a workplace
- Level 2 – Standard: infection control procedures for persons who may come into contact with blood and/or bodily fluids such as first aid persons and
- Level 3 – Transmission-based precautions: provides a high level of protection to all persons at the workplace following identification of a positive transmission and assumes that Level 1 and Level 2 controls are in place

i) Level 1 controls – general

Infectious agents can be spread in a variety of ways, including:

- breathing in airborne germs – coughs and sneezes release airborne pathogens, which is then inhaled by others
- touching contaminated objects or eating contaminated food
- skin-to-skin contact – transfer of some pathogens can occur through touch or by sharing objects and
- contact with body fluids – pathogens in saliva, urine, faeces or blood can be passed on via cuts or through the mucus membranes of the mouth and eyes.

The first level relates to general procedures designed to eliminate or minimise the risk of infection transmission. These infection control procedures will involve good personal and environmental hygiene, including:

- regular hand hygiene such as handwashing or hand rubbing at all times – washing hands with water and soap for at least 20 seconds, or using alcohol based hand sanitiser can prevent the spread of many pathogens, especially after visiting the toilet, before and after preparing food, and after touching clients/customers or equipment. Wet hands will be dried with a single use paper towel
 - routine environmental cleaning and disinfection, including high contact points such as door handles, lift buttons and telephone equipment as well as high traffic areas such as reception areas
 - promotion of respiratory hygiene and cough etiquette, such as covering the nose and mouth with the crook of the elbow or with a tissue when coughing or sneezing, and dispose of tissue in a closed bin
 - any cuts or open wounds will be appropriately treated and covered with a waterproof dressing
 - appropriate waste bins will be provided to dispose of contaminated tissues and other dirty items and
 - appropriate use of PPE such as gloves when undertaking cleaning and disinfection procedures. PPE and training on its use will be provided to all personnel in the workplace in accordance with manufacturer's guidelines and Australian and New Zealand Standards. PPE will be removed before leaving the work areas where the cleaning and disinfection is taking place.
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ii) Level 2 controls – standard health procedures

The second level of control is referred to as 'standard precautions' and will be applied to all persons at the workplace, clients/customers or visitors regardless of their diagnosis or presumed infection status wherever there is potential contact with:

- blood
- body fluids, secretions and excretions (except sweat)
- non-intact skin or
- mucous membranes, including eyes.

Standard precautions will involve the use of safe work practices and protective barriers, including:

- hand hygiene
- routine environmental cleaning
- managing spills
- waste management
- the safe use and disposal of sharps
- decontamination of equipment
- appropriate use of gloves
- appropriate use of facial protection/masks
- use of protective clothing
- appropriate device handling
- appropriate handling of any laundry items and/or protective clothing and
- incorporation of respiratory hygiene and cough etiquette.

iii) Level 3 controls – transmission-based precautions

Additional control measures will be initiated where persons are known or suspected to be infected with pathogens. These precautions are in addition to the general and standard precautions and are referred to as Level 3, or 'transmission-based precautions' (**TBPs**).

TBPs are used in addition to standard precautions when standard precautions alone may be insufficient to prevent transmission of infection. The three types of additional precautions are:

- airborne precautions which must be applied where the infected patient is known or suspected to be infected with pathogens that can be transmitted by an airborne route for e.g. *Aspergillus*, *Legionella*, Pulmonary tuberculosis, Chickenpox, Measles and Coronaviruses. These will include isolation of the infected person and in the case of a Coronavirus exposure, use of a type P2 or N95 mask that meets the requirements of Australian and New Zealand Standard, AS/NZS 1716:2012 *Respiratory Protection Devices*
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- droplet precautions which must be applied where the person is known or suspected of being infected with pathogens that can be transmitted by droplet route for eg Influenza, Bordetella pertussis (whooping cough), Rubella, Listeria, E. coli, Salmonella and Coronaviruses. These will include isolation of the infected person, maintaining a separation distance of at least one and a half metres, the use of protective gloves and eyewear and the initiation of room cleaning protocols and
- contact precautions designed to reduce the risk of transmission of micro-organisms by direct or indirect contact for eg viral Gastroenteritis, Clostridium difficile, Methicillin-resistant Staphylococcus aureus (also known as MRSA or staph) and Coronaviruses. These will include additional precautions to eliminate contamination of environmental surfaces and equipment through the use of protective gloves and the implementation of additional room cleaning protocols.

TBPs, including cleaning protocols and procedures must be tailored to the infectious agent involved and the mode of transmission. To minimise the exposure time of other people in office/retail based setting or more industrial environment, people identified as at risk of transmitting droplet or airborne diseases (for example, a person with suspected Coronavirus exposure) should be attended to immediately and placed into appropriate transmission-based precautions to prevent further spread of the disease.

19.5 IMMUNISATION PROGRAM

To help ensure the Organisation meets its health and safety obligations to minimise the workplace risks to workers, particularly those in relation to the risk of exposure to vaccine preventable diseases in the workplace, the Organisation will develop and implement an appropriate immunisation program.

According to health authorities, immunisation is one of the safest ways to protect people against harmful infections before they come into contact with them by using the body's natural defences to build resistance to specific infections.

Therefore, to the extent that is permissible under law and where it is determined as necessary through the application of a risk management approach and in accordance with relevant medical advice, the Organisation may make the requirement for immunisation against any particular disease or infection, a condition of employment or engagement with the Organisation.

Where such a program is implemented, the Organisation will take the responsibility for all real costs involved and will, where possible, implement the program during work hours. The Organisation will also retain records of the vaccination program, sufficient to identify who has been vaccinated but in compliance with the Organisation's requirements for the confidentiality of medical and health records.

Prior to the implementation of an immunisation program, the Organisation will:

- seek appropriate and independent medical advice to ensure the recommended program meets all Government and health authority guidelines as well as the requirements of the National Immunisation Program and its related immunisation schedules
 - encourage workers to seek their own independent medical advice regarding the program
 - provide information to all workers on the immunisation programs currently recommended by health authorities for the Organisation's business sector and
 - ensure its infection control policy and program is fully implemented so as to minimise transmission and risks of infectious diseases being transmitted in the workplace.
-

Where an immunisation program is not possible or a worker is unable to be vaccinated for any reason, the Organisation will implement sufficient and appropriate alternative control measures to eliminate or reduce the risk of disease transmission at the workplace.

The implementation of the immunisation program will be overseen by an authorised medical practitioner and will be delivered by an authorised vaccination provider. An annual review of the immunisation status of workers will be conducted and records will be updated accordingly.

19.6 SAFE HANDLING, USE AND DISPOSAL OF SHARPS

A sharp is any object that can inflict a penetrating injury and includes needles, broken glass and any other sharp object or tools designed to perform penetrating procedures. The potential for the transmission of blood borne viruses is greatest when devices such as needles or knives are used. As such, the Organisation will develop a policy and procedures for the safe handling, use and disposal of sharps.

19.7 ENVIRONMENTAL CLEANING

Environmental cleaning refers to the appropriate cleaning of surfaces found in the workplace. Deposits of dust, soil and microbes on surfaces are a potential source of associated infections. The following basic principles should be followed:

- written cleaning protocols should be prepared, including methods and frequency of cleaning
- cleaning procedures must be commensurate with the level of risk and tailored accordingly
- standard precautions (including wearing of personal protective equipment (PPE), as applicable) must be implemented when cleaning surfaces and facilities
- cleaning methods should avoid generation of aerosols
- all cleaning items should be changed after each use and cleaned and dried before being used again. They should also be changed immediately following the cleaning of blood or body fluid/substance spills. Single-use cleaning items are preferred, where possible, such as lint-free cleaning cloths
- sprays should not be used, because they can become contaminated and are difficult to clean. Sprays are not effective, as they do not touch all parts of the surface to be cleaned
- detergents should not be mixed with other chemicals and
- all cleaning solutions should be prepared fresh before use.

The Organisation will ensure that a person is identified and nominated as being responsible for the implementation, management and evaluation of the cleaning service provided.

19.8 MANAGING SPILLS OF BLOOD, BODY FLUIDS AND SUBSTANCES

The Organisation will ensure there are procedures in place for dealing with blood, bodily fluids and substance spills. Cleaning protocols should be included alongside safe work procedures and emphasised in ongoing training.

The basic principles of blood and body fluid/substance spills management are:

- standard precautions should apply, including the use of PPE, as applicable
- spills should be cleared up before the area is cleaned (adding cleaning liquids to spills increases the size of the spill and should be avoided) and
- generation of aerosols from spilled material should be avoided.

The management of spills should be flexible enough to cope with different types of spills whilst also considering the following factors:

- the nature (type) of the spill for example chemical substances, sputum, vomit, faeces, urine or blood
- the pathogens most likely to be involved in these different types of spills – for example, stool samples may contain viruses, bacteria or protozoan pathogens, whereas sputum may contain *Mycobacterium tuberculosis*
- the size of the spill – for example, spot (few drops), small (<10cm) or large (>10cm)
- the type of surface – for example, carpet or impervious flooring
- the location involved – that is, whether the spill occurs in a contained area (such as office), in a public location or within a community premises and
- whether there is any likelihood of bare skin contact with the soiled (contaminated) surface.

i) Cleaning spills – equipment

Standard cleaning equipment, including a mop, cleaning bucket and cleaning agents, should be readily available for spills management. It should also be stored in an area known to all staff.

To help manage spills in areas where cleaning materials may not be readily available, a disposable 'spills kit' could be used, containing a large (20 L) reusable plastic container or bucket with fitted lid, containing the following items:

- appropriate leak-proof biohazard bags and containers for disposal of waste material
- a designated, sturdy scraper and pan for spills
- absorbent mats and paper
- approximately five sachets of a granular formulation containing 10,000ppm available chlorine or equivalent (each sachet should contain sufficient granules to cover a 10cm diameter spill)
- disposable rubber gloves suitable for cleaning
- eye protection (disposable or reusable)
- plastic apron and
- a respiratory protection device, for protection against inhalation of powder from the disinfectant granules or aerosols (which may be generated from high-risk spills during the cleaning process).

Single-use items in the spills kit should be replaced after each use of the spills kit. With all spill management protocols, it is essential that the affected area is left clean and dry before use of the area.

ii) Cleaning spills – procedures

Care should be taken to thoroughly clean and dry areas where there is any possibility of bare skin contact with the surface.

PPE should be used for all cleaning procedures and disposed of or sent for cleaning after use. Hands should be washed and dried after cleaning.

Where a spill occurs on a carpet, shampoo as soon as possible. Do not use disinfectant. Steam cleaning may be used instead.

Wash hands thoroughly after cleaning is completed.

iii) Cleaning spots or small spills

Spots or drops of substances or other small spills (up to 10cm) can easily be managed by wiping the area immediately with paper towels, and then cleaning with warm water and detergent, followed by rinsing and drying the area. Dry the area, as wet areas attract contaminants.

iv) Cleaning large spills

Where large spills (more than 10cm) have occurred in a 'wet' area, such as a bathroom or toilet area, the spill should be carefully washed off into the sewerage system using copious amounts of water and the area flushed with warm water and detergent.

Large spills that have occurred in 'dry' areas should be contained and generation of aerosols should be avoided.

Granular formulations that produce high available chlorine concentrations can contain the spilled material and are useful for preventing aerosols. A scraper and pan should be used to remove the absorbed material. The area of the spill should then be cleaned with a mop, and a bucket of warm water and detergent. The bucket and mop should be thoroughly cleaned after use and stored dry.

19.9 WASTE DISPOSAL

The Organisation will ensure that procedures are in place for the correct management of all waste generated and that they are compliant with regulations and guidelines administered by other Government agencies eg Environmental Protection Agencies and Local Government Ordinances.

All waste should be stored in secure areas until collected. Waste should be removed from workplace areas each day and more frequently as needed, such as from specialised areas. Waste bags should be tied before removing from the area.

i) General waste disposal

Place in general waste bin for removal.

ii) Biohazard waste disposal

Place in biohazard bags as soon as possible. Biohazard bags have a biohazard symbol and are currently coloured yellow.

19.10 MEDICAL/OTHER CONDITIONS

Due to the potential hazards associated with this workplace such as possible exposure to pathogens and infection, persons working at the workplace are required to disclose any medical condition or disability, which may affect their capacity to participate in specific work activities that may impact upon their health and safety or the health and safety of others.

If a worker becomes aware of any condition, disability or impairment (temporary or otherwise), which may potentially affect their capacity to participate safely in work activities, or activities related to their work, they should immediately advise management as soon as practicable so that a suitable and applicable risk assessment can be undertaken.

All such discussions will be considered strictly confidential in accordance with the Organisation's privacy policy. Any medical information disclosed will be used only for the purpose for which it was collected and will not be disclosed to other parties unless permitted by law, without the consent of the person making the disclosure.

19.11 DEALING WITH COVID-19 IN THE WORKPLACE

COVID-19 spreads through respiratory droplets produced when an infected person coughs or sneezes. A person can acquire the virus by touching a surface or object that has the virus on it and then touching their own mouth, nose or eyes.

i) Cleaning and disinfection

The best way to protect all persons in the workplace from the risk of exposure to COVID-19 is by implementing appropriate cleaning and disinfecting measures for the workplace. Combined regiment of cleaning and disinfection will be the most effective method in eliminating or spread of the COVID-19 virus in the workplace.

Workplace should be cleaned at least once a day. More frequent cleaning may be required in some circumstances. If equipment is shared between persons, it should be cleaned between uses, where practicable. Cleaning is to be performed using detergent and water and once cleaned surfaces should be disinfected. This would include any time there has been an instance or suspected case of COVID-19 in the workplace or where any persons in the workplace are likely to touch a surface.

ii) Hygiene

Good hygiene is necessary to stop the spread, therefore each worker must:

- frequently wash their hands with soap for at least 20 seconds or use a hand sanitiser with greater than 60% ethanol or 70% isopropanol before and after eating and going to the toilets
- limit contact with others, including shaking hands
- stop touching their eyes, nose and face when their hands are not washed
- cover their mouth while coughing and sneezing with a clean tissue or elbow and
- put used tissues straight into the bin.

The Organisation will ensure that adequate supply of hand washing soap dispensers, sanitisers and tissue paper is readily available to all persons in the workplace.

iii) Self isolation

If a worker suspects that they have contracted COVID-19 or if they have been in the presence of someone infected by the COVID-19, they must isolate themselves (self-quarantine) and advise their manager immediately. This is to be followed by contacting their doctor or a nearest hospital until more thorough examination has taken place.

19.12 WORKER RESPONSIBILITIES

To ensure the overall success in controlling the risks related to infections at this workplace, persons working in the Organisation must be able to implement the established infection control measures and follow the protocols that have been developed. To this end, the Organisation will ensure that they:

- have been trained and deemed competent by the Organisation in the infection control protocols of this workplace before undertaking any work where they may come into direct contact with clients/customers or members of public, waste from their respective tasks and equipment, instruments or apparatus used
 - have enough training, skills, knowledge, level of competence and qualifications required to undertake any task that may potentially expose them to the risk of infection at work or undertaking work related activities
 - have enough skills and training in the effective use of all PPE required by the Organisation to eliminate or minimise the risk of infection to themselves or others at work
 - follow any reasonable instruction given to them by the Organisation designed to eliminate or minimise the risk of infection to themselves or others at work, including the mandatory use of PPE when and where required
 - actively participate in the development and review of the Organisation's infection control protocols and procedures
 - actively participate in the development and review of the Organisation's administrative requirements designed to minimise the risk of infection transmission at work
 - will advise management immediately when they become aware of any potential exposure to infection to themselves or others at work during their work
 - do not undertake any activity, action or inaction that may knowingly place themselves or others at work at risk of exposure to an infection
 - will advise management immediately when they become aware of contracting any illness or disease or having become aware of any condition, disability or impairment (temporary or otherwise), that may potentially affect their capacity to participate in specific work activities or where specific work activities may further impact upon their health, safety or welfare or the health and safety of others at work
 - subject to medical advice or other defined reasons, actively participate in any recognised immunisation program recommended for the Organisation by an authorised health authority, accepting that such immunisation may be a condition of employment or engagement by the Organisation and
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- will inform management if they are not immunised against that disease, should an outbreak of a vaccine preventable disease occur at the workplace. The worker will be directed to consult with their own doctor as soon as possible and may be directed not to attend work during the outbreak.

20 REMOTE/ISOLATED WORKING

20.1 INTRODUCTION

Remote work can be performed by workers who are off-site, or by workers travelling in the course of their duties. It can also be work that is isolated from the assistance of others because of the location, time or nature of the work being performed. It includes workers who are working by themselves or in isolated areas.

Remote workers can face higher levels of exposure to hazards than workers in a controlled environment. In addition, remote workers may not have the same access to support and emergency services.

20.2 IDENTIFYING REMOTE/ISOLATED WORKING

Workers may be deemed working remotely or in isolation if they:

- physically work alone, for example, at night or isolated from other workers
- work separately from others, for example, in a regional office building
- work at home or engage in teleworking activities
- work outside normal working hours, for example, on call workers
- work shift work or night work
- travel as part of work
- travel long distances, for example, freight transport drivers
- work unsupervised, for example, teleworkers
- work in geographical isolation, for example, workers carrying out field work
- work on a reduced roster, for example, on public holidays, and
- work in isolation with members of the public, for example, health and community workers.

20.3 ASSESSING REMOTE WORK RISKS

As part of the risk management approach, the Organisation has an obligation to ensure that any remote work that poses a risk of injury to workers is assessed to determine the seriousness of these hazards. This will include determining:

- whether there is a possibility of exposure to violence or aggressive customers
 - how long the worker will be working alone for
 - what forms of communication and assistance the worker has access to
 - the type of work they are undertaking, for example high risk work, and
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- if the risks of the work can be controlled by one person, for example:
 - where there is risk of a fall
 - working with electricity, hazardous chemicals and/or plant
 - working near or on the road
 - working in confined spaces
 - working in excavation

(In these situations, it would be unlikely that working alone would be appropriate).

20.4 CONTROLLING REMOTE WORK RISKS

The Organisation will ensure, as far as reasonably practicable, that the risks associated with remote work are controlled. The process of controlling remote working risks will be determined in consultation with remote workers.

In the event that remote work has been assessed as a risk, the Organisation will:

- provide a mobile phone or cover the cost of a mobile phone for the remote worker. Where the provision of a mobile phone is not practical (for example, because the remote worker is working on a site where mobile phones cannot be used), the Organisation will consider alternatives such as satellite phones, digital two-way radios, GPS tracking devices, pagers or land line phones
 - agree on arrangements for how frequently remote workers should call in. This may be at the start and end of each shift, at pre-set four hourly intervals, or as often as reasonably required based on the nature of work being performed
 - ensure that appropriate management are contactable by the worker at all times whilst they are engaged in remote work
 - ensure that there are procedures in place to manage any emergency situation that may arise, and
 - ensure the worker is provided with appropriate training on emergency procedure.
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21 WORKING OFFSITE

21.1 INTRODUCTION

At times, workers are required to work offsite in settings that are not under the control of the Organisation. This may result in the worker being exposed to additional risks to their health and safety.

Despite not being under its control, the Organisation recognises that offsite work locations may form part of the workplace and therefore health and safety obligations in respect of these sites do apply.

21.2 BEFORE WORKING OFFSITE

Where workers are going to work offsite at a location under the control of a host employer, the Organisation will verify with the host employer that all hazards and risks within that setting and associated with the work activity have been identified, assessed and controlled.

This may include:

- seeking written confirmation/evidence, and
- requesting the host employer complete and provide their own documentation or complete the Organisation's.

Where workers are working offsite in a setting that is not under the control of a host Organisation (for example, a public domain), a manager or supervisor of the worker is responsible for ensuring that a site risk assessment is completed prior to the work activity commencing. Where it is not practicable for this to occur, the workers will be directed to conduct the risk assessment when they first arrive onsite.

21.3 AT THE SITE

Where engaged on offsite work, workers will be directed to comply with any relevant site-specific health and safety policies and procedures. In particular, workers will be directed to:

- report to the site's reception area or designated contact person and announce arrival
 - sign into the site's visitors attendance log, where required
 - carry/wear any visitor passes whilst on site, as requested
 - attend any site-specific health and safety induction, where required
 - wear/use relevant safety protection clothing issued by the Organisation of the site, including any hard hats, personal hearing protection, hi visibility vests, coats, water proof coats, boots, non-slip soled shoes or goggles.
 - abide by all instructions issued by the site, in particular safety instructions
 - remain on any designated walkways or access paths, and obey any signage on the site
 - report any hazards detected to the site, such as exposed leads or loose railings
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- assess the risk posed by any hazards and determine whether it is safe to continue work. In the event it is not safe to do so, workers will be directed to take necessary steps to prevent an incident occurring and immediately report the hazard to the Organisation, and
- in the event of an emergency, follow the site-specific emergency evacuation response plan.

If a health and safety issue or hazard cannot be resolved, the worker will be directed to contact their manager immediately.

22 WORKING FROM HOME

22.1 INTRODUCTION

When workers carry out work at their residential premises (home) for the Organisation, the home is considered to be a workplace and the Organisation recognises that it has health and safety duties in respect of this.

The Organisation must approve all work undertaken at home. The Organisation will only allow for work to be undertaken at home if the hazards associated with the work are identified, assessed and controlled. As such, when approving work to be carried out at home, the Organisation will specify the following:

- the tasks to be performed
- the hours of work
- the specific location within the home where work will be carried out, and
- the furniture and equipment required to carry out the work.

Based on the above information, risks associated with working at home will be addressed via a risk management approach.

The policies and procedures detailed in this Health and Safety Manual detail how the Organisation manages hazards and risks in the workplace, including those hazards and risks associated with working at home.

22.2 IDENTIFYING HAZARDS ASSOCIATED WITH WORKING AT HOME

When working at home, hazards can be identified by:

- completing the **Working from Home Checklist**
- reviewing the tasks associated with working from home
- observing how workers perform their tasks, and
- consulting with relevant workers.

When identifying hazards associated with working at home, the Organisation will consider whether the following hazards are present.

i) **Office safety**

There are a variety of hazards that may arise in an office environment which may also be present when working at home.

ii) **Drugs and alcohol**

The misuse of drugs or alcohol by workers can affect their health and safety, as well as that of others.

iii) Remote/isolated Work

When working at home, the worker may be working in a remote or isolated environment.

Remote/isolated workers can face higher levels of exposure to hazards than workers in a controlled environment. In addition, remote/isolated workers may not have the same access to support and emergency services.

iv) Manual handling

Manual handling describes any work or task involving an action to lift, lower, push, pull, hold, carry, move or restrain any animate or inanimate object.

Some manual handling tasks are hazardous and may cause musculoskeletal disorders. Manual handling injuries are the most common type of workplace injuries across Australia and may occur when working at home.

22.3 ASSESSING HAZARDS ASSOCIATED WITH WORKING AT HOME

As part of the risk management approach, the Organisation has an obligation to ensure that any hazards which pose a risk of injury to workers when working at home, are assessed to determine the seriousness of these hazards.

22.4 CONTROLLING HAZARDS ASSOCIATED WITH WORKING AT HOME

The Organisation will ensure, as far as reasonably practicable, that the risks associated with working at home are controlled. The process of controlling such risks will be determined in consultation with the workers who are required to work at home.

Control measures can be identified by referring to the following policies detailed within the Health and Safety Manual:

- Office Safety Policy
- Drugs and Alcohol Policy
- Remote/isolated Work Policy, and
- Hazardous Manual Handling Policy.

22.5 FIRST AID

The Organisation will ensure that workers who are working at home have access to a first aid kit and a trained first aid officer. Details of any workplace injury or illness are to be recorded on the **First Aid Treatment Log/Register of Injuries** and the worker's manager is to be notified as soon as reasonably practicable.

22.6 CONSULTATION

The Organisation is committed to providing all workers with the opportunity to express their views and contribute to the resolution of health and safety issues that affect them.



As such the Organisation will consider the use of email and phone calls as a suitable medium for consulting with workers who are working from home.

22.7 EMERGENCY PROCEDURES

The Organisation is committed to establishing and maintaining procedures to control emergency situations that could adversely affect workers, including workers who are working at home.

The emergency plans detailed in the Emergency Procedures Policy apply to those workers who are working at home. Furthermore, emergency evacuation exercises will be conducted annually to test the emergency procedures.

Where working at home and affected by an emergency, an **Incident Report Form** is to be completed and the worker's manager is to be notified as soon as reasonably practicable.

22.8 WORKPLACE INSPECTIONS

The Organisation will conduct inspections as part of the ongoing management of hazards in the workplace.

When the home is first used as a workplace, the worker will undertake an inspection using the **Working at Home Checklist** and the **Permanent Worksite Inspection Checklist**. Inspections will continue to be undertaken by the worker at least once every six months. Completed checklists are to be provided to the workers manager.

23 THREATENING SITUATIONS

23.1 INTRODUCTION

The working environment can often present hazards that are beyond the direct control of the Organisation yet may still impact upon the worker and potentially result in an injury or illness.

One such work hazard is the potential exposure to threatening situations such as threatening or aggressive behaviour from clients, customers or others at work. Such situations may impact upon a worker's health and safety, potentially resulting in a psychological or physical injury.

Risks associated with threatening situations will be addressed via a risk management approach to help ensure that the risk of injury to workers is eliminated or minimised. Furthermore, the Organisation will take all reasonable steps to help ensure that workers potential exposure to any threatening situation is eliminated.

The Organisation has adopted a zero tolerance to threatening or aggressive behaviours at work whether exhibited by clients, customers, workers or others at our place of work.

Where such behaviour involves violence such as physical assault or the threat of physical assault, the matter will be reported to the police.

23.2 ORGANISATION'S RESPONSIBILITIES

The Organisation has a duty to ensure, so far as reasonably practicable, the health, safety and welfare at work of all workers who may be exposed to a threatening situation, whether from clients or others at work.

In particular, it is responsible for:

- ensuring that all workers are aware of the Organisation's zero tolerance to threatening situations
- ensuring workers are given sufficient training and instruction to eliminate or minimise the risk of injury from threatening situations they may potentially face
- ensuring that workers who may interact directly with clients or customers receive sufficient training in dealing with threatening or aggressive behaviours from clients, including diffusion and communication strategies
- ensuring that procedures, protocols, work practices and communication strategies designed to assist workers in dealing with aggressive clients and minimising potential exposure to threatening situations, are developed, implemented and reviewed
- providing facilities that minimise risks wherever possible, and
- providing support for workers who experience a threatening situation or aggressive behaviour.

23.3 WORKER RESPONSIBILITIES

To minimise the risk of injury or illness to workers from threatening situations or aggressive behaviour by clients, customers or others at work, workers are responsible for:

- ensuring they are aware of the Organisation's zero tolerance position regarding threatening situations and aggressive behaviours at work
 - ensuring they have received the appropriate training and instruction in strategies designed to eliminate or minimise potential exposure to threatening situations
 - ensuring they have received the appropriate training and instruction in strategies designed to address and deal with threatening situations they may face
 - participating in the development and review of work practices and communication strategies designed to eliminate or minimise potential exposure to threatening situations
 - removing themselves from violent or aggressive confrontations with clients or others at work
 - not engaging in aggressive behaviour towards the client or others at work and never chasing, touching or handling an offender in any way
 - informing management as soon as practical if they have been exposed to a threatening situation or aggressive behaviour, or have witnessed others at work being exposed to such behaviour
 - calling police if a situation is escalating to the point where personal safety and security may be jeopardised
 - participating in counselling or debriefing as recommended following exposure to an incident involving a threatening situation, and
 - following any specific security arrangements that are implemented by the Organisation.
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24 ELECTRICAL SAFETY

24.1 INTRODUCTION

Electrical risks are risks of death, electric shock or other injury caused directly or indirectly by electricity and may include:

- electric shock causing injury or death
- arcing, explosion or fire causing burns
- toxic gases from burning and arcing associated with electrical equipment
- falls from ladders, scaffolds or other elevated work platforms after contact with electricity and
- fire resulting from an electrical fault.

24.2 IDENTIFYING THE RISK

The Organisation will consult with workers to identify electrical hazards arising from electrical equipment or installations. The following will be considered to assist in the identification of electrical risk:

- the design, construction, installation, maintenance and testing of electrical equipment or electrical installations
- inadequate or inactive electrical protection, for example no or damaged safety switches
- where and how electrical equipment is used, for example electrical equipment may be at a greater risk of damage if used outdoors or in a factory or workshop environment
- electrical equipment being used in an area in which the atmosphere presents a risk to health and safety from fire or explosion, for example using grinders in areas where flammable fumes may be present
- type of electrical equipment, for example 'plug in' electrical equipment that is moved from site to site, including extension leads, are particularly liable to damage
- the age and condition of electrical equipment and electrical installations
- work carried out on or near electrical equipment or electrical installations such as electric overhead lines or underground electric services and
- reviewing incident reports.

24.3 ASSESSING THE RISK

The Organisation will consult with workers to assess the risk associated with electrical hazards considering the following:

- the conditions under which the electrical equipment is used, for example wet conditions outdoors or at construction sites
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- work practices and procedures, for example using electrical equipment in flammable atmospheres and
- the capability, skill and experience of relevant workers.

24.4 CONTROLLING THE RISK

The Organisation will consult with workers to determine control actions for eliminating or minimising electrical risks.

Where the hazard cannot be eliminated, for example by using hand tools in place of power tools in flammable atmospheres, or de-energising equipment and circuits prior to conducting work, the Organisation will minimise the risk associated with electrical equipment and installations considering the following:

- replacing a power tool that is plugged into mains electricity with an extra-low voltage battery-operated tool
- using safety switches (portable or fixed) to minimise the risk, for example installing residual current devices to reduce the risk of receiving a fatal electric shock and
- administrative controls and safe work practices, for example determining electrical and gas lines prior to the use of tools to penetrate walls, floors and ceilings, use of permits and warning signs.

Unsafe electrical equipment must be disconnected or isolated from its electricity supply. It must not be reconnected unless it is repaired by a competent person or tests by a competent person have confirmed it is safe to use. Alternatively, it could be replaced or permanently removed from use.

Unsafe electrical equipment will be labelled indicating it is unsafe and must not be used. This is to prevent inadvertent use before the electrical equipment can be tested, repaired or replaced.

Serious injuries and fatalities may be prevented by the use of properly installed and maintained residual current devices (**RCDs**), commonly referred to as 'safety switches'. An RCD is an electrical safety device designed to immediately switch off the supply of electricity when electricity 'leaking' to earth is detected at harmful levels. RCDs offer high levels of personal protection from electric shock.

24.5 ELECTRICAL EQUIPMENT TESTING AND TAGGING

The Organisation will ensure that electrical equipment is regularly inspected and tested by a competent person where the electrical equipment is:

- supplied with electricity through an electrical socket outlet ('plug in' equipment) and
- used in an environment in which its normal use exposes the equipment to operating conditions that are likely to result in damage to the equipment or a reduction in its expected life span, for example moisture, heat, vibration, mechanical damage, corrosive chemicals or dust.

The nature and frequency of inspection and testing will vary depending on the nature of the workplace, its environment and the risks associated with the electrical equipment but will generally follow the timeframes detailed in *AS/NZ 3760:2010: In-service safety inspection and testing of electrical equipment* as per the table below, unless otherwise defined for specialised equipment such as medical equipment and hired plant.

In addition, electrical equipment will be tested following repair or servicing that may impact upon its electrical integrity and before the first use of any second-hand equipment.

24.6 COMPETENT PERSON

For the purpose of determining the competency of a person undertaking testing of electric equipment, a person will be deemed competent if they meet the criteria defined in AS/NZS 3760:2010 and is a person who has acquired the practical and theoretical skills through either of the following:

- undertaken a training course (i.e. electrical test and tag course) by a registered training organisation (RTO)
- hold an appropriate trade qualification (i.e electrician) or
- have on the job knowledge and assessed by an RTO.

Table 1: Electrical Testing and Tagging - as adapted from AS/NZ 3760:2010: *In-service safety inspection and testing of electrical equipment* **Note:** Queensland requires commercial cleaning equipment to be tested every three (3) months and rural equipment every 12 months unless all circuits are protected by a safety switch.

		Residual Current Devices (Safety Switches)			
		Push button test by user		Operating time/ current test	
Environment	Portable electrical equipment	Fixed	Portable	Fixed	Portable
Construction work	3 months	monthly	daily	12 months	3 months
Manufacturing work: factories, workshops, places of manufacture, assembly, maintenance or fabrication.	6 months	6 months	N/A	12 months	N/A
Service work: environments where the equipment or flexible cord is subject to flexing in normal use OR is in a hostile environment.	12 months	6 months	3 months	12 months	12 months
Residential type areas: hotels, residential institutions, motels, boarding houses, halls, hostels, accommodation houses, and the like	2 years	6 Months	6 months	2 years	2 years
Office work: environments where the equipment or cord is NOT subject to flexing in normal use and is NOT open to abuse and is NOT in a hostile environment.	5 yearly	6 months	3 months	2 years	2 years
Rural industry work (all plug in equipment)	visual examination before each use	N/A	N/A	N/A	N/A
Commercial cleaning equipment	6 months	daily	N/A	6 months	N/A