

HLTWHS004 Manage work health and safety

This unit specifies the workplace performance required by an employee to contribute to WHS processes where there is responsibility for own work outputs and possibly limited responsibility for the work output of others.

Upon completion, a student must have the following knowledge:

- *Essential knowledge:*
 - Safety signs and their meanings, including signs for:
 - personal protective equipment
 - emergency equipment
 - dangerous goods class signs
 - specific hazards such as sharps, radiation
 - The difference between hazard and risk
 - Sources of WHS information within in the workplace with knowledge of external sources of WHS information
 - Nature of common workplace hazards such as chemicals, bodily fluids, noise, manual handling, work postures, underfoot hazards and moving parts of machinery
 - Basic hazard identification procedures such as workplace inspections and review of workplace data
 - Standard emergency signals, alarms and required responses
 - Principles of basic risk assessment
 - Hierarchy of control and its application
 - PPE requirements including use, storage and maintenance
 - Roles and responsibilities of employees, supervisors and managers in the workplace
 - Roles and responsibilities of WHS representatives and WHS committees
 - Workplace specific information including:
 - hazards of the particular work environment
 - hazard identification procedures relevant o the hazards in their workplace
 - designated person(s) for raising WHS issues
 - organisation and work procedures particularly those related to performance of own work, specific hazards and risk control, reporting of hazards, incidents and injuries and WHS issue resolution, consultation, use of PPE and emergency response
 - potential emergency situations, alarms and signals and required response.
 - The legal rights and responsibilities of the workplace parties
 - rtive manner

Plan and conduct work safely

Plan work in accordance with relevant provisions of WHS legislation, standards, codes of practice/compliance codes and guidance material

Identify hazards as part of work planning and work process

Hazard identification is:

The process of identifying sources of harm, and may be required:

- before new forms of work and organisation of work are implemented
- before changes are made to workplace, equipment, work processes or work arrangements
- as part of planning major tasks or activities, such as equipment shutdowns
- following an incident report
- when new knowledge becomes available
- at regular intervals during normal operations
- prior to disposal of equipment, or materials

Address identified *hazards* prior to starting work using judgement within defined scope of responsibilities

A hazard is: A source or situation with the potential for harm in terms of human injury or ill-health, damage to property, the environment, or a combination of these

Specific hazards may include, but are not limited to:

- Chemicals
- Bodily fluids
- Sharps
- Noise
- Manual handling
- Work posture
- Underfoot hazards
- Moving parts of machinery
- Cytotoxic medicines and waste

Other workplace hazards may include:

- Occupational violence
- Stress
- Fatigue
- Bullying

Report residual risk according to organisation procedures

Risk: In relation to any hazard, means the probability and consequences of injury, illness or damage resulting from exposure to a hazard

Residual risk is The risk which remains after controls have been implemented

Report incidents and injuries in line with organisation policies and procedures

Incidents include:

Any event that has caused or has the potential for injury, ill-health or damage

Organisation procedures include:

Policies and procedures underpinning the management of WHS, including:

- hazard, incident and injury reporting
- hazard identification, risk assessment and control
- consultation and participation
- quality system documentation

Undertake *WHS housekeeping* in work area

WHS housekeeping includes: Workplace and personal routines designed to improve health and safety; for example, cleaning up spills, keeping walkways, exits and traffic areas clear

Maintain and update own knowledge of WHS issues as they apply to workplace systems, equipment and processes

Manage own levels of stress and fatigue to ensure ability to work safely

Support others in working safely

Share information on safe work practices and work procedures with members of the work group

Information includes:

- Hazard, incident and investigation reports
- Workplace inspection reports
- Incident investigation reports
- Minutes of meetings
- Job Safety Analyses (JSAs) and risk assessments
- Material safety data sheets (MSDSs) and registers
- Employees handbooks
- Manufacturers' manuals and specifications
- Information from WHS representatives
- Reports from WHS committee
- Information from external sources on hazards and risk relevant to the work group

Work procedures include:

- Standard operating procedures
- Batch specifications
- Operator or manufacturer manuals
- Procedures for selecting, fitting, using and maintaining personal protective equipment

Check the WHS practices of less experienced members of the workgroup

Provide guidance and coaching to less experienced members of the workgroup to support them in working safely

Mentoring and coaching may include:

- Providing guidance and explanation on implementation of work and organisation procedures
- Providing feedback
- Providing encouragement
- Assisting with problem solving

Support members of the workgroup to accurately record incidents and complete associated workplace documentation according to organisation procedures

Other workplace documentation may include:

- Job checklists, schedules
- Workplace inspection checklists

Designated persons may include:

- Team leaders
- Supervisors
- WHS representatives
- WHS committee members
- Managers
- Organisation WHS personnel
- Other persons designated by the organisation

Contribute to WHS participative processes

Raise WHS issues in accordance with organisation procedures

Contribute to workplace meetings, workplace inspections or other consultative activities in a constructive manner to improve safety

Provide assistance to workgroup members to contribute to workplace safety

Apply knowledge of roles and responsibilities of WHS representatives and WHS committees

Contribute to hazard identification, WHS *risk assessment* and *risk control* activities

Report identified hazards and inadequacies in risk controls

Risk controls include: The devices and methods to, where practicable, eliminate the hazard or, where this is not practicable, minimise the risk associated with the hazard

Check the workplace for hazards using itemised checklist(s) in accordance with work procedures

Contribute to risk assessments

Provide input to development and implementation of control measures, with reference to the hierarchy of control

Hierarchy of control is:

The preferred order of control measures for WHS risks:

- elimination — controlling the hazard at the source
- substitution e.g. replacing one substance or activity at the source
- engineering e.g. installing guards on machinery
- administration — policies and procedures for safe work practices
- Personal Protective Equipment e.g. respirators, ear plugs

Participate in the control of emergency situations

Identify *emergency signals and alarms* and responded to them appropriately

Emergency signals and alarms may include:

- Machinery malfunction alarms
- Fire alarms
- Evacuation alarms or announcements
- Reversing beepers on mobile plant

Take initial action to control/confine emergency according to organisation procedures, and taking account of the nature and scope of the emergency

Emergency may include any abnormal or sudden event that requires immediate action such as:

- Serious injury events
- Events requiring evacuation
- Fires and explosions
- Hazardous substance and chemical spills
- Explosion and bomb alerts
- Security emergencies, such as armed robberies, intruders and disturbed persons
- Internal emergencies, such as loss of power or water supply and structural collapse
- External emergencies and natural disasters, such as flood, storm and traffic accident impacting on the organisation

Implement emergency response procedures within scope of training and competence

Notes:

Before we can communicate WHS information to others, we need to understand the concept of Occupational Health and Safety. Historically WHS legislation is new and the current Act was enacted through legislation in 1986. Previous to this, employers and owners had the power to require employees to do jobs without much regard to safety, health or welfare. The 1986 Act changed this and now employees have significant legislated power to demand that their workplaces are safe.

- WHS has become an important issue in all Australian workplaces in recent years for a number of reasons:
- Workplace accidents cost a significant number of Australian workers their lives every year.
- Thousands of Australian workers are injured and/or permanently incapacitated every year.
- Businesses or organisations lose millions of dollars in lost productivity, training and retraining due to accidents/incidents every year.
- Governments spend millions of dollars each year due to accidents/incidents in the workplace.
- Almost without exception, workplace accidents are preventable, through the appropriate enforcement of WHS principles.

Most people don't give much thought to their health while they are at work. Health and safety is often something they take for granted. They shouldn't.

Did you know that each year:

- Billions of dollars are spent in workers compensation?
- 2,500–3,000 people die in work related accidents in Australia?
- Lives are drastically altered as a result of injuries and incidents occurring within the workplace?

If you've heard these things before, perhaps the comments have lost their impact. We often think 'workplace accidents' occur in factories, on production lines or outdoors — we don't often place them within the Community Services and Health setting. But did you know that more back injuries happen in Community Services and Health professions than any other area? The highest claims cost for injuries in all South Australian industries include the area of Manual Handling with 10,000 claims each year. The Aged Care sector has approximately 1,300 claims annually at a cost of \$3.2 million and of these approximately 52% are manual handling in origin. This does not include injuries from cuts, falls, sprains or stress related illnesses. And all of them can be avoided.



This unit, Contribute to WHS processes, will assist you in creating and maintaining a safe workplace in a healthcare environment.

What is workplace safety?

In the 21st century workplace accidents are still responsible for the injury and death of people in the workplace.

Data from WorkCover Corporation SA Statistical Review 2005–2006 (available at www.workcover.com) shows 24 compensable fatalities occurred. This means 24 people died, just from being at work.

In 2005–2006 in South Australia there were 37465 claims:

- 9619 were sprains/strains, and
- 1084 fractures.

Community service workers with back injuries represented 28.7% of the total claims.

There are two costs associated with workplace injury:

- direct (costs we can see) include medical treatment, rehabilitation and compensation and costs associated with damage and loss;

- indirect (costs often forgotten) repair costs to damaged plant/equipment, business interruptions/delays, penalties and fines, lost productive time, time spent on paperwork/ incident investigation, loss of customers/contracts/damage to public relations, loss of physical capacity and lifestyle either temporarily or permanently.

Accidents are at best accepted as being unavoidable, just a coincidence, in the wrong place at the wrong time or at worst, the fault of the person who was injured or killed.

→ In reality accidents in the workplace arise as a consequence of poor management of workplace safety. Being safe at work is something most of us take for granted. But it's not something that 'just happens'. **A safe workplace is created.**

Occupational Health and Safety is everyone's responsibility and requires a commitment from a number of people to ensure the workplace is safe. A safe workplace involves everything from the way our surroundings are designed right through to the hours and conditions under which we work. It involves a lot of thought, planning and involvement. Everybody in the workforce has a responsibility to make the workplace safe – it's just that those responsibilities vary. You should be aware of, and use some specific legislation and regulations.

There are three main pieces of legislation that cover occupational health and safety:

1. Occupational Health and Safety Act 2000
2. Workers Compensation Act, 1987
3. Workplace Injury Management and Workers Compensation Act 1998.

- Approved codes of practice
- Australian standards

The Occupational Health and Safety Act 2000 is supported by the Occupational Health and Safety Regulation 2001- (the "regs"). The regulation contains detailed provisions of the WHS Act. (How the Act should be applied).

Organisations are required to adopt a best practice approach to occupational health and safety. This is addressed by establishing guidelines for health workers to work by – these are known as policies and procedures. Under the law, everybody has some responsibility for occupational health and safety. The Occupational Health and Safety Act 2000 sets out the responsibilities of all parties in the workplace including your employer and you the employee. The Act covers every type of work place and includes all types of employees including people who are self employed.

Workers in VIC (with a few exceptions*) are protected by this legislation. Anyone who is working full-time or part-time, or has a permanent, temporary or casual job is covered. This legislation also includes home-based workers and volunteers.

Note*

Workers who are employed by the Commonwealth government are covered by Commonwealth WHS legislation.

The Occupational Health, Safety and Welfare Act

- Sets out the general requirements for protecting health and safety in the workplace. It is important that every organisation has a copy.
- Makes it clear that everyone has a part to play in protecting health or safety at work.
- Aims to bring employers, employees and their representatives together to resolve health and safety issues at work and encourages employee involvement by giving workers the right to elect health and safety representatives and to participate on health and safety committees in the workplace.

- Gives government inspectors powers to inspect workplaces and investigate health and safety issues. Prosecutions can result in fines.
- Focuses on the principles of:
 - prevention (prevention is better than cure)
 - rehabilitation (in the event of a work injury, the employer is responsible for assisting a worker to rehabilitate and return to work)
 - compensation (if an employer has not taken reasonable care in providing a safe workplace, the injured person may be coerced for medical costs, hospitalisation, rehabilitation, and lump sum compensation – where applicable under the Act).

Occupational Health and Safety is about preventing work injury, illness and disease.

Victorian parliamentary legislation that effects Massage operations:

The WHS Act 1985 <http://workcover.vic.gov.au>

- The aim is that employees have a safe work environment. Infection control, equipment training and information for all staff falls within the responsibility of the employers duty of care.
- Occupational Health and Safety Regulations are the enforceable laws of the OH &S Act.
- Codes of Practice are practical guides, outline of advice for businesses. Employers and employees are advised to read and understand these codes. Examples of Codes for WHS include Manual Handling, Workplaces, First Aid. (See web address above for copies).

The “Workplaces”, Code of Practice outlines the minimum standards for facilities and amenities for workplaces that ensure safe and healthy working conditions. Available at www.workcover.vic.gov.au Look for “Codes of Practice”.

This code covers amenities such as:

- Change rooms: must be supplied if an employee needs to change clothes before or after work. Must have useable locker space.
- Hand washing facilities: disposable towels and soap must be supplied. There should be one water tap per 15 employees.
- Storage: all employees should have a place for safe storage of personal items.
- Drinking water: should be clean, cool and palatable. Separate from hand washing. One drink outlet point per 40 employees. Not greater than 30 metres away.
- Heating/cooling: Air should counteract excessive heat and 15degrees Celsius be maintained.
- Task lighting: should be able to perform task safely and without straining to see.
- Aisle ways: Exit doors should be marked for emergency and aisle should be minimum 600mm wide.
- Cleanliness: dirt, refuse and waste be removed daily. Floors cleaned daily.
- Seating: ergonomically sound work position with suitable support.
- Workstation space: clear space for working excluding desk, benches etc. Sufficient space should be allocated.
- Workplace construction: room sizes, heights, lights, ventilation all explained. If more than 6 employees and number of persons of the minority sex is less than 2, then separate toilets should be supplied (Victorian Building Regulations). Fewer than 6 employees a unisex toilet may be provided. Majority of employees are 1 sex then toilet can be shared.

The Health Act 1958 <http://www.dms.vic.gov.au>

- Health Regulations (Infectious Diseases) 1990 & 2001. Regulations are implemented by law. Prosecutions can occur if a company is found to be in breach. Massage Clinics are not required to be registered. However, Environmental Health Offices in local Government oversee the implementation of regulations in their area by inspecting businesses who are registered but may also check a massage premises.
- Standards of Practice, like Codes of Practice, act as practical guides outlining procedures to control the spread of infectious diseases. Examples include: Beauty and Electrolysis, Hairdressing, Acupuncture. Massage therapy businesses are encouraged to follow the guidelines outlined in Beauty Standards of Practice where applicable.

<http://www.dhs.vic.gov.au/phb/standardsofpractice/beauty.htm>

The Disability Discrimination Act 1992 and Equal opportunity Act 1984, 1989

- A person can be not discriminated against on the grounds that they have an infectious disease. A person with an infectious disease is required to take measures to protect others from infection.

The Professional Associations for massage practitioners generally have their own Code of Practice. These include broad statements that incorporate the issues outlined in the above legislations, such as infection control, discrimination and WHS.

The employer's responsibilities are to:

- provide a safe and healthy workplace
- identify safety problems (hazards)
- reduce risks or dangers for workers
- support the health and safety committee
- train workers about workplace health and safety
- have safe ways of working for each activity
- provide equipment to protect workers (PPE)
- ensure the health and safety of visitors, contractors and users of your place of work.

This also includes ensuring that private residences are safe for visiting staff when working in the field.

- Consult with you the employee about WHS issues.

Your responsibilities are to:

- work safely
- think of other workers' safety
- report health and safety problems to supervisors or to the health and safety committee
- help employers when they follow health and safety laws
- wear PPE when required to.

Occupational health and safety rights

All employees have rights and they include:

- a safe and healthy workplace
- safe ways of working
- safety information
- health and safety training
- safety equipment
- electing health and safety committee members
- being able to leave your work area to report health and safety problems
- being asked by your employer about your health and safety problems. By law your employer cannot dismiss you for complaining about health and safety matters.

Safety officers

The role of the safety officer normally includes the co-ordination of all safety activities. They are usually responsible for:

- keeping records of accidents, injuries and work-related diseases
- security and inspection of the workplace
- collection and dissemination of information on health and safety issues and legislation
- advice to management on health and safety issues
- plans for training and education of employees in health and safety related matters
- liaison with inspectors and bodies concerned with the regulation of WHS matters.

WHS committees

One avenue for addressing WHS issues is through your occupational health and safety committee. The WHS Act requires that an WHS committee shall be established if there are 20 or more persons in the workplace or the majority of employees request it, or if Work Cover directs it. The committee's function is to continually review WHS measures that are in place in your workplace, investigate WHS risks, attempt to resolve WHS matters, or request an investigation by an inspector for that purpose, and other functions as required. Members of WHS committees are trained in risk identification and risk management.

Penalty

Penalty levels points can be incurred by the organisation or you the employee, if found to be carrying out unsafe acts, under the WHS Act.

Companies maximum penalty 5,000 units.

Individual's maximum penalty 500 units.

Companies may have additional penalties for previous offences of 2,500 units.

Individuals may have additional penalties for previous offences of 250 units or two years imprisonment or both.

(A penalty unit currently equals \$110.00)

Regulations pertaining to occupational health and safety

Manual Handling, 1991

Notification Of Accidents, 1990

Hazardous Substances, 1996

First Aid, 1989.

DUE DILIGENCE

As Luke was preparing for the morning program he noticed that one of the shelves in the storeroom appeared to be sagging at one end. On closer inspection he saw that the shelf had come away from the wall and was in danger of collapsing.

The WHS pyramid



In Australia each State has its own variation of what Occupational Health and Safety means and there is no national Act. Therefore, when you work in the different States, you will need to familiarise yourself with that particular set of State laws and regulations. In all states and territories of Australia, WHS laws can be seen as a multilayered system that is governed by the Act of Parliament. Thus, the legislative framework for WHS can be illustrated in a diagram called the 'WHS pyramid' pictured above.

As shown in the diagram, one part of the pyramid is the Act, which establishes the objectives, philosophy, and direction for WHS in the workplace and sets out general requirements such as:

- responsibilities for all employees, self-employed persons, employers and subcontractors in all workplaces
- general duty of care requirements.

The WHS pyramid framework also includes:

WHS regulations, which are made under the Act and set out the specific legal requirements of the Act an Approved Code of Practice (CoP), which provides minimum standards regarding health, safety and welfare and is designed to be used in conjunction with the Act and Regulations Australian Standards (AS), which cover a broad range of topics and activities, under the Act (However, Australian Standards have minimal legal significance.) Guidelines, which have been developed to assist those responsible for health, safety and welfare in the workplace. (The guidelines are a resource that can be used when strict adherence to a Regulation, or meeting the required minimum standard of an approved Code of Practice may be impracticable.) The Act and Regulations are law and must be adhered to. The Act tells you what you must do and the Regulations or Standards will tell you how to do it. Codes of Practice, Australian Standards and Guidelines enhance the Act and Regulations, not replace them.

Where the power is: the Act

We will begin by examining one such Act of Parliament, as passed by the government of South Australia, concerning WHS. This particular Act is a very good example of the type of legislation that is currently enforced Australia-wide. Your State or Territory does have an Act of the same name but its contents may be different. You will be able to access the Act applicable in your state or territory: from your employer organisation (It will have all the relevant documents concerning WHS for your workplace.) from the WHS officer in your workplace via the Internet at the relevant government site from the relevant government department in your State or Territory.

Generally, any Act that is passed by Parliament will establish a number of key points about a given issue. These include:

- a rigorous definition of the objectives concerning the issue
- an explanation of the conventional philosophy surrounding the issue
- a clear definition of the direction in which society would like to see the issue taken.

In the case of WHS in the workplace, the Act also includes due consideration of the following points:

- responsibilities: who is responsible for what and when
- general duty of care: what this means
- requirements: what is required by both the employer and employee with regard to WHS.

In the case of the South Australian WHS&W Act 1986, the Act covers all employees, selfemployed persons, employers and sub-contractors in all workplaces (where a workplace is defined as follows):

'Workplace' means any place (including any aircraft, ship or vessels) where an employee or self-employed person works and includes any place where such a person goes while at work. (From WHS&W Act 1986 Part 1 4(1))

The key principles of the legislation are:

Consult with workers and/or their representatives.

Identify hazards that have the potential to cause illness or injury.

Assess how likely these risks are to cause illness or injury.

Control the risks to minimise illness or injury.

Provide information, instruction, training and supervision to assist workers to understand risks and how management has to control the risks.

Ensure that all injuries, fatalities and near misses are reported, to prevent future incidents.

Must have systems to regularly review and evaluate health, safety and welfare.

The chief objects of the Act are:

To secure the health, safety and welfare of persons at work.

To eliminate, at their source, risks to health or safety and welfare of persons at work.

To protect the public against risks to health or safety arising out of or in connection with:

- the activities of persons at work
- the use or operation of various types of plant and equipment

To involve workers and employers in issues affecting occupational health, safety and welfare.

To encourage registered associations to take a constructive role in promoting improvements in occupational health, safety and welfare practices and assisting employers and workers to achieve a healthier and safer working environment.

Legal requirements also dictate that the Act clearly defines the term employee and certain provisions also have implications in relation to persons not usually associated with the workplace, eg: members of the general public, vandals and visitors. Therefore your WHS requirements specify that you are to be aware of and responsible for:

- persons working with you (if you are a worker)
- persons working for you (if you are an employer)
- the general public
- visitors
- contract workers
- persons working with/for contract workers.

Remember that injury or damage to any of these people will have ramifications if an employer is found to be negligent. Workplace Inspectors police the Act and have the power to shut down a worksite if it contravenes any WHS standards. In South Australia, these inspectors work for the Department of Administrative and Information Services (DAIS) and the Department's website is a useful study reference for any worker in any State or Territory. It can be found at www.safework.sa.gov.au. Alternatively, take the time to find out which department in your State or Territory is responsible for Workplace Inspectors, and check their website for information. A good resource for this is the Commonwealth Government website www.ascc.gov.au, which has links to all other related WHS sites in Australia.

Some important phrases from the Act

Throughout any WHS legislation, you will find two commonly occurring phrases that need to be explained. These are:

- Duty of care, and
- Reasonably practicable.

It is important that we understand these two terms, as in the case of disputes, much of the legal weight of any WHS Act rests on determining whether both of these points were adequately satisfied.

Duty of care

All WHS legislation places a general duty of care on every person in the work environment.

Duty of care establishes the responsibilities of:

- employers
- employees
- any other person/s who contribute to the circumstances in which work is performed.

These include the following:

- suppliers
- manufacturers
- designers.

Duties of employers

It is the duty of all employers to ensure, so far as reasonably practicable, that the employee or worker is safe from injury and risks at work. This duty includes the provision and maintenance of:

- a safe working environment
- safe systems of work
- plant (ie: machinery, vehicles etc.) and substances in a safe condition
- adequate facilities for the welfare of employees
- information, training, supervision and instruction that are reasonably necessary to ensure that each employee is safe from injury and risks to health.

In addition to this, an employer has to, as far as is reasonably practicable:

- ensure that managers and supervisors are instructed and trained in WHS

- monitor the health and welfare of employees, in order to prevent injuries related to work
- ensure any recreational, eating, accommodation or any other facility provided is safe
- ensure that information relating to health, safety and welfare is provided in such languages as are appropriate, including names of people to contact concerning health, safety and welfare matters
- keep and maintain records on work-related injuries
- ensure that, where there are changes at the workplace, employees who are inexperienced or have not undertaken work of a hazardous nature before, are trained and supervised before commencing the task.

Duties of employees

Each employee is responsible for:

- taking care to protect his or her own health and safety at work, and to avoid affecting the health and safety of anyone else at work and as far as is reasonably practicable
- using any equipment provided for health and safety purposes
- obeying reasonable instruction that an employer may give, in relation to health and safety
- complying with any policy that applies in the workplace
- ensuring that he or she is not under the influence of alcohol or any drug
- reporting hazards according to legislative requirements and workplace policies and procedures.

Joint responsibilities

To prepare health and safety policies and maintain a written statement of practices and procedures at the workplace to protect health and safety and to translate these into languages other than English where appropriate.

Employers and workers should also discuss the election of health and safety representatives.

Reasonably practicable

The two words reasonably and practicable are used throughout WHS legislation, Guidelines and Codes of Practice. These four points must be considered when determining what is reasonably practicable:

- The severity of the hazard.
- The availability and suitability of control measures.
- Knowledge about the hazard and ways in which it can be controlled.
- The cost of long-term and short-term control measures.

Under the Act, a Magistrate will apply the four common law tests of reasonably practicable. These are:

- foreseeability – whether the injury/illness was foreseeable
- causation – whether the injury was related to an unsafe matter that could have been controlled by the company and/or the individual
- preventable – whether there was a practicable alternative to do the job safely
- reasonableness – whether it was reasonable to do something about the unsafe matter.

If an employer or an employee fails to meet the Duty of Care provisions under the Act, and an injury occurs in the workplace, the employer may be found to be negligent in a court of law.

WHS regulations: What are they?

Regulations are made under the Act and these regulations set out the specific legal requirements of the Act. The regulations can relate to a particular activity or hazard, such as mining or logging and, in some instances, they deal with workplace arrangements, such as the forming of work groups and election of health and safety representatives. Failure to comply with the regulations by any person in the workplace is a breach of the regulations as they are mandatory. The regulations use the words 'shall' or 'must' to indicate that they are mandatory requirements.

Approved Codes of Practice

An Approved Code of Practice (CoP) provides minimum standards with regard to health, safety and welfare and is designed to be used in conjunction with the Act and Regulations. A CoP gives practical guidance as to how standards of health, safety and welfare can be achieved and maintained. However, if an equivalent or better standard of health and safety can be achieved by action different from that outlined in the CoP, then there is built-in flexibility to allow a person to use that other standard. This flexibility is not present in the

Regulations, where the person responsible must meet the specific requirements detailed in the Regulations. A CoP can include references to the Act or Regulations and, where these references are preceded by the words 'shall' or 'must', they are mandatory. Many of the preferred methods or courses of action detailed in a CoP are preceded by the word 'should' and unless another solution that achieves the same or better standard is adopted, a person is obliged to follow the CoP.

As in most states and territories, in South Australia, an Approved Code of Practice is one which has been recommended for approval by the Minister for Occupational Health, Safety and Welfare and by the Ministerial Advisory Committee on WHS and, once approved, is gazetted and passed by both Houses of Parliament. Other organisations, eg: Australian Standards, do develop Codes of Practice. However, these are not Approved Codes of Practice.

The following three points need to be remembered when referring to an Approved Code of Practice: Unless there is another solution that provides the same or better standard of health and safety, follow the Code of Practice.

A Code of Practice gives practical guidance.

A Code of Practice can be used to support prosecutions.

The following are examples of Approved Codes of Practice:

- Occupational Health and First Aid in the Workplace
- Manual Handling
- Tuna Farm Diving.

It must also be noted that many enterprises have their own individual 'codes of practice' that demand standards above and beyond those set out in the WHS requirements. No matter which rules your employer follows, remember that it is your right to have a safe workplace. You have the right to be adequately trained and all relevant safety equipment must be supplied. These rights are protected by law and employers who infringe on these rights are subject to heavy fines or even the closure of their business.

You must conform to:

- Codes of Practice followed by your industry
- WHS regulations in your state, as determined by parliament
- enterprise-specific WHS policies and standards that will be at least as stringent as the state WHS standards and may even exceed them.

If you choose not to conform to the law, even during an emergency, you will be open to:

- prosecution by the full weight of the law which could lead to heavy fines and imprisonment
- injury or death to yourself or others
- further stock or asset loss
- dismissal from your job
- being held liable for damages caused

Australian Standards

Australian Standards (AS) covers a broad range of topics and activities and number in their thousands. Under all Australian Acts, Australian Standards have minimal legal significance unless they are referred to in one of two ways:

When the AS is referred to in a Regulation:

- In this circumstance, the AS is mandatory under the Regulations and an employer must ensure that the standard is complied with.
- If the AS has been recommended, approved and gazetted as an approved Code of practise

Guidelines

To assist those people responsible for health, safety and welfare in the workplace, guide lines have been developed. The guidelines are a resource that can be used when strict adherence to a Regulation or meeting the required minimum standard of an approved

Code of Practice may not, for various reasons, be possible. Guidelines provide further explanation about aspects of the Act and Regulations or specific hazards in the workplace. WorkCover is an organisation which

is one of the major producers of guidelines and an example, Guidelines for reducing the risk of Violence at Work, can be found at their website <http://www.workcover.com>.

Specific responsibilities

Workers can expect their workplace to be both a healthy and safe environment.

Expectations may include:

- a safe physical environment, ie:
- well maintained, with tidy premises
- adequate storage areas
- moderated temperature where possible
- noise controlled
- lighting suitable to the tasks conducted
- building codes adhered to
- safe access and egress.
- provision of equipment that is:
- suitable for the task at hand
- provided in adequate quantities
- well maintained.
- provision of training that is:
- related to safe work practices
- relevant to job role and associated tasks
- updated as required
- related to equipment provided
- accredited where required.
- provision of safe working conditions, including:
- reasonable hours of work
- reasonable workload
- reasonable breaks
- provision of catering, first aid and hygiene facilities that meet legislative requirements
- provision of supervisor and/or peer support
- Award payment/leave allowances
- encouragement/incentives to maintain a safe workplace
- process for raising WHS issues.

Any of the conditions that are not met may have the potential to cause harm to workers, clients and visitors. Remember the shared responsibility that you have to not only recognise when a hazard has the potential to cause harm, but also to report the hazard and act with sound judgment to have the issue resolved before it results in an accident.

Workplace policies and guidelines

All workplaces are now legally required to have Occupational Health and Safety (WHS) policies and procedures in place. You should see your supervisor or find out who the WHS representative is and obtain from them a copy of this policy. Make sure that you take time to read it or have someone explain it to you.

<http://www.workcover.vic.gov.au>

There can be no doubt that ...
People who are secure, safe, healthy
and supported stay longer and are
better able to cope at work. Indeed,
the whole community benefits. Good
WHS practice gives the following
benefits:

- Fewer injuries to staff

WHS is good practice

Following is an example of a documented workplace WHS policy, taken from the health sector:

1 – STATEMENT OF INTENT

Health Service Inc is committed to the proper management of occupational health, safety and welfare, which ranks equally with all other operational considerations.

It is the aim of Health Service Inc to minimise the risk of injury and disease to our employee and other persons. By adopting a planned and systematic approach to the management occupational health safety and welfare and providing the resources for its successful implementation.

2 – OBJECTIVES

The objectives of this policy are to ensure:

- 1. All hazards that are risks to health and safety are identified, assessed and where they cannot be eliminated are effectively controlled.*
- 2. Measures to control hazards and risks to health and safety are regularly monitored and evaluated.*
- 3. Employees are consulted and encouraged to contribute to the decision making process on occupational health and safety matters effecting their health and safety at work.*
- 4. All managers, supervisors and employees receive appropriate information, instruction, training and supervision they need to safely carry out their responsibilities.*

3 – STRATEGIES

Health Service Inc will achieve its occupational health safety and welfare objectives by developing and implementing appropriate policies and procedures which document standards and guide managers, supervisors and employees in carrying out their responsibilities in:

- identifying hazards and risks to health and safety associated with task and activities carried out by Health Service Inc*
- assessing the degree and level of risks arising from hazardous tasks or activities*
- selecting, implementing and maintaining appropriate measures to control risks to health and safety*
- consulting with employees and their representatives on matters which may affect their health and safety*
- identifying, developing and providing appropriate information, instruction and training to equip managers, supervisors and employees with the knowledge and skills necessary to meet their responsibilities*
- developing, implementing and monitoring plans to put Health Service Inc health and safety policies and procedures into effect.*

4 – ROLES AND RESPONSIBILITIES

RESPONSIBLE OFFICER

The Chief Executive Officer as the Responsible Officer has the overall responsibility to provide a healthy and safe workplace for employees and other relevant persons and will ensure adequate resources are provided to meet the health and safety objectives and implement strategies.

In particular the Chief Executive Officer will ensure:

- 1. Appropriate health and safety policies and procedures are developed and implemented to enable the effective management of health and safety and control of risks to health and safety.*
- 2. Mechanisms are provided to enable the identification, development, implementation and review of appropriate health, safety and welfare related policies and procedures.*
- 3. Mechanisms are provided to enable employees and their representatives to be consulted on any proposals for, or changes to the workplace, work practices, policies or procedures which may affect the occupational health, safety and welfare of employees.*
- 4. Managers are provided with the necessary knowledge and skills to effectively enable them to carry out their health and safety responsibilities.*
- 5. Mechanisms are provided to enable the assessment of managers' and supervisors health and safety performance.*

6. Occupational health and safety performance is an integral component of the Health Service Inc strategic business and financial plans.
7. Mechanisms are provided to regularly monitor and report on health and safety performance.
8. Annual health and safety strategic plans are developed and implemented to meet health and safety objectives.

OCCUPATIONAL HEALTH AND SAFETY COORDINATOR

The Occupational Health and Safety Coordinator has the responsibility for coordinating Health Service Inc management of health and safety on behalf of the Chief Executive Officer. The Occupational Health and Safety Coordinator does not assume the responsibilities of managers and supervisors.

The Occupational Health and Safety Coordinator has a responsibility to:

- Coordinate the identification, development, implementation and review of health and safety related policies and procedures.
- Assist managers and supervisors in the identification, development and provision of appropriate health and safety related information, instruction and training.
- Assist managers and supervisors to effectively consult with employees and their representatives.
- Monitor and advise on legislative and technical changes relating to health and safety.
- Monitor and provide regular reports to the Chief Executive Officer and the Health and Safety Committee on the Health Service Inc occupational health and safety performance.
- Support Occupational Health Safety and Welfare Committee in its function, eg: agendas, minute taking and secretarial role.
- Support employees and health and safety representatives to follow policies and safe work procedures developed.
- Provide information to employees and their representatives on health and safety.

MANAGERS

Managers have a responsibility in their area of control to ensure:

They carry out their roles and responsibilities as detailed in the relevant health and safety policies and procedures.

Relevant health and safety policies and procedures are effectively implemented.

All risks to health and safety are identified, assessed and effectively controlled.

The effectiveness of risk control measures are regularly monitored and deviations from standards rectified.

Supervisors and employees have adequate knowledge and skills to carry out their health and safety responsibilities.

Employees and their representatives are consulted on any proposal for, or changes to the workplace, work practices, policies or procedures which may affect the health and safety of employees.

SUPERVISORS

Supervisors or persons with supervisory responsibilities have a responsibility to ensure:

They carry out their roles and responsibilities as detailed in their relevant health and safety policies and procedures.

Relevant health and safety policies and procedures are implemented in their area of control.

All risk control measure in their areas of responsibility are implemented, regularly monitored and maintained.

The employees under their control are provided with the necessary information, instruction and training to effectively and safely carry out their jobs.

EMPLOYEES

Employees have a responsibility take care to protect their own health and safety and to avoid adversely affecting the health and safety of any other person.

Employees have a responsibility to:

- Report any incident or hazards at work to their manager or supervisor.
- Carry out their roles and responsibilities as detailed in the relevant health and safety policies and procedures.
- Obey any reasonable instruction aimed at protecting their health and safety while at work.
- Use any equipment provided to protect their health and safety while at work.
- Assist in the identification of hazards, the assessment of risks and the implementation of risk control measures.
- Consider and provide feedback or any matter which may affect their health and safety.

- *Ensure they are not so affected by alcohol or another drug, to endanger their own or any other persons' health and safety.*

OCCUPATIONAL HEALTH, SAFETY AND WELFARE COMMITTEE

An Occupational Health, Safety and Welfare committee with recommended numbers of management and employees will be maintained according to its' Terms H of Reference to:

- 1. Assist in the development, monitoring and review of health and safety policies and procedures.*
- 2. Consider any proposal for, or changes to the workplace, policies, work practices or procedures which may affect the health and safety of employees.*
- 3. Promote the importance of health and safety among management and employees.*
- 4. Monitor Health Service Inc health and safety performance.*
- 5. Monitor the rehabilitation programs for injured employees.*
- 6. Assist in the resolution of health and safety disputes.*

HEALTH AND SAFETY REPRESENTATIVES

Health Service Inc will maintain formed work groups over all campuses with employees as health and safety representatives from each group democratically elected for a term of three years.

There are currently six groups and representatives:

- 1. Nursing (Campus A).*
- 2. Nursing (Campus B).*
- 3. Community Health.*
- 4. Corporate Services.*
- 5. Administration/Maintenance/General Services (Campus A).*
- 6. Administration/Maintenance/General Services (Campus B).*

The role of health and safety representatives is to:

- 1. Represent employees from their designated work group on health and safety matters.*
- 2. Investigate health and safety related complaints prior to representations to management.*
- 3. Make representations to management and report back to employees on any matter relating to health and safety.*
- 4. Discuss with the employees, any proposals or matters which may affect the health and safety of employees.*
- 5. Assist management in the identification of hazards, the assessment of risks and implementation of risk control measures.*
- 6. Assist in promoting adherence to health and safety policies and procedures.*
- 7. Assist in the monitoring of risk controls and health and safety policies and procedures.*

5 – ANNUAL REPORT

The annual report will contain health and safety information with particular reference to work injury and experience relative to performance targets.

6 – REVIEW

The health and safety policy will be reviewed annually by the Health and Safety Committee in consultation with employees and recommended to the Chief Executive for approval.

The review will involve assessing the effectiveness of the policy and program by such means as:

- *reviewing overall health and safety performance*
- *monitoring the effectiveness of policies and procedures.*

7 – DISSEMINATION and ACCESS

As part of each employee's initial orientation, they will be provided with a copy of this policy and given information on other occupational health and safety policies and procedures through their managers/supervisors and health and safety representatives.

Copies of this policy are available to all employees in their work location 'WHS&W Policies and Procedures' folder and in Corporate Services WHS&W office.

8 – INTERPRETATION



This policy will be translated and practical instruction given for employees and others of non-English speaking background and the functionally illiterate if/when the need is identified and during orientation.

9 – ENDORSEMENT

Signed _____ Date _____

Chief Executive Officer

Signed _____ Date _____

Chairperson, WHS&W Committee

Emergency response policy

The following is an example of a documented workplace Emergency Response policy, taken from the health sector:

HOME CARE SERVICES – EMERGENCY RESPONSE PLAN

POLICY STATEMENT

- 1. To cover On Call service emergencies, HCS maintains a 24hour/7 days a week service with immediate access to a Registered Nurse.*
- 2. At Orientation and In-service presentations HCS endeavours to prepare a Support Worker to meet the most common emergency situations and to provide client support during an episode.*
- 3. A current First Aid Certificate must be maintained by the Support Worker.*
- 4. At all times, in any emergency, Support Worker and client safety are the priorities.*
- 5. A Support Worker is advised to practise vigilance in the working environment, carry a mobile telephone and their car keys on their person whilst attending a client. In the event of a major or life threatening situation to a client and/or a Support Worker/s, immediate telephone contact via 000 is identified as the quickest way of summoning the most appropriate emergency aid for Ambulance, Police or Fire Brigade. At the earliest opportunity, the Support Worker is to notify HCS of the situation and await instructions. If a Support Worker perceived the event as significant, HCS encourages debriefing opportunities.*
- 6. Any incidents applicable to any other organisation or Occupational Health, Safety & Welfare issues will be reported to that body or committee.*

POLICY GUIDELINES

ON CALL EMERGENCY RESPONSE

- 1. During office hours, the finding body Options/Agency, client/advocate and Support Workers have access to a Registered Nurse.*
- 2. Out of office hours, a Registered Nurse is immediately available via a paging service.*
- 3. The On Call Coordinator/s has access to a laptop computer, which contains the visual roster system with all client details and Client Care Plans. Support Worker details are also available.*
- 4. HCS has, at least, one staff member who can be contacted to respond in the event of a client emergency.*
- 5. All parties that broker service/s will be requested to provide emergency hours for their client/s if necessary.*
- 6. In the event of an emergency request, the finding body will be immediately notified or notified on the next working day.*

A record of all emergency attendances will be documented on the client's progress notes.

MEDICAL/HEALTH EMERGENCY RESPONSE

MINOR EMERGENCY:

In the event of a minor emergency, eg: a client who states they feel unwell and without any other complaint, the Support Worker is to immediately notify HCS and await instructions.

The Client Officer is to immediately notify a HCS Registered Nurse of the situation who will direct the action to be taken.

MAJOR EMERGENCY:

In the event of major medical emergency, eg: a client's condition deteriorates, develops chest pain or falls with obvious injury, the Support Worker is to apply the principles of 1 Aid ie: assess for danger then check,

AIRWAY

BREATHING

CIRCULATION

The Support Worker will telephone 000 for an ambulance.

Whilst awaiting the ambulance, the Support Worker will provide client support as required.

The Support Worker will then notify HCS and inform of the situation and await instructions.

HCS will inform the Next-of-Kin and the funding body of the situation.

HCS will document the event and outcome on the client's progress notes.

DEATH OF A CLIENT:

If a Support Worker finds that a client has expired in their home, it is important that neither the client nor the environment is disturbed pending a Police investigation.

The Support Worker is to telephone 000 for ambulance assistance.

The Support Worker is to notify HCS immediately and await instructions.

HCS will liaise with the proper authority and contact the advocate/Next-of-Kin and the funding body.

HCS will document the event in the client's progress notes.

POLICE EMERGENCY RESPONSE

If a Support Worker is threatened or feels threatened, by a client or other person/s. The Support Worker must not enter into any verbal or physical interplay with the aggressor.

The Support Worker is to leave the client in a safe environment, if possible and inform the client of their intention to leave.

The Support Worker is to vacate the premises as quickly as possible.

When safe, the Support Worker is to report the incident to HCS.

If unable to leave, the Support Worker is to retreat to a safe environment, eg: to a toilet or behind a locked door.

When in a safe location, telephone for Police assistance, ie: 000.

Then, telephone HCS at the earliest opportunity and report the situation

When assistance arrives and the threat is under control, the Support Worker is to re-report to HCS.

HCS will notify the advocate/Next-of-Kin and the funding body of the event.

The Support Worker and HCS will document the event in the client's progress notes.

The HCS Registered Nurse will notify the HCS Nurse

Supervisor/Manager of any event involving threat or requiring police assistance.

HCS may table a report for an appropriate meeting or report the incident to an applicable body.

FIRE EMERGENCY RESPONSE

The Support Worker is to telephone 000 for assistance.

The Support Worker to implement the principles of

RACE, ie:

REMOVE FROM DANGER

ALARM RAISED

CONTAIN THE FIRE

EVACUATE THE OCCUPANT/S

The Support Worker is to inform HCS of the incident as soon as possible.

HCS will notify the Next-of-Kin if necessary and the funding body.

HCS will document the incident on the client's progress notes.

A Support Worker is not to risk personal or client safety to recover any item.

Where HCS provides Support Workers for supported accommodation, a Support Worker is to be familiar with that institution's Fire Manual and Emergency Plan.

HCS recommends Support Worker attendance at HCS Fire Safety In- Service presentations.

ESSENTIAL SERVICE/S FAILURE OR LEAKAGE EMERGENCY RESPONSE

1. *In the situation of a major or life threatening event, the Support Worker and the client are to vacate the premises until assistance arrives.*
2. *When a client/advocate is unable to alert the proper authority, a Support Worker is to notify HCS of the situation and await instructions.*
3. *HCS will notify the proper authority, then the advocate/Next-of-Kin and the funding body of the situation.*
4. *HCS will document the event on the client's progress notes.*

AWAY FROM HOME/OUTSIDE THE METROPOLITAN AREA EMERGENCY RESPONSE

1. *A Support Worker providing a service away from home is to carry a mobile phone for emergency use, ie: call 000 and then contact HCS.*
2. *A mobile phone is available from each HCS office.*
3. *In an emergency situation, without a mobile phone or the mobile does not work, because in a drop out zone, enlisting help from the public is recommended, eg: to telephone 000 for an ambulance.*
4. *A Support Worker is to ensure client confidentiality and privacy is maintained.*
5. *The Support Worker is to report to HCS at the earliest opportunity.*
6. *HCS will notify the advocate/Next-of-Kin and the funding body of the situation.*
7. *HCS will document the event in the client's progress notes.*

SUPPORT WORKER EMERGENCY RESPONSE DEBRIEFING

HCS offers debriefing opportunities to a Support Worker following any emergency or traumatic incident. Debriefing sessions with HCS Management or an appropriate agency are encouraged for a Support Worker following major incidents.

ENDORSED BY: ____ (signature) ____

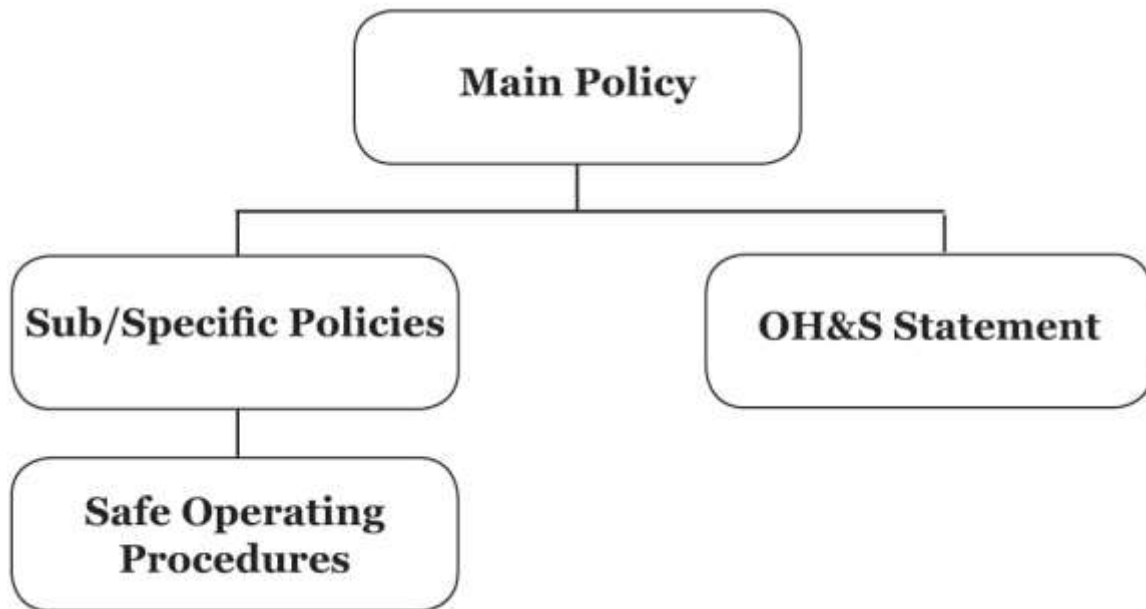
REVIEWED: ____ (date) ____

DIRECTOR REVIEW ____ (signature/date) ____

CONSULTATION

Consultation can occur through formal and informal processes and may involve direct or representational participation. Effective consultation can occur through:

- **A team based approach**
- **WHS information sessions and focus groups**
- **Including WHS matters on staff meeting agendas**
- **Requesting staff suggestions**
- **WHS representatives**
- **Referring to WHS matters in staff newsletters**
- **Conducting staff surveys on WHS issues**
- **Issuing staff bulletins and updates**
- **Area specific working parties**



An WHS policy should:

- include details of the organisation's health and safety objectives
- state senior management's commitment to health and safety
- demonstrate that senior management accepts primary responsibility for the health and safety of all employees
- identify the Responsible Officer (must be senior executive, CEO or equivalent)
- define the role and responsibilities of the Responsible Officer, managers, supervisors, employees and other relevant people
- explain accountability of responsible people
- provide name/s or position/s of the people to whom employees may make enquiries and complaints about WHS issues
- emphasise the importance of consultation and cooperation between management, employees and their reps and describe the role and function of Health and Safety Representatives (HSRs) and Health and Safety Committees (HSCs)
- outline the organisation's arrangements and strategies for achieving health and safety issues
- state how the policy will be reviewed and updated, including date of preparation/last review
- outline strategies to ensure employees from non-English speaking backgrounds (NESB) receive information, supervision and training and ensure they are included in consultation
- have a health and safety policy to suit the individual needs of the organisation be signed by the Responsible Officer or CEO of the organisation and representatives of the employees.

All workplaces are required to have a First Aid Kit appropriate to their needs. You must know where this kit is stored and procedures for its use. You must become familiar with the machines or equipment you operate. This includes what to do in the case of an emergency. Some machines have an emergency stop button and you should know what happens when you press this button. The emergency stop button should be tested before operating the machine.

Emergency equipment that is provided by your employer is designed to minimise:

- injury to personnel
- damage to plant and equipment
- damage to the environment
- damage to stock, and
- lost production time.



It is your responsibility to know how to use the emergency equipment provided. This equipment must never be used in jest or be the subject of tomfoolery. It should not be used for any other purpose other than what it is designed for and should only be used in accordance with the manufacturer's instructions.

You must be able to notify the relevant authorities in the event of an emergency. All employees need to know how to operate all means of communication provided in the workplace, such as two-way radios, mobile phones and satellite phones. While it is the responsibility of the employer to provide training, it is still part of your responsibility to know how to operate the emergency communications that are provided.

Being involved in maintaining health and safety

It has been recognised that any meaningful change in a workplace must be initiated by people in the workplace and, more importantly, by people directly involved or affected by a given hazard. It has also been found that the best solutions to problems are generated from people directly involved with the problem. To develop safe working practices, committees usually look at established industry standards. These are standards developed by industry bodies in consultation with enterprise, government departments and safety experts.

They provide a framework for individual enterprise to work from and adapt to match their specific requirements. If you are unable to participate directly in meetings, you can always provide your opinion through designated people on the committee. This will either be a safety officer or union representative. The onus is on you to be observant within the workplace regarding safety concerns. If you see a situation that is a potential hazard, you should report it to your designated person.

When you inform that person about the hazard you should also consider any possible solution to the problem. They should follow it up and some appropriate action should be taken. The first thing you can do is know who your safety representative is, so you know who to speak to if there is a problem. The other is by completing any reporting processes that your organisation may have.

These include hazard identification reports, near miss forms and accident investigation reports. All of these forms help to build up a picture of safety in the workplace, because they highlight safety problems and hopefully get them addressed before they cause an accident.

An important part of a hazard report is a suggested solution to the hazard. Try always to develop some type of solution because this will help in finding a result that works and is practical.

Consultation – employer obligations and employee rights

The strategies that will facilitate this two-way communication are formal systems that enable workers to take part in the decision-making process.

These are:

- consultation on the development of WHS policies and procedures, including opportunity for workers or their representatives to comment on proposed documents
- consultation during the review of the policy and procedure documents and agreement to any changes in their content
- consultation on proposed changes to work practices or systems
- consultation prior to the purchase of new equipment or consumables, including chemicals
- opportunity to provide feedback during any monitoring or evaluation of changes made to work practices, systems, equipment, etc.

However, we do not live in an ideal world and, because we are not all confident in sharing our opinions and ideas with management, our valuable ideas may not be voiced and are lost to the WHS process. The legislation recognises this and, to promote discussion and meetings about WHS, provisions to elect health and safety representatives, and the right to have an occupational health safety and welfare committee, have been built into the Act and Regulations.

Consultation rights – WHS representatives

A health and safety representative is elected by their work group. Any worker in the work group can seek nomination and election. Once elected to the role, the employer must give them the opportunity to attend recognised training to give the representative the information needed to raise WHS issues with their employers on behalf of their fellow staff members. Under the Occupational Health, Safety and Welfare Act 1986, the health and safety representative has a right to:

- inspect the workplace for hazards (provided they have given their employer adequate notice)



- inspect the workplace immediately if there has been an incident or accident, or there is a risk to people's health and safety
- explore any health and safety issues or complaints with the workers whom they represent.

Having a health and safety representative is a formal consultative mechanism that can be put in place to ensure that workers are consulted about any issues likely to affect the health and safety of the work group, as discussed in the strategies set out above. In extreme cases, if a worker's health or safety is at risk, the representative can order that work stop until the area is safe. In most cases consultation between employers and workers results in issues being resolved before formal warnings to stop work are issued. There should also be consultative responsibilities built into position descriptions, job specifications and workplace specific WHS policy. These should appear in any role that incorporates supervisory or managerial responsibilities.

Contributing to WHS management

Benefits of participating in an occupational health safety and welfare program:

- improves the health and safety of workers and clients
- recognises good work practice and performance
- gives workers the opportunity to discuss their own ideas and needs
- raises awareness about areas or work practices that need improvement
- promotes, instigates and facilitates effective change
- provides guidelines for expectations of performance, both current and future
- provides guidelines for safe systems of work
- provides an ongoing system for staff education
- encourages the formation of an occupational health safety and welfare committee
- supports the election of health and safety representatives.

RISK MANAGEMENT PROCESS

Risk management is divided into four primary activities. This includes:

1. Hazard identification

- The employer must identify all foreseeable hazards that could harm employees or any other person at their workplace. The WHS Regulation identifies a number of factors from which hazards must be identified. These include work premises, work practices and systems, shift work arrangements, plant, hazardous or biological substances, manual handling, the environment and potential for violence.

2. Risk Assessment

- The employer must assess the risk that someone may be harmed by that hazard. It is the overall process of estimating the extend of risk and deciding whether a risk is tolerable.

3. Control the risk

- Where practical the employer should eliminate risks, however, if this is not reasonable practical, an employer should implement controls to minimise the risk to the fullest extend possible.

4. Evaluate

- The employer should continuously evaluate the effectiveness of the controls implemented to ensure they remain adequate or that circumstances have not changed.

Assessing the risk:

- identify the hazard
- note who is exposed to the hazard
- establish the frequency and level of exposure
- identify the health effects or results of exposure.

Risk assessment

There are many models, templates and tools used to conduct a risk assessment. Listed below is one method to assess the risk. This four-stage process is commonly used and you may have seen this before in other WHS or risk assessment learning materials.

The four-staged hierarchical model involves working through a series of tasks to determine a risk rating priority. The greater the priority, the stricter the measures you will need to put in place to minimise the risk associated with the hazard.

Step 1: Identify the injury or illness consequence that could result from the hazard (eg: person injured by hazard).

Fatality May cause one or more fatalities.

Critical May cause severe injury, more than two weeks lost time.

Major May result in five days to two weeks lost time.

Minor Injury may cause one to five days lost time.

Negligible First aid treatment, no lost time.

Step 2: Determine the likelihood or probability of an event occurring from the hazard.

Very likely Exposure could happen frequently (daily-weekly).

Likely Exposure could happen, but not frequently (weekly-monthly).

Unlikely Exposure could happen, but rarely (monthly-yearly).

Very unlikely Exposure could happen, but probably never will (yearly to two yearly)

Step 3: In this step you determine the overall risk associated with the hazard. By cross referencing the probability and severity you arrive at the level of risk the hazard poses.

Probability rating	fatality	Critical	major	minor	negligible
Very likely	1	1	2	3	3
Likely	1	2	3	4	4
Unlikely	2	3	4	4	4
Very unlikely	3	3	4	5	5

Step 4: It is now possible to determine a risk rating. The higher the rating, the greater the need to implement a control measure. You may decide that after you complete the risk assessment the task poses too high a risk and should not be attempted. On the other hand it may only pose a very low risk and can be carried out with minimal control measures put in place, ie: Personal Protective Equipment (PPE).

1	Urgent
2	High
3	Medium
4	Low
5	None

Risk Management (Reasonable Practicability) Model.

The *Occupational Health and Safety (Commonwealth Employment) Act 1991* requires [Section 16 (1)] employers to “take all reasonably practicable steps to protect the health and safety at work” of their employees. Other jurisdictions in Australia have similar WHS requirements.

The legal judgement as to what is “reasonably practicable” is based on a consideration of the following general issues:

- severity of the hazard,
- probability of the risk,
- current knowledge regarding the hazard and the risk,
- availability of suitable hazard control/elimination methods,
- cost of such control/elimination methods.

Thus the legal test of “reasonable practicability” basically calls on management to apply the risk management model (see Fig. 1) to control the hazards in their workplace to an acceptable level of risk.

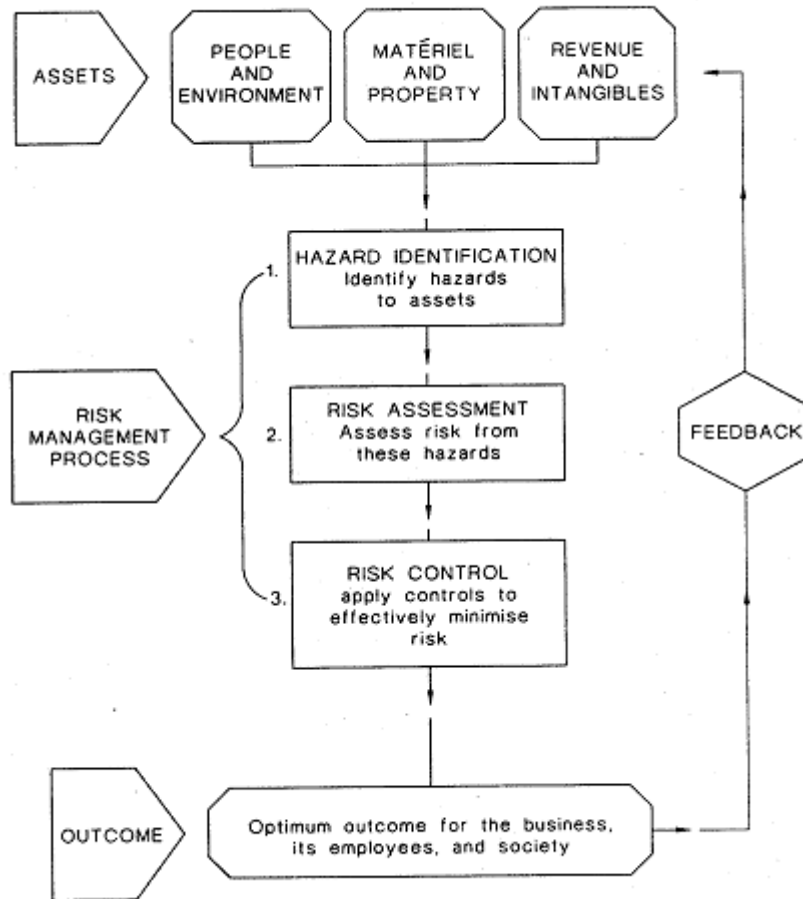


Figure 1

Hazard and Risk.

A hazard is a physical entity (i.e. an energy or an environmental agent) which could produce injury or disease in people (or environmental damage, damage to property, etc.).

Hazards that need to be managed within University disciplines include “everyday” hazards such as:

- electricity,
- plant and machines,
- heights,
- confined spaces,
- vehicles,

and the more esoteric hazards like:

- chemical materials (including compressed gases and cryogenic liquids),

- biological organisms,
- ionizing radiation,
- lasers,
- pressure vessels and systems,
- fieldwork.

Risk is the chance or likelihood of the hazard, under the circumstances of its use, producing an injury, disease, etc. Thus, risk is a number between 0 (no risk) and 1 (a certainty). Risk is influenced by such factors as:

- nature of the hazard,
- quantity of hazard,
- energy of the hazard,
- use to which the hazard is put,
- work system / operator factors,
 - leadership / teamwork
 - design
 - documentation
 - training
 - work practices
 - job selection
 - environment control
- system auditing.

Example 1:

Imagine that you are working in a community services environment. You are working with a new client in their home and your supervisor has asked you to identify the hazards that you see that might affect your health or safety, along with that of your client. The main tasks within your role include assisting the person to increase their mobility around the home.

What would you look for? And how would you find it? Remember the process of hazard identification:

- Inspection or observation of the work area.
- Physical assessment of work practice or system.
- Completing a hazard checklist.
- Collation and review of accident and incident statistics and injury records.
- Consultation with workers and/or representatives.
- Checking that the workplace environment, systems and mechanisms meet legislative requirements and regulations.

Should you record your findings in writing?

Which of these mechanisms would assist you the most?

Did you answer with numbers 1, 2 and 3?

The hazard checklist should be specifically for the home environment and, along with noting any general WHS issues, you should concentrate on elements that may pose risks to your client's independent mobility:

- Floor surfaces, including the presence of steps or ramps.
- Whether there are loose mats or other trip hazards on the floor.
- Availability of mobility aids, such as walking frames, grab bars, stair rails.
- Clothing and footwear that may restrict or jeopardise the client's freedom of movement.
- Lighting, both natural and artificial – is it adequate?
- Are the walkways, both inside and outside, obstructed or do they allow ease of movement?
- How much room is available? Do you have to adopt awkward postures in order to assist the client?

Can you think of any other things that will need to be assessed?

If you are unsure about whether or not your assessment meets the client's needs, find out if the organisation has anyone on staff or contract who can assist you.

Identify the hazard

You have found a loose floor rug on the tiled hallway floor between the living room and the client's bedroom. It has a fringe at each end and, as the rug is old, the fringing curls up at one end, thus creating a ridge.

Who is exposed to this hazard?

- The client and his wife.
- Community services workers who come into the house each day to assist the client.
- The contractor who cleans the house each week.
- Visitors who call on the client and visit him in his room when he is resting.

Frequency and level of exposure

Who do you think has the highest level of exposure to this hazard?

The answer is, of course, the client and his wife.

Health effects/results of exposure

1. What might the health effects, or results of exposure to this hazard be? What kind of accident do you think is most likely to result?
2. Did you say a 'tripping or slipping' accident? Well done. On a tiled floor this could result in bruising, abrasions and broken bones.
3. Now we need to look at how the hazard can be controlled by looking at the hierarchy of controls that we provided earlier.

Controlling the hazard

Elimination of the hazard by removing the rug would be the simplest and most effective solution, but the client and his wife are strongly opposed to that idea. Besides, they say that they have never tripped over the rug or its fringe yet! Substitution with a safer work practice, system or substance may be possible if the client can afford a new rug, perhaps with a non-slip undersurface. It may be even better to have the hallway carpeted.

Use of engineering controls or equipment. It is here that an easy compromise could be reached. There are products on the market that can be used to add a non-slip surface to the tiles or to anchor the rug and the edge that is curling to the tiles. You must remember though, that the safest solution is still the removal of the rug. Provision of training or retraining may not assist in this situation unless it is to raise awareness of the hazard that is created by the rug and the risks involved in leaving it as it is. Use of protective clothing or equipment is probably unnecessary in this instance.

Contribute to WHS management – giving feedback

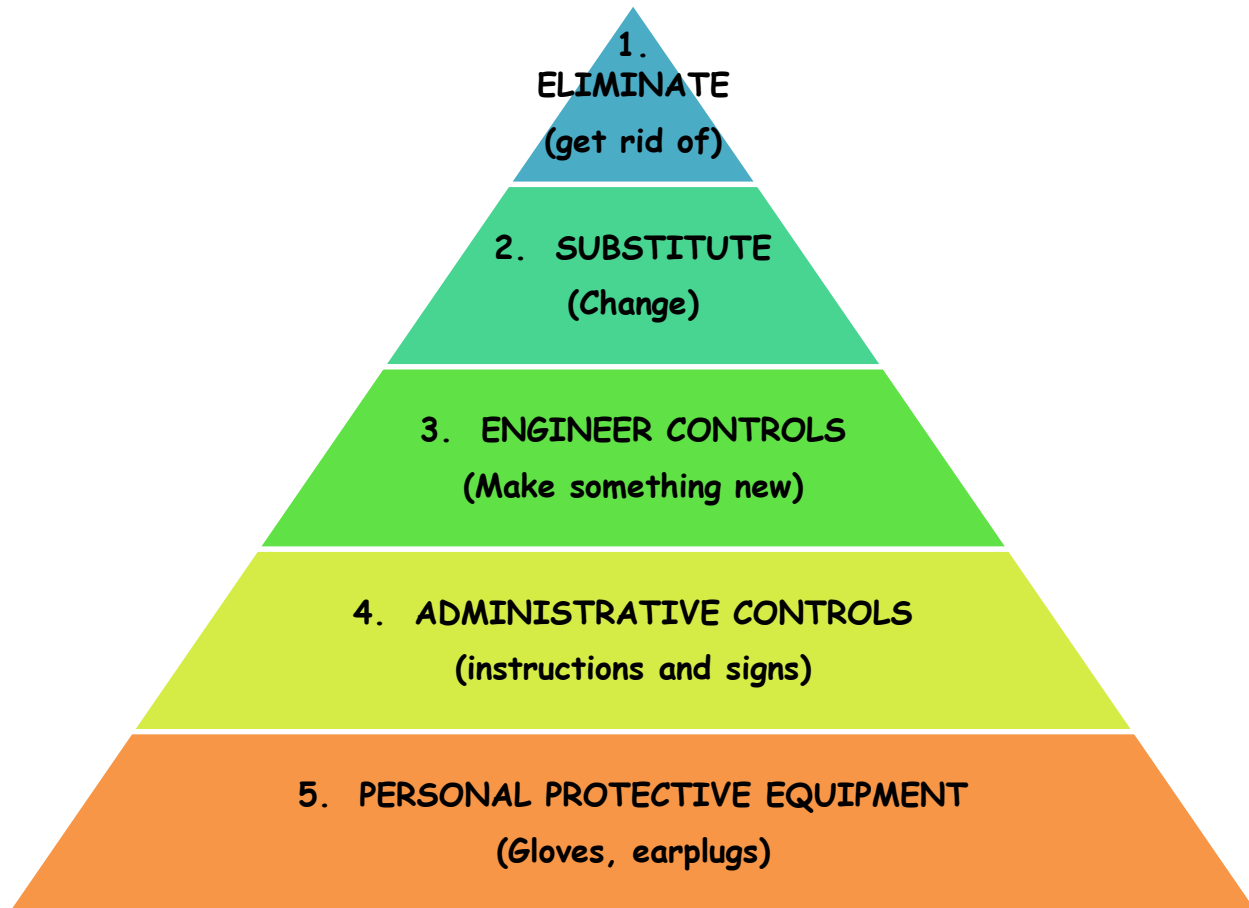
After undertaking hazard management processes, how should you convey your findings to your supervisor? What kind of support might you seek from them?

A verbal report may be all that is asked for, but a written report or completion of a hazard checklist is the most effective way to convey the information so that nothing is left out.

Sharing your findings at a team meeting may assist to clarify issues and enable some creative problem solving.

Note: The WHS issue you are dealing with may involve a person to whom your organisation provides service. You will need to have that person's consent before you share information with anyone else; you have an obligation to protect their identity and respect their privacy. You may have the opportunity to seek advice from your elected WHS representative or committee if brainstorming with your work group does not develop any long-term solutions.

The policies and procedures of your workplace will assist you to follow up and will provide you with guidelines for both the consultation and action that you should take. Remember that from workplace to workplace, even within the same organisation, systems for conveying WHS information may differ. You must ensure that you are aware of the way your work group operates, because this will provide you with the best opportunity to resolve issues. If you are already working, take the time to find out about your workplace information systems.



Hierarchy of control

Using this pyramid, you can decide what to do once you have identified a risk

Hazards

Hazards are a common factor in any workplace.

- hazard identification and hazard symbols
- bio-hazards
- causes of hazards
- injuries, emergencies and hazardous events
- natural hazards and environmental problems
- near misses and potential hazards.

Hazard management is a three-stage process involving hazard identification, risk assessment and risk control. All health care organisations will have policies and procedures for hazard management. Hazard management systems deal with hazardous situations, which could include blood and body substance spills, eg: a client falls and cuts themselves and is bleeding, or a client has diarrhoea and has excreted all over the bathroom floor. Hazard management also addresses the areas of infection control and hygiene. Protocols for spills management should be included in procedural manuals and emphasised in in-service education sessions or training programs. In all hazardous situations where there is a risk of contact with blood or body fluids, Standard Precautions apply and Personal Protective Equipment (PPE) must be worn.

What is a hazard?

Some may say that a hazard is 'an accident before it happens'. **A hazard is anything that has the potential to cause a person physical, emotional or psychological harm.** It may or may not have known dangers associated with it. For example, the known harmful effects of dangerous chemical substances such as the ability of acid to cause burns if it comes into contact with the skin.

There are two main types of hazards that you may encounter in the workplace. These are health hazards and safety hazards. Some examples include:

Health hazards:

Workplace violence
Chemicals
Heat and cold
Increased workload
Repetitive tasks

Safety hazards:

Slippery floor
Faulty electrical plugs
Poorly maintained equipment
Manual handling
Fire

In many cases, hazards are caused by lack of knowledge or carelessness. If you think about your home and workplace you may realise that no situation is perfect but it may be improved by using simple housekeeping strategies.

Safety and Health.

Safety is freedom from the danger of injury. A cut to the body or impact from a falling object are common experiences that are easily recognised as safety hazards. The pain and the injury that immediately result from the cut or the impact are obvious. Also obvious is the potential for more serious harm, even death, to be produced should the cut sever an artery or the object falls on an unprotected head. Thus safety refers to the freedom from hazards that may produce immediate injury to the body.

Safety involves keeping control of excessive energies, for example:

- gravity and mass energy,
- self-generated (i.e. by the person) energy,
- object energy,
- machine energy,
- vehicles and mass energy,
- electrical energy,
- fire and thermal energy,
- chemical energy, etc.

in such a way that exposure to people is eliminated as far as is reasonably practicable. If the fragile human body is exposed to an overwhelming energy, the result is a potentially disabling or fatal injury.

Health is commonly recognised as the absence of disease in the body. Disease can be caused by infection from a biological organism but it can also be a long-term outcome from exposures to the other factors routinely present in our environment, namely

- chemical substances,
- physical agents - such as noise, heat, radiation,
- biological agents,
- mechanical / ergonomic factors,
- psychosocial factors.

If the energy involved in any such exposure is high enough (e.g. during a major chemical spill), then such an exposure becomes a direct safety hazard. But at the low energy levels normally encountered, such environmental factors need to be evaluated and controlled as far as is reasonably practicable to ensure the risk of producing a disease is minimised.

Safety Risk: Injury Causation Model and Error Agencies.

The appropriate focus for safety practice is the anticipation (and control) of

- hazards that already exist in the workplace,
- errors in the work system that may generate new hazards.

These two issues are shown in the injury causation model of safety reproduced in Fig. 2. The model was developed by Wigglesworth, *A teaching model of injury causation and a guide for selecting countermeasures*, Occupational Psychology 46, 69-78 (1972).

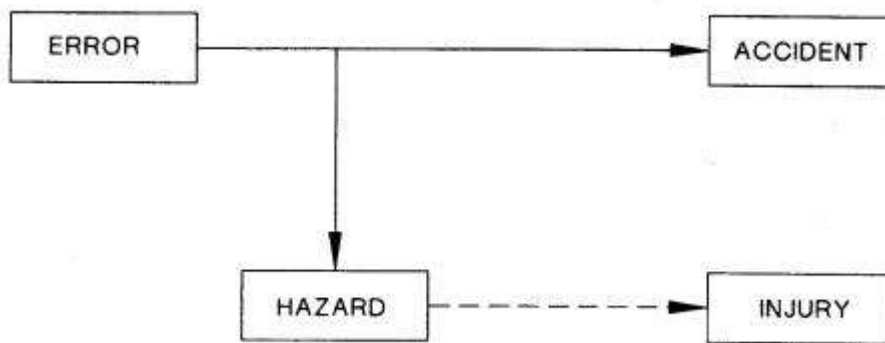


Figure 2

The excessive energy is generally already present in the work environment, but is stored and safely controlled until it is released by an error in the work system, including the people. For example, gravitational energy and fall from a ladder, machine energy and entrapment of loose clothing.

The injury causation model usefully documents the possibility of the error producing the uncontrolled energy release (i.e. the accident) either directly or via the generation of a hazard which has the latent potential to generate a direct injury (or an indirect injury via an energy release) while the work system is otherwise operating in a normal, error-free way.

Although an error occurs randomly in time, the occurrence of the error event will have been contributed to by one or more of an:

- unsafe act,
- unsafe condition,
- unsafe system.

These categories of error agency have traditionally been used to analyse the factors contributing to an error event. In recent times, however, the “unsafe condition” category has been separated into 'environment', 'equipment' and 'design' components, to give five general categories of error agency, as summarised in Fig. 3.

Error Agency	Description
Human Behaviour	Error in doing a task
Environment	Hazard present or error contributed to by

	<ul style="list-style-type: none"> • the physical environment • ergonomic factors • psychosocial factors <p>Nature as the source of uncontrolled</p> <ul style="list-style-type: none"> • energy, e.g. cyclone, flood, • bushfire, earthquake, volcano
Equipment	Failure of equipment is an error that contributes to the release of energy, either directly or indirectly
Design	Error in the design of the <ul style="list-style-type: none"> • task or work procedure • machine (including guarding) • work station • control systems (engineering)
Work System	Deficiencies in the system of work, including <ul style="list-style-type: none"> • training • maintenance • control systems (administrative) • resource allocation

Figure 3

Health Risk: Occupational Hygiene Model.

Control of an environmental agent that has the potential to produce a risk to health can be achieved by,

- eliminating the agent, or
- reducing the exposure/dose produced by the agent to as low as reasonably practicable.

The options available to control emissions emanating from a source of an environmental agent are summarised in the occupational hygiene model, given in Fig. 4.

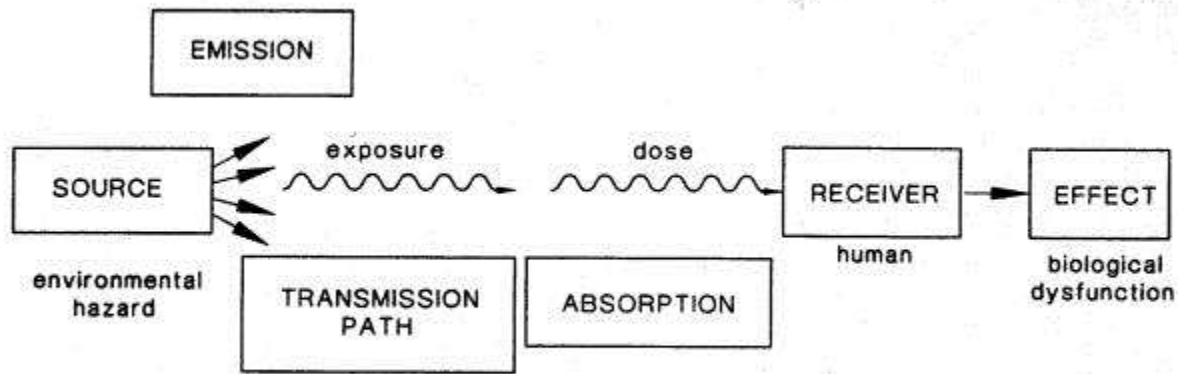


Figure 4

There are six domains where interception of, or reaction to, an environmental agent can occur; as shown by the boxes in Fig. 4:

Source: The source has the potential to release the environmental agent into the work environment. Can the source be eliminated or substituted with another less hazardous material? Can the total process be changed to improve performance and, simultaneously, reduce the environmental hazard?

Emission: If the source is a chemical or biological material, can contamination from the source be controlled at the point of emission by means of total enclosure (e.g. biological safety cabinet) or by the use of local exhaust ventilation (e.g. chemical fume cupboard)?

Transmission Path: Can the environmental agent be controlled along its transmission path, by a physical barrier, by exhaust or supply ventilation, or by separating the source from the people by means of a very large distance? This last option results in a reduction in exposure by natural dilution for materials and by the inverse-square intensity reduction for physical agents (like sound and radiation).

Absorption: Can the significance of a potential exposure be reduced by absorption, which will minimise the passage of the environmental agent into the body? Personal protective equipment is an example of this control strategy. Another example is the use of an agent which lacks absorption or penetration properties. This is demonstrated in the use of non-respirable fibres in insulation material, and the use of soft b radiation (which does not penetrate clothing or the skin) in tracer research.

Receiver: One aspect of receiver control is to set a minimum contact time in which a person is exposed to the agent. In a heat stress situation an important control strategy is to limit the time in each hour that a worker spends in the hot environment. Similarly in the case of occupational strains, great emphasis is placed on task variation on an hour-to-hour basis to limit the time spent in any one postural state. For those agents having an occupational exposure standard, receiver control action is to withdraw the worker from the process when exposure or dose limits are reached. Lead workers are traditionally transferred into 'low-lead' areas if their blood lead level reaches an established limit.

Effect control seeks to identify the presence of biological dysfunction. It is particularly useful for the mechanical, ergonomic, and psychosocial factors where no quantifiable exposure standards have been established. For such factors, the detection of dysfunction in its early stages is an important mechanism for the identification of excessive exposures and/or the presence of the intolerant individual.

Hierarchy of Controls (Engineering/Administrative).

Control measures vary in their effectiveness (i.e. of minimising exposure to safety or health hazards). Those methods that are potentially the most effective are placed at the top of a preferred hierarchy of control options and used first, where practicable, in designing the hazard control system.

The preferred hierarchy of control is broadly segregated into engineering or administrative measures:

Engineering methods achieve control without the need for active participation by the workforce and, as such, are generally considered the more effective.

Administrative control methods rely on active management leadership and workforce participation to be effective.

Note: the establishment of safe work procedures, and the training and supervision of staff in such procedures, is an essential control element in all workplaces.

The hierarchy of control can thus be listed as follows:

Engineering Elimination. The hazard is eliminated or de-energised.
Substitution. Substitute a less potent hazard.

Isolation. Effective segregation of the hazard from people by physical containment, guarding, shielding, ventilation, distance, etc.

Administrative Work procedures, training and supervision.
Personal protective equipment.

Receiver control by minimising time of exposure.

Effect control by early intervention for reversible disease.

Some examples of danger/warning signs



SAFETY SIGNS

The signs and symbols you see in the workplace are to remind you or tell you about something.

Stop and Prohibition – ‘You must not ...’

Circle: **WHITE** background with **RED** borders and cross bar; black symbol



Caution – Be careful

Triangle: **YELLOW** background, black border and symbol



Mandatory – You must wear this

Circle: **BLUE** background, white symbol/ picture inside



Emergency – Information

Square or rectangle: **GREEN** or **RED** background, white symbol



Dangerous goods



Fire

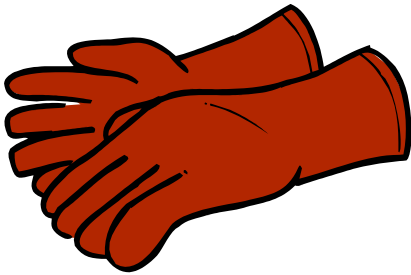


SAFETY SIGNS

Safety signs should be placed where everyone can see them – their directions are mandatory, which means people in the workplace **MUST** do what they indicate.

Types of Safety signs

Pictures only



Words only



Both pictures and words



DEVELOPING A HEALTH & SAFETY SYSTEM

Example: child care centre

The following guide outlines some key steps in developing a health and safety system in children's centres, to regularly assess, review and update policies and practices in the workplace, effectively eliminate and control hazards, and comply with the *Occupational Health and Safety Act 2000 and Regulations 2001 (NSW)*. Refer to resources listed below for specific details.

Key Steps in Risk Management

Develop a health and safety policy and program which:

- **identifies all activities in the workplace that may involve health and safety issues.**
- **clearly assigns specific WHS responsibilities and accountability at all levels.**
- **provides procedures for implementing policies, recording, and reviewing hazards.**

Set up a risk management process which involves employees in:

- Hazard Identification – **identifying all hazards which may cause injury or illness.**
- Risk Assessment – **determining the seriousness of the effects of a hazards.**
- Risk Control – **deciding on effective action to eliminate or control hazards.**

Develop a consultation process with all relevant workplace personnel:

- **Involve employees in any decisions that may effect their health and safety.**
- **Information on establishing an WHS Committee are outlined in the WHS Act.**
- **Consultation with staff and families is important for support and cooperation and this process needs to consider the needs of Culturally and Linguistically Diverse children and their families.**

Develop; implement risk control strategies – Hierarchy of Controls:

- Substitution – **replace hazardous substance, machine or task with a safe one.**
- Engineering – **modify tools or equipment, enclose equipment, and use guards.**
- Administration – **develop and implement safe procedures and training.**
- Personal Protective Equipment – **gloves, protective clothing can be important.**

Set up a health and safety information and training strategy for all employees, as part of induction and on-going staff development, inform all parents about the centres health and safety policies.

Regularly promote, monitor and review your workplace health and safety system, inform all staff and families of new policies. **Provide this information in the relevant community languages or discuss it with the Culturally and Linguistically Diverse families.**

(Reference: Health & Safety in Children's Centres Model Policies and Practices 2nd ed)