

HEALTH AND SAFETY IN THE WORKPLACE



WE CARE WITH RESPECT

Personalised Disability & Home Care Services.

Created: July 2022

Review: July 2023

TABLE OF CONTENTS

1	INTRODUCTION.....	1
2	HEALTH AND SAFETY POLICY STATEMENT	3
3	HEALTH AND SAFETY RESPONSIBILITIES	4
4	HAZARD AND RISK MANAGEMENT PROCEDURE	7
5	REPORTING OF INCIDENTS AND INJURIES.....	12
6	EMERGENCY PROCEDURES	24
7	WORKPLACE IN GENERAL	35
8	BULLYING AND HARASSMENT.....	38
9	HAZARDOUS MANUAL HANDLING – GENERAL PRINCIPLES.....	43
10	DRUGS AND ALCOHOL	46
11	HEALTH AND SAFETY ISSUES RESOLUTION.....	52
12	HAZARDOUS CHEMICALS	55
13	MOTOR VEHICLES.....	57
14	OFFICE SAFETY	66
15	CLIENT AGGRESSION	71
16	BEHAVIOUR SUPPORT PLANS.....	77
17	THREATENING SITUATIONS.....	86
18	HEALTH AND HYGIENE FOR FOOD HANDLERS	88
19	REMOTE/ISOLATED WORK.....	90
20	PERSONAL PROTECTIVE EQUIPMENT (PPE).....	92
21	ARMED ROBBERY	95
22	SHARPS - SAFE USE, HANDLING AND DISPOSAL	97
23	SAFE KNIFE WORK	99
24	SUN SAFETY	100
25	WORKING LATE.....	101

1 INTRODUCTION

1.1 HEALTH AND SAFETY IN THE WORKPLACE

Management of Hope Ability (**the organisation**) will do everything reasonably practicable to ensure you can undertake your work in a healthy and safe manner.

You also play a crucial role in achieving a safe workplace. You owe it to yourself, those close to you and your colleagues not to expose yourself to unnecessary risks at work. You can do so by protecting yourself and others from hazards and hazardous situations, by following safe work procedures and by adopting safe work practices.

1.2 PURPOSE OF HEALTH AND SAFETY HANDBOOK

Through the provision of important procedures and guidelines, this Health and Safety Handbook will help you, your colleagues and others to stay healthy and safe in the workplace.

Health and Safety legislation rightly makes health and safety everyone's responsibility. Therefore, this Health and Safety Handbook applies to all workers, including, but not limited to contractors and volunteers. Please read this Handbook carefully and ensure you comply with the guidelines set out below.

Any failure to comply with health and safety requirements is taken very seriously by the organisation. As an employee, you may be subject to disciplinary action (up to and including the termination of your employment) in the event you:

- breach the policies and/or procedures contained in this Health and Safety Handbook
- breach any other health and safety policy or procedure made known to you or
- take any action that could threaten the health or safety of yourself, your colleagues or others.

Appropriate action which may be taken in relation to other workers includes, but is not limited to, termination of their engagement with the organisation.

1.3 GENERAL

Amendments to this Health and Safety Handbook will be issued from time to time. The Health and Safety Handbook does not form part of your contract of employment or engagement agreement, unless expressly stated otherwise. However, in any event, it may be considered when interpreting your rights and obligations under the terms of your employment or engagement.

You are welcomed and encouraged to provide feedback and suggestions for improving health and safety in the workplace to management at any time

2 HEALTH AND SAFETY POLICY STATEMENT

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

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

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

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

Shashi Ray

WH&S and Compliance Operations Manager
On behalf of Hope Ability

3 HEALTH AND SAFETY RESPONSIBILITIES

3.1 INTRODUCTION

The organisation is committed to ensuring the health, safety and welfare of its workers and any other people who may be affected by its operations.

In order to ensure that health and safety is successfully managed within the organisation, the following general responsibilities have been allocated. These are to be read in conjunction with the remainder of the Health and Safety policies, which outline further health and safety responsibilities, including responsibilities relating to specific risks and situations.

3.2 ORGANISATION RESPONSIBILITIES

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

- providing and maintaining its workplaces in a healthy and safe condition and providing safe systems of work
- identifying, controlling and monitoring hazards in the workplace
- ensuring the safe use, handling, storage and transport of plant, equipment and substances
- providing and maintaining systems of work and a working environment that is healthy and safe
- providing the information, training, instruction and supervision necessary to maintain a healthy and safe workplace
- providing adequate facilities for the welfare of workers
- monitoring the workplace and the health and safety of workers to assist in preventing injury and illness.

3.3 MANAGER/SUPERVISOR RESPONSIBILITIES

Managers/supervisors are responsible for:

- maintaining a working environment that is safe and without risk to health
- implementing safe systems of work by ensuring safe products and systems are used
- maintaining the workplace, plant, machinery and substances
- implementing information, training, instruction and supervision for worker
- identifying and controlling hazards in the workplace
- ensuring all relevant health and safety laws are complied with
- using the resources provided for health and safety
- ensuring workplace rules, procedures and systems are reviewed and maintained
- promoting health and safety in the workplace
- maintaining consultative mechanisms.

3.4 WORKER RESPONSIBILITIES

As a worker, you are responsible for:

- ensuring you are not under the influence of alcohol, drugs or medication of any kind where doing so could adversely affect your ability to perform your duties safely or efficiently or be in breach of the workplace policies
- taking reasonable care for the health and safety of yourself and others who may be affected by your actions or omissions in the workplace
- co-operating with management to ensure all health and safety

obligations are complied with

- ensuring all health and safety equipment is used correctly
- using and maintaining the required Personal Protective Equipment (**PPE**)
- reporting any injuries sustained whilst working and seeking appropriate first aid
- reporting any unsafe conditions, equipment or practices to management, as soon as practicable
- rectifying minor health and safety issues where authorised and safe to do so
- co-operating with any health and safety initiative, inspection or investigation
- actively participating in any return to work program

4 HAZARD AND RISK MANAGEMENT PROCEDURE

4.1 INTRODUCTION

Hazard management is the process of identifying what may cause an injury or illness in the workplace and deciding what may happen as a result. Once hazards in the workplace have been identified and assessed, priorities can be set determining what action is to be taken to eliminate or control the hazard.

The organisation is committed to ensuring that hazards and incidents which occur in relation to the provision of services are managed consistently and effectively, and that workers can identify, manage, report and resolve hazards and incidents.

4.2 ORGANISATION RESPONSIBILITIES

4.2.1 The organisation

The organisation will:

- identify hazards by conducting regular workplace inspections, reviewing hazard reports and reviewing injury/illness records
- assess each hazard in terms of its potential to do harm
- identify and implement control measures to eliminate or reduce the risks
- monitor and review the effectiveness of the control measures.

Where necessary, the organisation will implement a safe work procedure to ensure the risk of the hazard causing harm is controlled.

4.2.2 Managing Director

The responsibilities of the Managing Director include:

- lead and implement the WHS Framework including this policy
- monitor risk management strategies, incidents and injuries

4.2.3 Management

The responsibilities of the management are:

- manage and monitor compliance with this policy
- ensure workers are provided with relevant training in incident management
- receive and respond to incident and hazard reports
- operational decision making relating to WHS management, including expenditure
- refer serious hazard and incident issues to the Managing Director

The organisation will create a “**fair workplace culture**” where it is safe to report hazards and incidents and where a systems approach to incidents and investigation is used. The organisation will:

- Provide a mechanism for reporting hazards and incidents;
- Investigate incidents to determine the cause with the objective of preventing a recurrence;
- Obtain statistical information about incidents; and
- Meet legislative requirements for reporting incidents.

All workers are required to be aware of, and are required to comply with, the documented incident management procedures as they apply within the provision of services and are supported by mandatory training and managers’ encouragement to use the system effectively. Each participant will be provided with information on incident management as part of the initial engagement process, including how incidents involving the participant are managed.

The organisation collects and reviews data on incidents in order to inform improvement activities. The organisation regularly reviews its incident management practices and processes to ensure that they are:

- Appropriate to the size of the organisation and the classes of supports it provides;

- Well documented;
- Readily accessible to all workers employed or engaged by the organisation; and
- Reflective and adaptive, with an intent to prevent incidents.

Management will monitor trends and apply or strengthen corrective and preventive measures wherever possible.

4.3 HAZARD MANAGEMENT

A hazard is something that has the potential to cause injury, illness or damage. Hazard identification aims to determine what hazards exist, so that control measures can be implemented to address the hazard before it causes any harm. The organisation will, so far as reasonably practicable, ensure that the workplace is free from hazards that could cause injury or illness to workers.

When identifying hazards, it is important to observe the task and attempt to predict what could go wrong while performing the task. In addition, the organisation will look at the hazard in the context of the whole system of work. This requires:

- looking at past accidents;
- talking to workers performing the task to find out what they consider as safety issues;
- walking around the work area to see and hear what is happening;
- reviewing any information already available, for example safety data sheets, to see what hazards have already been identified and how these are controlled; and
- thinking creatively about what could happen if something went wrong.

When assessing hazards, factors that may be contributing to the risk and the likelihood of harm will be considered, including:

- the work premises and the working environment, including its layout and condition;

- the capability, skill, experience and age of people ordinarily undertaking the work;
- the systems of work being used; and
- the range of reasonable, foreseeable changes in the working conditions and environment.

In addition, information that is already available about the hazard will be considered, including:

- any hazard information supplied with a product or substance such as safety data sheets;
- worker experience with similar risks or from incident/accident data;
- guidance materials available from government health and safety bodies/regulators in relation to particular hazards, processes or work tasks;
- industry codes of practice; and
- relevant Australian Standards.

Once a hazard has been identified, management, in consultation with workers will determine how likely it is that someone could be harmed by the hazard and how serious the injury or illness could be. If a hazard is obvious and the risk of injury or illness is high, action will be taken immediately to control the risk, even if only as an interim measure. Where a control is implemented as an interim measure, research may be conducted to assess the risk thoroughly and decide on more permanent control measures.

4.4 RISK ELIMINATION OR CONTROL

Control measures will be applied to every hazard in the workplace. The focus is eliminating hazards, or if this is not reasonably practicable, then reducing the risks to the workers. Where a risk is identified, the organisation will use the following hierarchy:

- **Level 1** controls provide the highest level of health and safety protection and are the most reliable in preventing harm. They involve eliminating the risk from the workplace;

- **Level 2** controls provide a medium level of health and safety protection, and as such will only be used if a Level 1 control is not reasonably practicable. This may involve o substituting (either wholly or partly) the hazard from the workplace with something that provides a lesser risk of isolating the hazard so that no worker is exposed to it o implementing engineering solutions that reduce the risk of the hazard impacting the workers;
- **Level 3** controls provide the lowest level of health and safety protection, and as such will only be used if a Level 1 or Level 2 control is not reasonably practicable. These controls will be used in conjunction with a level 2 control to reduce the risk. This may involve:
 - implementing administrative controls to reduce the exposure of workers to the remaining risk;
 - providing PPE in conjunction with other Level 2 and Level 3 controls.

4.5 WORKERS' RESPONSIBILITIES

As you go about your work, you may identify hazards that could present a health and safety risk to you, your colleagues and others. It is every workers responsibility to identify and report any such hazards to management.

Where you identify a hazard, if it is safe to do so, immediately take steps to prevent this hazard from posing a health or safety risk. If you cannot fix the problem, you are required to report it to management immediately and complete the **Hazard Report Form**.

In addition, where an inspection of the workplace is taking place, you should inform the person conducting the inspection of any ongoing health and safety concerns you have.

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

All workers, students, volunteers and contractors are responsible for complying with this policy

5 REPORTING OF INCIDENTS AND INJURIES

5.1 INTRODUCTION

Wherever possible, the organisation aims to prevent any incident or injury from occurring in the workplace. However, where an incident, injury or near hit/miss does occur, it is essential that proper records of these are kept. This ensures that appropriate records are available should the need arise, for example in support of a worker's compensation claim. It will also assist the organisation to identify and address any ongoing health and safety concerns or unsafe work practices.

5.2 ORGANISATION RESPONSIBILITIES

The organisation will provide and maintain a workplace register of injuries. Management must ensure the details of any workplace injury/illness are recorded on this register.

Where a worker is suffering an injury/illness at work and requires medical attention, management will arrange this. In emergency cases, an ambulance will be called to attend the location. If it is not an emergency, management will organise for the affected worker to be transported to a medical practitioner/centre as soon as possible, or for on-site first aid treatment to be rendered.

Where necessary, management will undertake an investigation into any work related injury/illness within 24 hours. The purpose of any such investigation will be to determine the cause/s of the injury/illness (if possible) and recommend measures (if any) to be implemented to eliminate or reduce the probability of re-occurrence.

5.3 WORKER RESPONSIBILITIES

Where any workplace incident, injury/illness or near hit/miss occurs, you must notify management as soon as possible and complete an **Incident Report Form**.

You are also responsible for entering the details of any minor workplace injury/illness that requires First Aid treatment on the **First Aid Treatment Log/Register of Injuries Form**.

For any workplace injury/illness, you are required to undergo medical treatment as necessary. Where the need for treatment is identified whilst at work,

management will arrange this treatment. However, where your injury/illness worsens whilst away from the workplace, or over a period of time, you are required to seek medical attention at the earliest opportunity.

If you have suffered any workplace injury/illness that required medical treatment, you must provide a certificate from your treating doctor stating your fitness for duties upon your return to work.

5.4 COMPLETING AN INCIDENT REPORT FORM

- Open up document provided
- Fill with details, Sign & Date
- Provide report to your coordinator & supervisor

5.5 INCIDENT MANAGEMENT

5.5.1 Induction and Staff Training

All staff must be trained in the organisation's incident management system, understand the procedures they must follow for reporting all management who will report to external bodies as and when required.

The organisation promotes a culture of open reporting and ensures that all workers understand that they are supported from induction and throughout their employment period to report any incident or alleged incident, and that there will be no negative consequences for doing so.

5.5.2 Incident Identification

If workers observe an incident, or a participant or member of the public notifies workers about an incident that does or could cause permanent or temporary detriment to a participant, workers or other stakeholder, then workers must report the incident to their manager.

Workers and participants will be protected against any adverse actions as a result of reporting or alleging that an incident has occurred.

The organisation's incident management system addresses the following:

- Acts, omissions, events or circumstances that occur in connection

with providing NDIS supports or services to a person with disability and have, or could have, caused harm to the person with disability;

- Acts by a person with disability that occur in connection with providing NDIS supports or services to the person with disability and which have caused serious harm, or a risk of serious harm, to another person; and
- Reportable incidents that have or are alleged to have occurred in connection with providing NDIS supports or services to a person with disability.

An incident is an event that has caused or has the potential to cause injury, illness or damage. Incidents include but are not limited to:

- Medication errors
- Behavioral risk
- Critical incident
- Equipment failure
- Medical emergency
- Vehicle
- Injuries to workers, participants, visitors resulting from accidents or assault
- Missing person
- Lost or stolen records
- Physical abuse, unlawful physical contact or physical assault
- Sexual contact, sexual assault or sexual misconduct
- Psychological, emotional or verbal abuse
- Domestic violence
- Neglect

- Financial abuse
- Missing persons

5.5.3 Immediate Response

Where possible, an incident will first be addressed by the organisation's personnel responsible and qualified to effectively manage the incident as it takes place.

All incidents involving workers, visitors or participants are to be documented at the time of the incident, or within a 24-hour period using the Incident and Hazard Form in an objective and legible manner sufficient to take all appropriate follow-up action as required. All forms must be completed in full of the following details;

- Description of the incident;
- The impact on, or harm caused to, any person with disability;
- Note as to whether the incident is reportable, if known;
- The time, date and place at which the incident occurred or if not known, the time, date and place at which the incident was first identified;
- The names and contact details of the persons involved in the incident and any witnesses details
- The name and contact details of the person making the record of the incident or alleged incident;
- Corrective actions;
- Names and contact of management personnel who were notified of the incident;
- A diagram of injuries sustained (if any);
- Type of incident (Near Miss, behavioural Risk, Assault, Abuse etc.);
- If medications were taken, missed, refused or taken incorrectly on the day of the incident.

In the event of an incident where the worker is unable to complete the Incident and Hazard Form within their shift time, for example they are off-site or travelling, they are to notify their supervisor via phone of the incident and the supervisor is to complete the Incident and Hazard Form.

Workers will always respond to incidents by ensuring that they protect themselves first and respond to the incident according to their training. Action must be taken to prevent persons from harm. Workers must understand that they can contact emergency services if the situation warrants.

5.5.4 First Aid and Medical Treatment

If an injury is sustained, first aid is to be provided from a suitably qualified first aider, or where such a person is not available, from a person capable and willing to do so. The following list of injuries and symptoms, although not exhaustive, provides guidance on when to refer to medical treatment:

- Heart attack and stroke
- Epilepsy and seizures
- Hyperglycaemia/ hypoglycaemia
- Burns larger than 20 cent pieces
- Lacerations if bleeding is severe or persistent
- Electrical burn or shock
- Soft tissue injuries, e.g. sprains and strains
- Dislocations and fractures
- Head, neck and spinal injuries
- Facial injuries
- Poisoning
- Bites and stings

- Loss of consciousness.

In some circumstances the need for medical treatment may not be obvious; however, must be sought. Examples include:

- after an electric shock: any person who has received an electric shock, no matter how minor it may seem, as there may be delayed affects such as an irregular or lower heart rate.
- After recovering from unconsciousness: any person who has lost consciousness, even for a small amount of time.

Medical treatment can be obtained by contacting emergency services by phone on 000. In some cases, the person may require non-emergency medical treatment and may be transported to a medical centre by another worker. For example, a swollen ankle may be treated more promptly at a medical centre as opposed to calling an ambulance.

This is decided on a case-by-case basis in consultation with the injured person and the person providing transport. Note that workers are not obliged to transport other workers to hospital or other medical services. However, workers should facilitate access to hospital or other medical services where necessary. With consent from an injured participant, the organisation may contact the person's emergency contact to inform them of the incident. Approval from legal guardians must be sought where required for applying treatment.

5.5.5 Supporting Participants

Throughout the incident management process, from initial response through to review, participants will be supported by the organisation through means of:

- Reassurance if the participant reported the incident;
- Trauma and counselling services where required;
- Changes to regular supports if necessary;
- Clear, ongoing communication regarding the progress and outcomes of the investigation.

Participants/Guardians will be involved in the management and resolution of the incident where appropriate. If it is determined that the incident is serious management are responsible for notifying families, guardians and advocates of

the participant. Workers must advise participants of advocacy services should they be needed.

5.6 5.5.6 Assessment and Investigation

The Incident and Hazard Form is provided to the immediate supervisor or person responsible for the work area who will determine if any authority is to be informed and take appropriate action if required.

The member of the management team will complete the Risk Assessment and Actions section of the form and investigate the incident using the risk review framework outlined. This should be done within one week of the hazard, accident or incident being reported.

Investigation involves determining the severity of an incident, rating the current or potential risks and identify any corrective measures required. It should be done where practicable in consultation with workers. The completed report should then be forwarded to the Managing Director and WHS Representative to review and, if necessary, revise recommended actions and effectiveness of hazard control.

Whenever an investigation into an incident is conducted, it should establish:

- The cause of an incident
- The effect of an incident
- Any organisational processes that contributed to or did not function in preventing an incident
- Changes the organisation can make in order to prevent further incidents from occurring.

Incidents involving criminal allegations will be reported to law enforcement, who will receive full support of the organisation in their investigations. Information related to incident investigations, including records of phone conversations, emails, documents and, where possible, records of face to face interviews will be recorded and kept in strict confidence.

5.5.7 Notification Procedures

Authorised workers must report incidents to various agencies and persons based on the following priority system:

- workers must report all incidents internally to their supervisor or a manager
- If it is determined that the incident is serious management are responsible for notifying families, guardians and advocates of the participant.
- For serious incidents workers must first contact emergency services

When notifying the NDIS Commission of a reportable incident, authorised personnel will follow the set processes defined in the Reportable Incidents Policy. The NDIS Commission will determine whether action is required such as remedial action, carrying out an internal investigation or engaging an expert to conduct an investigation. authorised workers must report serious incidents (including allegations) that occur in connection with the provision of supports and services to the NDIS Commission including:

- the death of an NDIS participant
- serious injury of an NDIS participant
- abuse or neglect of an NDIS participant
- unlawful sexual or physical contact with, or assault of, an NDIS participant
- sexual misconduct committed against, or in the presence of, an NDIS participant, including grooming of the NDIS participant for sexual activity
- the unauthorised use of a restrictive practice in relation to an NDIS participant.

Most reportable incidents must be:

- notified to the NDIS Commission within 24 hours, and
- followed up with a detailed report about the incident and actions taken

in response within 5 business days.

Where a worker is seriously injured that necessitate worker's compensation the organisatoin must notify its compensation insurer within three days of receiving a staff compensation claim form signed by the employee providing details of the serious injury and incident. This is actioned in accordance with the Work Health and Safety (National Uniform Legislation) Act, and the Work Health and Safety (National Uniform Legislation) Regulations.

5.5.8 Incident Resolution

The organisation will take corrective action in the following circumstances:

- Where an incident may have been prevented (or the severity lessened) by some action (or inaction) by the organisation
- Where there is an ongoing risk to people with disability
- Where action by the organisation may prevent or minimise the risk of a reoccurrence.

The organisation will inform and involve participants, family and advocates in the process of incident management and resolution. The organisation may specify that, in the event of an incident, it will ask the impacted person to provide feedback and input into assessments, investigations and any corrective actions proposed or taken by the organisation.

The Managing Director and managers may seek expert advice and engage experts\consultants or specialists where a major incident is occurring or has occurred.

Based on the assessment, the organisation may undertake remedial action proportionate to the severity of the incident, including but not limited to:

- Providing an apology
- Disciplinary action
- Financial compensation

Effective and timely debriefing must be overseen by the Managing Director who will ensure all persons involved are informed of all outcomes and counselled

where required.

The organisation provides access to an Employee Assistance Program who can provide critical incident debriefing and other support and assistance to workers involved in an incident

5.5.9 Incident Register and Review

The organisation keeps an accurate register of all incidents that occur in relation to the provision of services. Each entry in the register contains:

- A description of the incident
- A determination of whether or not the incident is a Reportable Incident
- Where possible, time, date and location
- Names of all the people involved, including witnesses
- Details of the incident assessment
- Actions taken in regard to the incident
- Must state if medications were taken on that day
- Incident level
- If any authorities were contacted (if Police – Promise number required)
- Who the report was completed by?
- Who of the management team was notified of the incident?
- Date that management reviewed the report
- Response status
- Date that the incident investigation is complete and closed

A formal review will be undertaken that determines and records:

- Whether the incident could have been prevented
- How well the incident was managed and resolved
- What, if any, regulatory action needs to be undertaken to prevent further similar incidents from occurring.
- What, if any, regulatory action needs to be undertaken to minimise the impact of an incident.
- Whether other persons or bodies need to be notified of the incident.
- When preventive action is required and the nature of that action

The collection of statistical and other information will allow the organisation to review issues raised by occurrence of incidents, identify and address systemic issues. Preventive actions undertaken may include:

- conducting regular workplace inspections to identify hazards
- identifying and assessing hazards on a continuing and ongoing basis
- identifying and correcting non-conformance to policy plans and procedures
- implementing formal systems to monitor environmental conditions and worker health
- controlling the storage and handling of hazardous substances, and
- assessing products prior to purchasing to identify potential risks.

The organisation will demonstrate continuous improvement in incident management by:

- regularly reviewing incident management policies and practices
- reviewing causes to identify patterns of behaviour or systemic issues
- reviewing the handling and outcomes of incidents

- incorporating feedback where sought and/or received
- re-training or further training of workers
- changes to the environment in which supports, or services are provided.
- changes to the way in which supports, or services are provided.

The organisation will review incident information periodically to understand trends, address systemic issues and inform improvement activities. Records will be kept for a minimum of seven years.

6 EMERGENCY PROCEDURES

6.1 INTRODUCTION

The health and safety of the workplace and workers may be impacted in an emergency situation, for example in the event of a fire.

Whilst the organisation will take all necessary precautions to prevent an emergency situation arising, in the unlikely event that an emergency situation does arise, the procedures below are to be followed to ensure the health and safety risks associated with such situations are minimised.

You must ensure that you are aware of our fire and evacuation procedures and the action you should take in the event of such an emergency.

Disasters and emergencies in the workplace can affect people physically and psychologically and disrupt program delivery continuity. The organisation identifies, prevents and manages disaster and emergency situations within its sphere of responsibility and influence, until the arrival of appropriate emergency services.

A range of disaster and emergency situations may occur on the premises with the potential to impact on safety of workers, Management, volunteers, students, visitors and service users including:

- Fire
- gas or water leak
- vehicle accident
- chemical, radiation or biological spill
- natural disaster (bushfire, cyclone, storm or earthquake)
- bomb threat • civil; disorder or illegal occupancy
- hostage or terrorist situation physical (including sexual) assault
- The organisation initiates recovery and aims to restore operations as quickly as possible.

6.2 DEFINITIONS

6.2.1 Emergency

Refers to an unplanned or imminent event that affects or threatens the health, safety or welfare of people, property and infrastructure, and which requires a significant and coordinated response. The defining characteristic of an emergency event or situation is that usual resources are overwhelmed or have the potential to be overwhelmed.

6.2.2 Emergencies

These may be a specific event with a clear beginning, end and recovery process, or a situation that develops over time and where the implications are gradual rather than immediate.

6.2.3 Disasters

These are a condition or situation of significant destruction, disruption and/or distress to a community.

6.2.4 Emergency Management

This includes the coordination of an emergency response and management of recovery. The aim of emergency management is to minimise physical and psychological impacts on all parties and to minimise damage to assets, operations, reputation and workers productivity.

6.3 RISK ASSESSMENT

The organisation uses risk assessment processes to identify and control barriers to effective emergency management. Workers, Management, students, volunteers, and service users are expected to behave in a way to minimise the risk of emergencies occurring.

6.3.1 PREPAREDNESS

The list of potential emergency situations and disaster and emergency plans are

reviewed annually. The organisation will also review these in the event of a disaster or emergency situation.

All Management members, workers, volunteers and students are trained in disaster and emergency response procedures at induction and annually to ensure they are familiar with implementing disaster and emergency management plans.

All workers, managers, students and volunteers familiarise themselves with emergency evacuation procedures, including their responsibilities and the emergency evacuation assembly point. Emergency evacuation drills are undertaken in all sites quarterly under the instruction of the business manager. All fire safety activities undertaken by the organisation are recorded and reviewed to identify gaps in training, knowledge, equipment or processes. Fire activities include, but are not limited to, fire safety training, drills and exercises, records of maintenance and inventories of equipment kept.

6.3.2 RESPONSE

When a disaster or emergency situation arises, the primary aim of the response is to ensure the safety of all people on the premises, preserve life and protect property.

- Procedures for responding to fire and bomb threats are outlined in the emergency management policy.
- Where evacuation is warranted, refer to guidelines outlined in the Emergency Management Policy and the Emergency Response Plan

6.4 RESPONSIBILITIES

6.4.1 MANAGING DIRECTOR/MANAGERS

- monitor WHS risk management strategies, incidents and injuries
-
- lead and implement WHS framework including this procedure
-
- ensure workers are provided with relevant training in disaster and emergency management
-
- receive and respond to emergency management reports

6.4.2 WORKERS/VOLUNTEERS/CONTRACTORS/STUDENTS

- contribute to the development of disaster and emergency procedure/plans and comply with them

6.5 PROCEDURES IN CASE OF FIRE

If you discover a fire:

- alert other people in the immediate vicinity to the fire
- activate any fire alarms and call '000'
- if safe, try to put out or contain the fire, or otherwise evacuate the premises in accordance with the workplace emergency evacuation procedures.

At no time should you risk personal safety in an effort to protect property or others.

The R.A.C.E acronym has been adopted as the standard emergency message and response for all workers, as it is applicable in many emergency situations.

- R → RESCUE: Any persons in immediate danger if safe to do so
- A → ALARM: Raise the alarm/alert others, contact emergency services by telephoning. 000, in case of fire activate alarm
- C → CONTAIN: Close doors to contain fire and secure the area
- E → EXTINGUISH / EVACUATE: Attempt to extinguish fire only if trained and if safe to do so. Evacuate premises.

In the event of a fire, fire safety equipment is to be used to extinguish the fire if safe to do so. If it is unsafe to use fire safety equipment, emergency evacuation procedures are implemented.

The fire warden or in their absence a collectively agreed other lead person ensures that emergency services are contacted by phoning 000. All fires should be attended by fire emergency services, regardless of the size, extent or damage of the fire as there may be further risks which emergency services can identify and assess.

6.6 RAISING THE ALARM

A worker who discovers an emergency (i.e. fire, gas leak etc.) should:

- Rescue any person in immediate danger if it is safe to do so
- Do not attempt to combat the fire – this should be left to professionally trained people

Contact the Fire Warden or the organisation's Managing Director and ask them to:

- Activate the alarm system
- Call emergency service by telephoning 000
- Advise the fire warden
- Evacuate to the assembly point

6.7 EVACUATION

Where an emergency alert or alarm is given that requires evacuation of the building (i.e. fire, explosion, bomb threat, natural disaster), all persons are to leave the organisation premises in a prompt and calm manner via the emergency stairs. In an emergency evacuation, do not use building lifts.

The Fire Warden is responsible for providing direction and facilitating safe evacuation of all persons. The Fire Warden must collect the Visitor Register/appointment book and ensure all persons evacuate the building and meet at the designated emergency assembly site. Where the Fire Warden is not available, a senior staff member or other suitable person is to identify themselves as the person responsible for leading the emergency response.

All persons are to follow instructions of the identified emergency response leader and emergency services personnel.

Mobility impaired persons are supported by other persons to safely evacuate the premises. Mobility impaired persons who are in immediate danger and cannot safely evacuate the premises are moved to a safe place. A safe place may be inside a fire isolated fire stair, or into another section of the building, closing doors between the person and the fire, however still on an exit route.

Workers are responsible for ensuring that visitors are escorted to the emergency assembly site.

If a person is trapped in the building, no person is to re-enter the premises unless

it is completely safe to do so, and permission is given by the Fire Department. If it is unsafe to re-enter the premises, inform emergency services on their arrival for them to assess and respond to the situation. No person is to re-enter the premises while the fire alarm is sounding or until clearance is given by emergency services.

6.8 EVACUATION PROCEDURES FOR FIRE WARDENS

When notified of a fire, the Fire Warden(s) should ascertain whether the person who discovered the fire has called the Fire Brigade. If not, the Fire Warden(s), depending on the reported seriousness of the situation, should do so whilst commencing the evacuation of the building.

The evacuation of the building is achieved by firstly notifying any other Fire Warden(s) of the situation. The Fire Warden(s) then quickly walk around the building and instruct all people present to leave the building immediately and move to the assembly point. Workers should not be offered any explanations. Care should be taken to notify workers in areas not part of the main building (e.g. basements, toilets, storage areas). The Fire Warden(s) should ensure that every room, including the toilets have been checked for occupants. The doors of each room should be closed once vacated. To ensure that Fire Warden(s) do not unnecessarily risk their own lives or the lives of others, the following procedures must be adhered to:

- any person refusing to leave the building is to be left in the building
- if a person has a disability that is likely to slow the exit of remaining people from the building, the disabled person must be the last to leave the building with the fire warden(s)
- if it is difficult to reach a person without risking a life, then that person must be left in the building for the Fire Brigade to rescue
- Fire Warden(s) should be the last to leave the building and move to the Assembly Point. At the Assembly Point a list of names will be taken and workers will be asked to account for any missing persons
- the decision to switch off the electricity supply should be taken by emergency services

6.9 EMERGENCY EVACUATION

If an emergency evacuation is required:

- follow instructions given to you by emergency services personnel and any designated evacuation staff (e.g. fire wardens)
- leave the building via the closest designated exit
- proceed to the designated assembly area.

During an emergency evacuation, you must remain calm and:

- do not run, crowd exits, or take your belongings with you
- do not return to the building until it is safe to do so.

6.10 MOTOR VEHICLE ACCIDENTS

If you are involved in a motor vehicle accident in the course of your duties:

- do not exit the vehicle unless it is safe to do so
- call the relevant emergency services (if necessary)
- seek first aid if you are injured or render assistance to any injured person if it is safe to do so
- set up a warning system for any approaching vehicles to prevent the risk of further accidents (if possible)
- record the registration details of the vehicles involved, as well as the name and licence details of the driver/s
- record the names and addresses of as many witnesses as possible, and take photos of the accident scene and damage sustained to any property
- give your name and address, the registration number of the vehicle and the name of the insurance company to any person having reasonable grounds for requiring such information. Do not give any further information.

You must notify management of any accidents occurring in the course of your duties as soon as practicable and must complete an **Incident Report Form**. You are responsible for entering the details of any injury on the **First Aid Treatment Log/Register** of Injuries Form in accordance with the Reporting of Incidents and Injuries policy above.

The organisation must be informed of any and all incidents involving organisation vehicles no matter how minor within 24 hours.

In addition, in the case of an incident involving injury to another person, you are responsible for notifying the police of the occurrence. For major incidents, this must be reported to the police within 24 hours.

6.11 FIRST AID

You are responsible for:

- knowing the identity of any first aid officers in the workplace and the location of the nearest first aid kit/s
- seeking first aid where necessary, or complying with any management direction to seek first aid in respect of a work related injury/illness
- informing management of any injury and recording any first aid treatment in the **First Aid Treatment Log/Register of Injuries**
- informing management if the first aid equipment is running low or has run out.

6.12 CYCLONE EMERGENCY PLAN

The organisation will maintain a cyclone emergency plan that defines a comprehensive cyclone management approach in the event of such a disaster to facilitate and effective resumption of work status for the business. The primary focus during a cyclone is to maintain the safety of participants and workers through assigned responsibilities and clear instruction.

The organisation management will monitor BOM alerts and warnings to determine actions to be taken in a timely manner. Management will ensure workers are responsible for maintaining house preparedness in accordance with

plan instructions to avoid unnecessary injury and damage. A list of contact numbers will be maintained for communication purposes and worksites will be provided with maintained emergency kits to sustain support during the disaster.

6.13 EMERGENCY EXITS

Emergency exits will be clearly labelled, and all workers and volunteers are required to familiarise themselves with the Evacuation Plan displayed on the walls.

6.14 EVACUATION ASSEMBLY SITE

Following evacuation from the organisation premises, all persons are to assemble at the designated emergency assembly site. The emergency assembly site is clearly labelled on the Evacuation Plan. All persons are to remain at the designated emergency assembly site until given clearance to return to the organisation's premises or other directions by the Fire Warden and emergency services personnel.

6.15 EMERGENCY EVACUATION DRILLS

The Fire Warden conducts emergency evacuation drills at a minimum of once per year. All persons in the premises at the time of the drill are to respond as if in a true emergency evacuation. A record of the emergency evacuation drill is made using the Emergency Evacuation Report, which identifies details of the evacuation and where further safety actions are required. The Emergency Evacuation Report is also used to record evacuation details following a true emergency evacuation. Emergency evacuation reports are filed in the Workplace Health and Safety (WHS) file and discussed at the next scheduled staff meeting.

6.16 EMERGENCY MANAGEMENT

The organisation recognises the need to have emergency control structure and directions, which will prevent injury to service users, workers, volunteers, visitors, students, contractors and neighbouring people/premises in the event of an emergency.

The organisation applies the following legislation to their policies and procedures:

- Work Health and Safety Act 2011 (Cth)
- Work Health and Safety Regulations 2011 (Cth)

A workplace emergency is an unforeseen situation that threatens workers, service users or the public. An emergency may be natural, or manmade and may disrupt or shut down operations. Emergencies include events such as:

- fire or explosions
- serious injuries, bites, poisonings or other medical emergencies
- emergency as a result of environmental conditions (e.g., heat, cold, wet, snow, wind, lightning, bushfires, floods, high seas and cyclones)
- hazardous substances and chemical spills or gas leaks, and
- bomb threats, robberies, shootings, hostage situations or terrorism

The organisation will have a nominated fire warden to assist in the clearing of a specified area in the event of an emergency evacuation. The term supervisor will be used to include managing director and the organisation's coordinators as well as supervisors.

6.17 EMERGENCY RESPONSE REVIEW

Following an emergency situation, the Fire Warden and Business Manager are to review the emergency event with the view of identifying and implementing improvements in overall workplace health and safety and emergency management.

6.18 RESPONSIBILITIES

6.18.1 Managing Director and Managers

- monitor WHS risk management strategies, incidents and injuries.
-
- ensure workers are provided with relevant training in emergency management
-
- receive and respond to Emergency management reports

6.18.2 Workers, volunteers, contractors and students

The role of workers, volunteers, contractors and students is to comply with Emergency Management policy and procedures.

7 WORKPLACE IN GENERAL

7.1 INTRODUCTION

Along with the specific guidelines and procedures outlined throughout the Health and Safety policies, there are some simple day to day measures that can be adopted by management and workers alike to reduce the risks to health and safety in the workplace.

7.2 GENERAL

Management and workers alike must ensure:

- no plant, equipment or safety device (including PPE) is altered or removed from the workplace without express management authority
- all safety signs, policies and procedures are complied with in full
- illegal drugs are not brought into, or used, in the workplace
- persons affected by alcohol or drugs are not permitted to access, or remain at, the workplace.

You must ensure that you wear and use any personal protective equipment and clothing issued for your protection at all appropriate times.

7.3 HOUSEKEEPING

Failure to ensure that the workplace is kept neat and tidy may create unnecessary hazards. Management and workers alike are responsible for maintaining a neat and tidy workplace. This involves:

- ensuring emergency exits, thoroughfares and pedestrian access points are not obstructed
- ensuring aisles and work areas are clear and free from obstruction at all times so as not to cause additional hazards including slip, trip, or fall hazards
- placing rubbish in the bins provided

- ensuring all work, communal areas and facilities are kept clean and tidy at all times.

7.4 HYGIENE

Due to the nature of worker's positions and working with people, workers are expected to maintain a high level of personal hygiene which includes presenting in clean and laundered clothing, reapplying deodorant throughout the working day/night and washing hands throughout the day as necessary.

Any exposed cut or burn must be covered with a first-aid dressing.

If you are suffering from an infectious or contagious disease or illness such as rubella or hepatitis you must not enter the workplace without clearance from your own doctor.

Contact with any person suffering from an infectious or contagious disease must be reported before commencing work.

7.5 SHARPS

To reduce the risk of injury and infection from sharps you are responsible for:

- wearing appropriate PPE as provided to you to prevent sharps injuries, eg disposable gloves or puncture-resistant gloves, sturdy footwear, protective clothing and safety eyewear
- disposing of sharps in the designated receptacle
- reporting all skin penetrating injury incidents
- maintaining good housekeeping practices so discarded sharps will not be concealed.
- **Do not** collect sharps involved in a skin penetrating injury for testing as the reliability of testing is unclear and the sharp may be hazardous to people handling it.

7.6 CONTAMINATION

To reduce the risk of infection from blood, or other bodily fluids, you are responsible for:

- disposing of waste contaminated by blood, hair, or bodily fluids by placing in a plastic bag and tying off or otherwise securing before placing in general waste
- ensuring that disinfection and cleaning regimes are undertaken regularly and as instructed by management
- informing management and completing the Incident and Injury Report Form if you believe you have been in contact with bloods, bodily fluids or other sources of possible contamination.

7.7 FITNESS FOR WORK

Every worker has the responsibility to present to the workplace fit for duty. This means being free of the effects of fatigue and drugs (illicit, prescribed and over-the-counter medications) and alcohol. If any individual is concerned in any way about a perceived safety risk due to their own or any of their colleague's fitness for duty, they have a responsibility to inform their manager.

If you arrive for work and, in the organisation's opinion, you are not fit to work, the organisation reserves the right to exercise its duty of care, particularly where the organisation believes that you may not be able to undertake your duties in a safe manner or may pose a safety risk to others. The organisation may remove you from the workplace for the remainder of the day with or without pay, conduct an investigation and, dependent on the circumstances, if you are an employee you may be liable to disciplinary action.

You may be required to provide a certificate from your treating doctor stating your fitness for duties before being permitted to return to work.

8 BULLYING AND HARASSMENT

8.1 INTRODUCTION

The organisation is committed to the provision of a fair, healthy and safe workplace in which everyone is treated with dignity and respect and in which no individual or group feels bullied, threatened or intimidated.

Bullying or harassment in any form is unacceptable behaviour and will not be permitted or condoned.

We recognise that bullying and harassment can exist in the workplace, as well as outside, and that this can seriously affect workers' working lives by detracting from a productive working environment and can impact on the health, confidence, morale and performance of those affected by it, including anyone who witnesses or has knowledge of the unwanted or unacceptable behaviour.

8.2 HARASSMENT

The intention of these procedures is to inform workers of the type of behaviour that is unacceptable and to provide procedural guidance.

We recognise that we have a duty to implement this policy and all workers are expected to comply with it.

Harassment is any unwanted physical, verbal or non-verbal conduct based on grounds of age, disability, gender identity, marriage and civil partnership, pregnancy or maternity, race, religion or belief, sex or sexual orientation which affects the dignity of anyone at work or creates an intimidating, hostile, degrading, humiliating or offensive environment.

A single incident of unwanted or offensive behaviour can amount to harassment.

Harassment can take many forms and individuals may not always realise that their behaviour constitutes harassment. Examples of harassment include:

- insensitive jokes and pranks
- lewd or abusive comments about appearance
- deliberate exclusion from conversations

- displaying abusive or offensive writing or material
- unwelcome touching
- abusive, threatening or insulting words or behaviour.

These examples are not exhaustive and disciplinary action at the appropriate level will be taken against workers committing any form of harassment. Appropriate action in relation to an employee will include disciplinary action in accordance with the organisation's disciplinary and disciplinary termination procedure. For other workers, appropriate action may include termination of their engagement with the organisation.

8.3 BULLYING

Bullying is repeated, offensive, abusive, intimidating, insulting or unreasonable behaviour directed towards an individual or a group, which makes the recipient(s) feel threatened, humiliated or vulnerable. Note single incidents of bullying will not be tolerated.

Bullying can occur in the workplace and outside of the workplace at events connected to the workplace, such as social functions or business trips.

Bullying can be a form of harassment and can cause an individual to suffer negative physical and mental effects.

Bullying can take the form of physical, verbal and non-verbal conduct. As with harassment, there are many examples of bullying, which can include:

- abusive, insulting or offensive language or comments
- unjustified criticism or complaints
- physical or emotional threats
- deliberate exclusion from workplace activities
- the spreading of misinformation or malicious rumours
- the denial of access to information, supervision or resources such that it has a detrimental impact on the individual or group.

These examples are not exhaustive and disciplinary action at the appropriate level will be taken against workers committing any form of bullying. Appropriate action in relation to an employee will include disciplinary action in accordance with the organisation's disciplinary and disciplinary termination procedure. For other workers, appropriate action may include termination of their engagement with the organisation.

8.4 REASONABLE MANAGEMENT ACTION TAKEN IN A REASONABLE WAY

It is reasonable for managers and supervisors to allocate work and to give fair and reasonable feedback on a worker's performance. These actions are not considered to be workplace bullying or harassment if they are carried out lawfully and in a reasonable manner, taking the particular circumstances into account.

Examples of reasonable management action can include but are not limited to:

- setting reasonable performance goals, standards and deadlines
- rostering and allocating working hours where the requirements are reasonable
- transferring a worker for operational reasons
- deciding not to select a worker for promotion where a reasonable process is followed
- informing a worker of their unsatisfactory work performance
- meeting with a worker to discuss performance and/or conduct informing a worker of their unreasonable or inappropriate behaviour in an objective and confidential way
- implementing organisational changes or restructuring
- taking disciplinary action including suspension or termination of employment.

8.5 BULLYING AND HARASSMENT COMPLAINT PROCEDURES

8.5.1 Informal complaint

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

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

8.5.2 Formal complaint

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

- the name of the alleged bully or harasser
- the nature of the alleged incident of bullying or harassment
- the dates and times when the alleged incident of bullying or harassment occurred
- the names of any witnesses
- any action already taken by you to stop the alleged bullying or harassment.

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

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

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

8.6 GENERAL NOTES

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

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

9 HAZARDOUS MANUAL HANDLING – GENERAL PRINCIPLES

9.1 INTRODUCTION

Manual handling involves much more than lifting and moving loads. It applies to any activity that causes forces and loads to be exerted on our bodies. Lifting, bending, twisting, throwing and catching, pushing and pulling, static and awkward postures all exert forces on our muscles and skeleton and adding loads increases the amount of the forces we bear.

9.2 ORGANISATION'S RESPONSIBILITIES

The organisation is responsible for ensuring:

- any tasks requiring physical exertion are assessed and as far as practicable manual handling risks are eliminated or minimised
- task assessment includes consideration of the workflow and environment to remove unnecessary/double material handling and any other obstructions that increase risk
- good housekeeping and appropriate storage keeping heavy, bulky and awkward objects as close as possible to waist height
- organising tasks to ensure rotation of duties whenever possible and regular breaks to reduce physical fatigue and stresses, especially repetitive actions and static postures
- mechanical aids are supplied when safe manual handling techniques are inadequate to reduce the risks associated with any task
- adequate time is allowed for workers to warm up before commencing heavy manual work
- information, instruction and training are provided to ensure workers understand safe manual handling techniques whether these are operational or office based workers
- consultation with workers about manual handling tasks and any activity that exerts stresses on our bodies, is provided to ensure the

risks are understood and considered in the risk assessment process and

- hazard reporting identifies any symptoms of muscle and joint fatigue and/or pain associated with work tasks.

9.3 WORKER RESPONSIBILITIES

When performing lifting and carrying you are responsible for:

- performing warm up exercises before commencing the task, especially at the commencement of your shift and after breaks
- always assessing a load, the distance to be carried and whether a mechanical aid should be used
- referring to the weight information on product packaging to assess the load and also consider if it is bulky or awkward
- whenever possible breakdown the load or get assistance for a team lift
- when performing a team lift try to get co-workers that are a similar height and strength and communicate how the lift will be done
- always checking your destination point and ensuring a clear path of travel
- placing feet shoulder width apart, as you bend at the knees move your bottom up and out behind as you lower yourself, this acts as a fulcrum to counter balance the weight of the load
- ensuring there are suitable grip points before lifting
- grasping the load securely with both hands, keep it evenly balanced and close to your body while tightening your abdominal muscles
- raising your head in the direction you are moving, lift the load to waist height by lifting your bottom and straightening your knees in one smooth action and
- when putting down a load apply the same principles for lifting in reverse.

- When performing tasks that involve manual handling and exertion you are responsible for:
- turning by moving your feet, do not twist your body and never twist and lift at the same time
- pushing a load rather than pulling, this recruits the stronger muscles in your legs rather than straining the lower back
- when moving goods up or down stairs use a lift or conveyor if you can. If you are carrying anything ensure a clear vision and path and ensure that you are able to grip a handrail at all times
- varying tasks and postures and taking regular breaks including when seated, so that you do not maintain static postures as this can fatigue muscles and connective tissue, often referred to as repetitive strain or over use injury
- storing heavy, bulky and awkward objects as close as possible to waist height. Vary postures and tasks to ensure work is not performed above shoulder height or below knee height for prolonged periods and not lifting heavy, bulky or awkward objects from above shoulder height, use a mechanical aid or appropriate ladder/steps.

10 DRUGS AND ALCOHOL

10.1 INTRODUCTION

The use of drugs or alcohol jeopardises a safe workplace. The organisation recognises alcohol and other drug dependencies as treatable conditions and encourages those persons who may be subject to such dependency to seek assistance from appropriate organisations or support groups.

The organisation has a zero-tolerance approach towards the presence of illicit drugs within the workplace. This includes the discovery of a worker with possession of an illicit substance, and any testing which results in a non-negative reading of a substance within a worker's system above the detectable limit while at work.

Employees are expected to maintain the highest professional standards when conducting Company business. The consumption of, or being under the influence of, alcohol during working hours, or the distribution, possession or use of illegal drugs is detrimental to this goal.

Alcohol and substance abuse are a danger to the users, fellow employees and the general public. Such abuse impairs the health and judgment of the user and is a threat to the safety of others.

The Company is committed to providing an alcohol and drug free environment for all employees at all locations. Accordingly, all employees acknowledge that no alcohol is to be consumed or illegal drugs used by employees during their working hours, including meal breaks.

10.2 GUIDELINES

10.2.1 Alcohol

Reporting to work or working under the influence of alcohol is prohibited. Unauthorised consumption of alcohol during working hours or on Company premises is prohibited. While it is a personal decision to lawfully use alcohol, it is essential that such use does not interfere with the official and safe performance of the individual's duties, nor reduce his or her dependability, nor reflect on the employee or the Company.

10.2.2 Drugs

The manufacture, distribution, possession, disposition, sale, purchase of or use of illegal drugs by Company employees during working hours is prohibited. An employee may not report to work, or perform work, while under the influence of any illegal drug, or if their judgment, coordination, or performance could reasonably become impaired during work due to the use of an illegal drug or substance.

10.2.3 Testing

Where there is reasonable suspicion that an employee is under the influence of alcohol or is using illegal drugs during working hours the employee will cease work immediately. In consultation with the employee, and their nominated representative, the Company reserves the right to require the employee to participate in a drug or alcohol test. The Company may also require the employee to undertake counselling or rehabilitation before a return to work is scheduled. The presence of any detectable or observable amount of alcohol or drugs in an employee is prohibited and any infraction of these rules will result in disciplinary action. Reasonable suspicion must be based on a reasonable and clearly definable belief that the employee is under the influence of alcohol or is using an illegal drug on the basis of specified, contemporary physical, behavioural, or performance indications of probable alcohol or drug use.

10.3 EMPLOYEE ASSISTANCE

The company recognises that drug and alcohol abuse can be successfully treated and is committed to helping employees who suffer from these problems, while holding them responsible for their own recovery. The intent of this policy is to offer a helping hand to those who need it. The Company will provide any necessary information to the employee and referral to an appropriate treatment provider in the event that treatment is required. Personal or other leave may be made available for any incidental time required off work.

Arrangements to take appropriate leave will be made with the employee for any extended periods of time off work, based on the advice of a treatment provider and accompanied by a medical certificate.

Any information regarding an employee's condition will be treated in the strictest of confidence and in accordance with the Privacy Act 1998 (Cth). No referrals will be made, or information provided to other parties without the permission of the

employee involved.

Workers are not permitted to work while under the influence of alcohol and must conduct themselves responsibly at all times. For the purposes of this policy and due to the nature of your work, if at any time you are required to operate vehicles, heavy or otherwise, machinery or other high-risk work, the blood alcohol content limit is zero (0.00%).

Alcohol may be consumed at some organisation events. Where this is the case, the organisation encourages responsible alcohol consumption and at no time should you be drunk or behave in a manner which is inappropriate.

Non-compliance with this policy and any associated procedure by employees may result in disciplinary action up to and including termination.

10.4 PRESCRIBED/OVER-THE-COUNTER MEDICATION

Employees who are taking any prescribed/over-the-counter medication or drugs which may affect their ability to perform their work must notify management as soon as possible. You may be required to produce a medical certificate stating that you are fit for work or specifying any restrictions.

10.5 NO SMOKING POLICY

Hope Ability Pty Ltd:

- is committed to providing employees with a safe, healthy and supportive environment in which to work;
- recognises that the health and wellbeing of our employees is important and;
- is committed to providing a supportive workplace culture where healthy lifestyle choices are valued and encouraged.

10.5.1 Objectives and strategies

Smoking is a leading cause of preventable death and disease in Australia. Smoking greatly increases an individual's risk of suffering from potentially deadly conditions, including a range of cancers, heart disease and respiratory illness.

Environmental tobacco smoke (passive smoking) can also harm health. Maintaining a smoke-free work environment is essential to ensuring the health and wellbeing of everyone in the workplace. Hope Ability Pty Ltd respects the right of smokers to smoke. However, Hope Ability Pty Ltd will support smokers if they wish to stop smoking.

Hope Ability Pty Ltd will:

- safeguard employees, customers and visitors from the harmful effects of tobacco smoke and;
- provide smoking cessation support to employees wanting to stop smoking.

10.6 SCOPE

- This policy applies to all employees, contractors, customers and visitors on the worksite.
- Cigarette sales and/or promotion of cigarette products is not permitted on the worksite.
- The policy applies to all employees, contractors, customers and visitors while on the worksite.
- Smoking is not permitted at any time on the grounds or buildings of the worksite, or within work vehicles.

10.7 COMPLIANCE MEASURES

- All employees and other persons are expected to comply with the requirements of this policy.
- Managers and supervisors are responsible for encouraging compliance with this policy.
- All employees are responsible for ensuring visitors comply with this policy.
- All visitors who smoke on the premises are to be informed of the policy and politely requested to extinguish their cigarette. Repeated

breaches should be reported to managers for further action.

- Contractors should be advised of the policy and asked to extinguish their cigarette.
- Employees who breach the policy will initially be counselled by their supervisor. The supervisor will reinforce occupational health and safety obligations, and the health effects of passive smoking on co-workers. The employee will be informed of the smoking cessation or withdrawal management support available for employees, and how to access these resources. Formal disciplinary action in line with workplace procedures will occur for repeated breaches of the policy.

10.8 EXPECTATION OF EMPLOYEES

Employee are expected to:

- participate in the implementation of this policy;
- comply with the requirements of this policy;
- inform those entering the worksite of this policy;
- ensure that additional cigarette breaks (beyond award rest breaks) are taken in their own time;
- request that any visitors, customers or contractors smoking on site extinguish their cigarette and;
- report to managers any instances of exposure to environmental tobacco smoke.

10.9 10.9 COMMUNICATION

Hope Ability Pty Ltd will ensure that:

- all employees receive a copy of this policy during the induction process;
- this policy is easily accessible by all members of the organisation

- employees are informed when a particular activity aligns with this policy
- employees are empowered to actively contribute and provide feedback to this policy and
- employees are notified of all changes to this policy.

10.10 COMMENCEMENT DATE: 07TH JULY 2020

10.11 Definitions

Passive smoking is the inhalation of second-hand tobacco smoke, which is a combination of side-stream smoke from a burning cigarette and mainstream smoke exhaled by a smoker. Smoke means to smoke, hold, or otherwise have control over, an ignited tobacco product. Smoke-free means that no smoking is permitted. Tobacco product includes a cigarette, cigar, cigarette or pipe tobacco or any product that does not contain tobacco but is designed for smoking.

11 HEALTH AND SAFETY ISSUES RESOLUTION

11.1 INTRODUCTION

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

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

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

- work carried out at the workplace or
- the conduct of the organisation.

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

11.2 ORGANISATION'S RESPONSIBILITIES

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

- all workers have sufficient knowledge and understanding of the issues resolution procedures and
- all issues raised are addressed in a timely and effective manner.
- Where issues are raised by other parties within the organisation that have not been resolved at the local level, the organisation will agree to meet or communicate with all parties to the issue in a genuine attempt to resolve the issue, taking into account:
 - the overall risk to workers or other parties to the issue

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

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

11.3 SUPERVISOR'S RESPONSIBILITIES

When presented with a health and safety issue, the supervisor will ensure that the individual reporting the issue has completed a Hazard Report Form or an Incident Report Form. Where an issue cannot be resolved at the localised level and/or the supervisor is unable to resolve the issue through effective consultation with the worker/s affected, the matter will be escalated to the next level of management.

11.4 WORKER'S RESPONSIBILITIES

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

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

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

11.5 ISSUES RESOLUTION OUTCOMES

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

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

Where a written agreement is prepared:

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

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

12 HAZARDOUS CHEMICALS

12.1 INTRODUCTION

Hazardous chemicals are chemicals that have the potential to harm the health and safety of any person in the workplace.

12.2 WORKER RESPONSIBILITIES

You are responsible for:

- ensuring you are familiar with any hazardous chemicals that you may be required to use in the course of your duties, and with the location and contents of the associated Safety Data Sheet
- following any guidance or instruction you receive on how to perform work involving hazardous chemicals
- taking reasonable care to prevent hazardous chemical exposure to other workers, for example by replacing all lids on chemical containers, returning chemicals to the appropriate storage or locking storage areas where possible
- notifying management of any hazardous chemical risk that you become aware of, for example deteriorating containers or incorrect storage
- ensuring that chemicals are appropriately labelled, particularly when they are being decanted to another container, to include as a minimum:
 - a. the product identifier and
 - b. a hazard pictogram or hazard statement consistent with the correct classification of the hazardous chemical.
- ensuring you are familiar with the hazardous chemical's label, including the meaning of any pictogram, signal word and/or hazard statement
- immediately reporting any incident involving hazardous chemicals to

management and

- ensuring you use any PPE that is provided to you.

13 MOTOR VEHICLES

13.1 INTRODUCTION

Operating motor vehicles is a normal part of the organisation's activities. Where travelling in the course of duties, the motor vehicle is considered to be a workplace.

The organisation is committed to ensuring the integrity, reliability and good performance of company motor vehicles and that the motor vehicle is appropriately managed in accordance with set rules and parameters on how and what vehicles are procured and used.

Any driver of any vehicle owned, leased or under the control of the organisation must comply with the general fleet management system principles and standards of use and care associated with the operation of company motor vehicles.

13.1.1 Vehicle Status

Vehicles provided to authorised drivers will be safe, reliable, fit for purpose and cost effective. Vehicles are fitted with first aid kits, extinguishers and other relevant safety equipment as necessary. The fleet management system involves monitoring vehicle access and mileage. The system includes trackers and swipe access to drive a vehicle.

13.2 WORKER RESPONSIBILITIES

Workers and councillors of the company who are required to operate a company vehicle in the performance of their duties must be in possession of a valid Australian driver's licence. A copy of the driver's licence must be provided to the company and the HR Manager for filing in their personal file.

If at any time the licence of an approved driver expires or is revoked, or the driver is otherwise disqualified from driving, it is responsibility of the driver to inform their supervisor immediately. They will not be entitled to drive a company vehicle until their licence is reinstated.

You are responsible for ensuring you:

- possess a current driving licence and management's authority to drive during the performance of your duties

- produce your driving licence for scrutiny by management at any time as requested and
- inform the organisation immediately if you are disqualified from driving.
- You must observe and obey the relevant road laws in the state or territory in which you are driving. In particular, you must:
 - adhere to the appropriate speed limit at all times
 - wear the restraints provided at all times when travelling in the motor vehicle
 - ensure that you are not affected by alcohol and/or drugs at the time of driving
 - report any defects or issues with the with the motor vehicle to the Organisation as soon as reasonably practical
 - ensure that the motor vehicle is maintained in safe working order
 - ensure that only authorised passengers are transported and are kept safe while doing so and
 - ensure that authorised passengers use the restraints provided.

Workers are to expect adequate access to fleet vehicles that ensure safe and effective performance of their professional duties.

The driver of a company vehicle shall be a driver authorised under a specific employment contract, workers or councilor of the organisation who has an appropriate driving licence and a record of which is on the personnel files of the person to which the vehicle has been assigned.

Any authorised driver of a company vehicle will be liable for all costs associated with an accident (e.g. insurance excess payment) where the accident is proven to be as a result of inappropriate, inattentive driving. Any authorised driver is also liable for the payment of any fines or infringement notices.

In the event of an at fault accident whilst driving one of the organisation's vehicles or where any damage to an Organisation vehicle is due to an authorised driver's

negligence or lack of care, the organisation reserves the right to insist on the authorised driver rectifying the damage at their own expense or paying the excess part of any claim. Repeated instances may result in disciplinary action/and or the use of an organisation vehicle being withdrawn.

13.3 REVERSING

You must use a spotter to assist at all times when reversing a truck, loaded van or any other vehicle where, due to load or conditions, clear line of sight from all internal and external rear view mirrors is impeded or obscured in any way. Any damage done to the vehicle when not using a spotter will be considered negligent.

13.4 PROCEDURES

i) Vehicle breakdown procedure

When a motor vehicle breaks down, drivers can become distracted and unwittingly place themselves and others in danger. To minimise the risks associated with a breakdown, you should:

- stop and park the motor vehicle in a safe place as far off the road as practical
- avoid stopping around blind corners, just over the crest of a hill, on bridges or where roads are very narrow
- use the motor vehicle's hazard lights to warn other road users
- know who to call for assistance and have the contact details of your location, the fault/issue, and immediate actions you have taken.

You should not:

- attempt to repair the motor vehicle unless you are qualified and authorised to do so
- stay in the motor vehicle, unless this is the safest option. Generally, it is safer for you (and your passengers) to keep well clear of the motor vehicle and wait for help to arrive

- exit the motor vehicle on the traffic side, unless this is the safest option. Generally, it is safer for you (and your passengers) to exit via the passenger side and
- leave the motor vehicle's bonnet up once help has been arranged. Other drivers may stop which could compromise their safety.

ii) **Motor vehicle accident procedure**

You are required to follow the breakdown procedure in the event you are involved in a motor accident and where the vehicle is damaged to the extent that it cannot be operated. In addition, you should:

- exchange insurance details with involved parties
- seek medical attention if required
- notify the relevant emergency services as required and
- advise the organisation of the accident as soon as practical and provide details of the location of the accident, damage to motor vehicle, third parties involved and immediate actions you have taken.

You must complete an Incident Report Form and forward it to your supervisor/manager as soon as practicable.

iii) **Use of mobile phone while operating a motor vehicle**

You must operate motor vehicles in compliance with all road rules and in particular ensure:

- you do not use a mobile phone whilst driving unless via an approved hand free or cradle device
- you limit your usage whilst using an approved device to short conversations only
- you do not use SMS, video and/or email whilst driving and
- you do not hold or touch a phone at any time whilst driving unless the motor vehicle is legally parked (even if you are just passing it to a

passenger).

13.5 AUTHORISED PRIVATE USE OF VEHICLES

A person who has private use of vehicle as part of their employment contract can use their vehicle for private use. The company recognises that where a worker is granted full private use of a vehicle, this vehicle in many cases becomes that worker's family vehicle. Accordingly, such workers are entitled to grant permission to drive the vehicle whilst on private use provided such person(s) hold a current driver's licence and is:

- the partner of the worker who permanently resides with the worker, or
- another suitably licensed person where the worker and/or worker's partner is the passenger in the passenger in the vehicle.

A worker authorised to have private use of vehicles is allowed to transport alcohol but cannot make any deliveries for other people. Private vehicle owners are to acknowledge Northern Territory Liquor Act, and Northern Territory Emergency Response Act. It must be remembered that responsibility prevails when carrying alcohol in all organisation communities. It is also to be remembered that alcohol consumption while using a vehicle cannot exceed .05% (meaning 500mg/100ml of blood volume). Any conviction of DUI in a company vehicle may result in disciplinary action.

Company vehicles are not permitted to compete in any car rally or competition or be used for any commercial purpose outside of the company's own operations. Where workers have full private use of a Four-Wheel Drive vehicle, only appropriate recreational use of the vehicle is permitted. Appropriate off-road use can be defined as utilising the vehicle only where access is provided by either a marked track/trail (e.g. camping ground access, fire trail, dirt roads), or where vehicular access is specifically allowed (e.g. Beach driving).

Where inappropriate private use of a 4WD results in damage to the vehicle, the worker using the vehicle will be responsible for all repair costs incurred.

13.5 USE OF VEHICLES FOR COMMUNITY ACTIVITIES

The use of company vehicles for any non-business purpose must be approved in writing, prior to such use, by the relevant Departmental Managers. Such use will

only be by company workers and any request for use by a worker must be put in writing 48 hours prior to the time of the requested use. Any damage to the vehicle will be the responsibility of the worker and the worker will be required to compensate the company for payment associated with any damage.

13.6 POOL VEHICLES

Company vehicles which are not designated to any specific person or department are to be used for pooling. All pool vehicles will be controlled by Asset Department. Procedures for requesting pool vehicles.

13.7 FUEL CARDS

There are fuel cards assigned to each company vehicle. In the event that a worker has no choice but to incur out of pocket payment for fuel, receipts are to be kept for reimbursement. Reimbursement should be claimed by submitting an Expense Reimbursement Claim Form approved by authorized personnel to the finance department.

13.8 RECORDS OF USAGE (LOGBOOKS)

Workers shall maintain records of vehicle usage in order that:

- The extent of operational and private use can be measured and to calculate fringe benefits tax liability for all company vehicles and
- The person responsible for the vehicle when an infringement, damage or loss occurs for all vehicles can be identified.
- Logbooks are to be filled out every time the vehicle is used. Logbooks are to be filled out with odometer readings every time the vehicle is used. Logbook photocopies are to be handed to the Operation Manager at the end of every month for verification.

13.9 USAGE AND INCIDENT MONITORING

The WHS Officer is responsible for monitoring and acting upon any recorded or observed unacceptable or unapproved vehicle usage and unacceptable driving practices (e.g. reckless driving, unnecessary braking, speeding infringements).

Disciplinary action may result for serious and/or repeated occurrences of illegal, inappropriate usage and/or non-compliance with the requirements stated in this policy.

13.10 SECURITY

Vehicles must be:

- Parked in a safe and secure place at all times.
- Properly secured when unoccupied (i.e. keys removed, doors locked, and security systems activated).
- Confidential material and expensive equipment must not be left in unattended vehicle.

13.11 INSURANCE

Losses or damage to any personal property carried or kept in a company vehicle shall remain the responsibility of the officer to whom the vehicle is assigned at that time the property was placed in the vehicle, unless such property is used in connection with official business.

13.12 SERVICING AND MAINTENANCE

Equipment provided with each vehicle (i.e. first aid kit, fire extinguisher etc) will be maintained and included in pre-start checks. Vehicles are to be maintained in a condition that reflects company in a positive manner i.e. clean, tidy and well maintained. It is the responsibility of driver, to whom the vehicle is allocated, to ensure that it is serviced and cleaned regularly inside and out.

Drivers shall verify the oil, water, tyre pressure on a weekly basis. Workers borrowing company vehicle for a task must return it clean and tidy in accordance with the SOP. Drivers are responsible for arranging the delivery of vehicles to the organisation Head Office for servicing and maintenance when booked by the Head Office.

13.13 DRIVING RANGE

All company Vehicles are to be used only within the Northern Territory. If vehicles are to be taken outside the Northern Territory, prior approval form Managing Director is to be obtained. A daily driving range limit is set at 40 km per day unless Head Office permission is granted to travel beyond this limit.

13.14 MODIFICATION IN VEHICLES

Except for emergency cases, no modifications can be made to any company vehicles such as changing tyres, or removing anything that belongs to the vehicle.

13.15 ACCIDENTS EMERGENCIES

If the vehicle is stolen or damaged in an accident, the company drivers shall comply with all legal and insurance requirements if involved in an accident, including:

- Obtaining particulars of the other parties involved,
- Notifying the Police and relevant authorities in accordance with the Road Traffic Act or any other relevant laws,
- Notifying relevant Manager/Director
- Submitting an incident Form
- workers should also immediately report any theft or damage, however slight, to the relevant Manager/Director for repairs to undertaken at the earliest.

13.16 SHARING OF RESOURCES

To promote safety and efficiency, please make every effort in advertising your travels to others in case someone would need to travel to the same area.

13.17 SAFETY DRIVING STANDARDS

The workers of company, while driving any vehicle owned, leased or under the



control of Roper Gulf Regional Council, shall follow the rules and standards as prescribed in the company Light Vehicle procedure.

13.18 DISCIPLINARY ACTION

If an employee is found guilty of misusing company vehicle, a Formal Warning will be given by the immediate supervisor and Manager. Dismissal may be considered if the offence is believed to be serious enough. A copy of the Formal Warning will be placed on the employee's personal file

14 OFFICE SAFETY

14.1 ORGANISATION'S RESPONSIBILITIES

The organisation is responsible for:

- identifying, assessing and controlling any hazards associated with working in an office in consultation with workers
- ensuring safe access to office environments
- providing a work environment that is kept clean and hygienic and free from hazards, including through the maintenance of good housekeeping practices
- ensuring office equipment provided is fit for purpose and maintained appropriately in accordance with the manufacturer's instructions, in particular any electrical equipment
- providing aids that are necessary for you to safely perform your duties and
- ensuring the office facilities and emergency response procedures are adequate for the type of work performed.

The organisation will ensure that supports are provided in a safe environment that is appropriate to participant needs whenever managing a service. Where relevant, work will be undertaken with other providers and services to identify and treat risks, ensure safe environments, and prevent and manage injuries.

Key factors in achieving compliance with this requirement are:

- Scheduled risk assessments must be conducted, documented with corrective and preventive actions undertaken as required to ensure the work environment is safe and culturally suitable for both the participant and support workers, particularly in a participant's home.
- When working in a participant's home, workers must gain consent for entry and assist in ensuring a safe environment for themselves and for the participant.
- An additional risk assessment must be undertaken for workers in

isolated environments.

- Where work is undertaken with other providers and services support workers must ensure risks are identified and resolved, that environments are safe and injuries are prevented or managed effectively.
- Where applicable and required, workers must carry sufficient identification as a worker when engaged to provide the agreed services.

14.2 WORKER RESPONSIBILITIES

You are responsible for:

- maintaining your workstation in a manner that is consistent with ergonomic guidelines
- ensuring and maintaining good office housekeeping, including:
- keeping work surfaces clean and tidy
- maintaining clear access and passageways that are free of obstructions,
- ensuring items and materials are stored appropriately in designated areas and not within a 1 metre vicinity of fire extinguishers, fire appliances, stairways, landings or electrical switchboards
- closing drawers and filing cabinets promptly after use and removing any protruding keys
- relocating trip hazards such as power cords, or securing these to the floor
- disposing of rubbish and waste in the provided waste facilities, and ensuring that these do not overflow
- cleaning up any spillages or breakages immediately and
- notifying management of any hazards that cannot be immediately rectified.

14.3 PROCEDURES

14.3.1 Physical Environment

The organisation will meet reasonable community standards and comply with all legal requirements affecting the physical and environmental safety of participants. This includes fire safety, motor vehicle safety, and public health requirements. The organisation will implement a regular review process and update their compliance with community standards and legal requirements.

14.3.2 Staff Screening

Prior to commencing work with participants, all workers and volunteers, will undergo a comprehensive screening process which will include criminal record check, child protection check - where relevant, referee checks and interviews. The findings of the screening are to be documented in the personnel files of workers.

14.3.3 Staff Induction and Training

All workers and volunteers will participate in an induction program prior to commencement. The induction program will include training on duty of care, risk assessment and management, professional boundaries and ethical behaviour.

Staff training/in-service on duty of care and participant safety will occur on a need's basis. The staff training program will be reviewed regularly and be responsive to enable any emerging issues impacting on participant safety and security to be addressed as a matter of priority.

14.3.4 Worker Safety

The following are considered Management responsibilities:

- Ensure a consistent approach to maintaining worker safety for all workers, either in office situations, in participant's homes or in external facilities where they may be sole workers, and when working remotely or undertaking long distance travel
- Maintain a range of protocols and preventative strategies to ensure worker safety

- Ensure all sites have up-to-date security and safety systems
- Identify high-risk situations and prescribe a range of preventive actions to minimise risk to workers facing such situations
- Ensure all workers have access to a phone when necessary
- Where it is determined that a worker may be at imminent risk they may decide to contact local police authorities directly.

The following are considered worker responsibilities:

- All workers are expected to adhere to their responsibilities and to always consider their own safety and that of their client as of paramount importance
- Where any worker has any concern for their own safety or the safety of others they must report this immediately to the team leader or a manager
- Report any incidents and hazards to the team leader or a manager and document
- Complete documented safety risk assessments and ensure assessments are updated/reviewed regularly
- Attend all safety training and workshops

The following safety measures will be maintained:

- A comprehensive induction and orientation explaining safe measures and practices to ensure workers are informed of policies and procedures in relation to their safety
- The formal incident reporting and management system
- Conduct of worksite risk assessments
- Emergency and fire safety drills – evacuation plans displayed
- Guidelines for working in isolation i.e. work that is isolated from the assistance of other persons because of location, time or the nature of the work

- Vehicles regularly serviced and fitted with safety aids (e.g. 1st aid kits)

14.3.5 Record Keeping

In the case of any accident or incident causing harm to a participant, a detailed written incident report will be completed within 2 hours. The report should include:

- description of the nature and extent of the incident
- the name and contact details of all those involved, including any witnesses to the incident
- action taken
- the date and signature of the person making the report
- any on-going or follow up action

Records must be stored securely and only accessed by persons with a legitimate reason.

15 CLIENT AGGRESSION

15.1 INTRODUCTION

As part of your role, you may be required to work with aggressive clients in the workplace.

The organisation acknowledges challenging behaviour occurs for many reasons and is committed to using a person-centred approach when dealing with challenging behaviours. The organisation will ensure that responses to challenging behaviour are prompt, individualised, and appropriate and that they respect the dignity and rights of the participant and the rights of any other person/s affected by the behaviour.

The organisation recognises that the use of restrictive practices may be necessary when addressing duty of care or to preserve the rights and safety of the participant and others. Any use of restrictive practices will be:

- The least restrictive option
- Used for the least amount of time possible
- Used only as a last resort to manage behaviours of concern, after all other means have been exhausted
- Used only to prevent harm to the participant or others.

Restrictive practice means any practice or intervention that has the effect of restricting the rights or freedom of movement of a person with disability, with the primary purpose of protecting the person or others from harm. The use of unauthorised restrictive practices is an infringement of a person's human and, in many cases, civil rights.

While the organisation supports the reduction and elimination of restrictive practices, the organisation recognises that people using services may require positive behaviour support. This approach is responsive to an individual's needs and any practices which could be considered "restrictive" will only be used in accordance with legislative requirements.

Restrictive practices will only be used with explicit consent attained from the participant or advocate as well as authorisation from the relevant authorities. The organisation will continually evaluate and review its use of restrictive practices to

inform improvement activities.

15.2 ORGANISATION'S RESPONSIBILITIES

The organisation is responsible for:

- developing procedures to assist workers in dealing with aggressive clients
- reviewing work practices to minimise the risk of clients becoming aggressive and
- providing support for workers who experience client aggression.

15.2.1 Organisational obligations:

- Ensure compliance with NDIS Commission and local authority requirements as appropriate
- Ensure that proper consent is obtained for all use of restrictive practices
- Establish working relationships with specialist behaviour support practitioners qualified to carry out behaviour support assessments and develop behaviour support plans
- Ensure workers are appropriately trained, qualified and supported in implementing positive behaviour strategies
- Notify the NDIS Commission in the event of any unplanned or unapproved use of a restrictive practice through the reportable incident process
- Submit monthly reports to the NDIS Commission on the use of restrictive practices
- Support workers, NDIS participants, their families, and other decision-makers to understand the NDIS Commission's behaviour support function.

Support other providers associated with a participant that may be implementing a behaviour support plan:

- in delivering services
- implementing strategies in a behaviour support plan
- evaluating the effectiveness of approaches aimed at reducing and eliminating restrictive practices
- monitoring the use of restrictive practices

15.2.2 NDIS ROLE

Reporting requirements give the NDIS Commission national oversight of the use of restrictive practices. This will allow the Commission to identify trends and target capacity and skill-building programs that protect the safety of NDIS participants more effectively.

15.3 PERMISSABLE RESTRICTIVE PRACTICES

Only 5 types of restrictive practices are permissible in Australia but each state and territory has its own guidelines on the use of restrictive practices. Healthcare providers must be engaged to consider whether use of a restrictive practices is necessary to protect the participant or others from harm. The onus is on the healthcare provider to ensure a restrictive practice is implemented legally, ethically and minimally. The permissible restrictive practices are:

Seclusion - the sole confinement of a person with disability in a room or a physical space, at any hour of the day or night, where voluntary exit is prevented, not facilitated, or it is implied that voluntary exit is not permitted.

Chemical restraint - the use of medication or chemical substance for the primary purpose of influencing a person's behaviour. It does not include the use of medication prescribed by a medical practitioner to treat or to enable treatment of a diagnosed mental disorder, physical illness or physical condition.

Mechanical restraint - the use of a device to prevent, restrict, or subdue a person's movement for the primary purpose of influencing a person's behaviour. Mechanical restraint does not include the use of devices for therapeutic or non-behavioural purposes.

Physical restraint - the use or action of physical force to prevent, restrict or subdue movement of a person's body, or part of their body, for the primary purpose of influencing their behaviour. Physical restraint does not include the use of a hands-on technique in a reflexive way to guide or redirect a person away from potential harm, consistent with what could reasonably be considered the exercise of care towards a person.

Environmental restraint - the restriction of a person's free access to all parts of their environment, including items or activities. Note: Not permissible in NT

The organisation will seek relevant authorisation for all restrictive practice use and will only use them in accordance with local legislative guidelines. It is acknowledged that there will be circumstances where using one or more regulated restrictive practices is the only way to keep an NDIS participant and/or others safe. Regulated restrictive practices can be used if they:

- Reduce the risk of harm to the self or others
- Are clearly identified in a behaviour support plan
- Are authorised by the state/territory, when required
- Are used as a last resort
- Are the least restrictive response available
- Are proportionate to the potential harm to self or others
- Are used for the shortest possible time
- Are implemented only by registered NDIS providers

Regulated restrictive practices can also be used if the NDIS participant is being given opportunities to develop new skills that have the potential to meet the need for a restrictive practice.

15.4 15.4 PROHIBITED PRACTICES

Some restrictive practices are not permitted in any states or territories. Their use is strictly forbidden and generally constitutes a breach of a person's human rights. These include but are not limited to:

Aversion - the use of painful or unpleasant physical or sensory stimuli in an attempt to reduce undesired behavior.

Exclusion - deliberately ignoring or preventing a person from participating in an activity or decision.

Overcorrection - the disproportionate response to an event which requires a person to do more than what is necessary to return a situation to its original condition before the event.

Denial of key needs - the denial of access to essential needs such as food, water or shelter.

15.5 GOVERNANCE

A Restrictive Practices Governance Committee consisting of senior management exists to monitor the use of restrictive practices and guide and support the systemic reduction of restrictive practices across the organisation. The committee also reviews and approves content on all restrictive practice reports (authorised and unauthorised) prior to submission to the NDIS Commission. There is also an appointed Restrictive Practices Compliance Officer who will ensure that where a restrictive practice is used this occurs in compliance with the Commission's guidelines.

15.6 WORKER RESPONSIBILITIES

You are responsible for:

- ensuring effective communication where possible especially if time frames, schedules and other specifics are not as previously indicated to the client
- removing yourself from violent or aggressive confrontations with clients
- not engaging in aggressive behaviour yourself towards the client
- informing management as soon as practical if a client is becoming aggressive
- calling police if a situation is escalating to the point where you feel

your personal safety and security may be jeopardised and

- participating in counselling or debriefing as recommended following exposure to an incident involving client aggression.

16 BEHAVIOUR SUPPORT PLANS

16.1 DEFINITIONS

Behaviors of Concern – Behaviors that are of such intensity, frequency or duration that the physical safety of the person or others is placed in serious jeopardy, or that are likely to seriously limit the person’s use of, or access to, services or community facilities. Behaviors of concern are also known as challenging behaviors. Behaviors of concern should be understood in the social context in which they occur. They should not automatically be interpreted as an expression of deviance or abnormality in an individual.

Behavior Support Plan (BSP) – A document or series of linked documents that outline strategies designed to deliver a level of behavior support appropriate to the needs of an individual person. A behavior support plan is to have a preventative focus and is usually required to have a responsive focus. The plan should include multiple elements, reflecting the level of complexity, assessed needs, parameters and context of the service agreement. A BSP may be either (a) a comprehensive behavior support plan; or (b) an interim behavior support plan.

Behavior Support Practitioner – a person with tertiary qualifications in psychology, special education, speech pathology, social work or other relevant discipline and/or training and experience in the provision of behavior support and intervention

Capacity – A person has capacity to consent if they are able to demonstrate an understanding of the general nature and effect of a particular decision or action and can communicate an intention to consent (or to refuse consent) to the decision or action. A person’s capacity to make a particular decision should be doubted only where there is a factual basis to doubt it. It should not be assumed that a person lacks capacity just because he or she has a particular disability. A person may have the capacity to exercise privacy rights even if they lack the capacity to make other important life decisions.

Duty of Care - This is a legal concept meaning the responsibility to take reasonable care to avoid causing harm to another person. A duty of care exists when it could reasonably be expected that a person's actions, or failure to act,

might cause injury to another person.

Functional Behavioural Assessment – The process for determining and understanding the function or purpose behind a person’s behavior, and may involve the collection of data, observations, and information to develop an understanding of the relationship of events and circumstances that trigger and maintain the behavior

Guardian for a restrictive practice matter – Either:

- a guardian for a restrictive practice (general) matter—a guardian appointed for the adult by the relevant authority to consent to the use of restrictive practice where an adult is receiving services (other than respite or community access services), or
- a guardian for a restrictive practice (respite) matter—a guardian appointed for the adult by the relevant authority to consent on behalf of the adult in relation to the use of restrictive practice where an adult is receiving a respite or community access service only.

Informal decision maker - For an adult with an intellectual or cognitive disability, this means a member of the adult's support network, other than a paid career for the adult

NDIS Commission/Commissioner – The NDIS Commission regulates behavior support for NDIS registered providers and monitors the use of restrictive practices. Providers should ensure that they comply with NDIS incident management and reporting requirements.

Person-Centered – A person-centered approach is one which involves the person to gather information about that person’s lifestyle, skills, relationships, preferences, aspirations, and other significant characteristics, in order to provide a holistic framework in which appropriate respectful and meaningful behavior supports may be developed.

Positive Behavior Support – A philosophy of practice and a term to denote a range of individual and multisystemic interventions designed to effect change in

people's behavior and ultimately their quality of life. Positive behavior support recognises that all people, regardless of their behavior, are endowed with basic human rights and that any assessment, intervention or support should be respectful of those human rights and foster the exercise and experience of those rights. Positive behavior support recognises that all human behavior serves a purpose, including those behaviors that are deemed to be behaviors of concern. In order to bring about adaptive change, it is first important to understand the purpose of their existing behaviours, their aspirations and the range of knowledge and skills they already have.

PRN: Latin for 'as necessary', Pro re nata (PRN) restrictive practices include restrictive practices that are in a participant's treatment plan which are only used when a particular behavior is displayed, not as routine.

Regulated Restrictive Practice (RRP): Any restrictive practice which has been approved by the state or territory government and is included in the participant's behavior support plan. It does not include the use of medication prescribed by a medical practitioner for the treatment of, or to enable treatment of, a diagnosed mental disorder, a physical illness or a physical condition.

16.2 ESTABLISHING A BEHAVIOUR SUPPORT PLAN (BSP)

The organisation is registered with the NDIS as a behavior support provider in order to provide behavior support in consultation with a Behavior Support Practitioner.

16.2.1 CONSENT

Prior to the authorisation of a restrictive practice consent must be obtained from the participant, or their guardian. Consent must be voluntary, informed, specific and current.

16.2.2 BSP DEVELOPMENT

A registered behaviour support practitioner must be engaged to develop a BSP, and must develop:

- An interim behavior support plan that includes provision for the use of the regulated restrictive practice

- A comprehensive behavior support plan that includes provision for the use of the regulated restrictive practice.

The practitioner and implementing provider must work together to ensure that regulated restrictive practices in the behavior support plan are authorised where required.

16.2.3 LOCAL AUTHORISATION

A BSP must be developed prior to the authorisation of a restrictive practice. The organisation must submit an application for authorisation to the NT Government's Restrictive Practice Authorisation Unit as specified in their guidelines.

16.2.4 REGULATED RESTRICTIVE PRACTICES

A Behaviour Support Practitioner must develop a BSP that meets the requirements of the NDIS Commission. The restrictive practice(s) must be clearly identified in the BSP and should be:

- developed in consultation with the person with a disability, their support network and implementing provider
- considered alongside alternatives that do not require restrictive practices
- based on a comprehensive biopsychosocial assessment including a functional behavioural assessment
- containing contemporary evidence-based behavioural strategies including environmental adjustments to constructively reduce behaviors of concern
- aimed at reducing and eliminating restrictive practices
- developed in a form approved by the NDIS Commissioner and lodged with the NDIS Commission
- reviewed as specified

When considering using restrictive practices, the organisation will inform the

participant and their caregivers about the use of restrictive practices generally:

- in the language or way, the participant is most likely to understand, and
- in a way that has appropriate regard to the adult's age, culture, disability and communication ability

The organisation must state:

- why the restrictive practices are being considered in relation to the participant
- how the participant and the caregiver can be involved and express their views in relation to the use of restrictive practices
- who decides whether restrictive practices will be used in relation to the participant
- how the participant and/or caregiver can make a complaint about, or seek review of, the use of restrictive practices.

16.2.5 UNAUTHORISED USE

Any unauthorised use of a restrictive practice (i.e. where no Behavior Support Plan exists), is considered as a reportable incident. Every use of an unauthorised restrictive practice must be notified to the NDIS Commission within five business days or within 24 hours where it involves harm. Within 1 month from the first use of the unauthorised practice, the implementing provider must take all reasonable steps to facilitate the development of an interim behavior support plan by a Behaviour Support Practitioner. An interim plan is a brief plan that provides protocols for the safe use of the practice, as well as general preventative and response strategies.

Within 6 months from the first use of the unauthorised practice, the implementing provider must take all reasonable steps to facilitate the development of a comprehensive behavior support plan by a Behavior Support Practitioner. A comprehensive plan is based on a functional behavior assessment, identifies specific environmental changes and a functionally equivalent replacement behavior which is supported by skill building.

A restrictive practice remains unauthorised until authorisation is obtained, and

each instance constitutes a reportable incident.

In regard to authorised restrictive practices (i.e. where a Behaviour Support Plan exists and has been lodged with the NDIS Commission) where the restrictive practice will continue to be used as an ongoing strategy, the organisation must commence monthly reporting on the use of the practice. LODGING A BSP

Once local consent and authorisation requirements are met, the Behavior Support Practitioner lodges the behavior support plan through the NDIS Commission's online portal as soon as practicable after being developed.

The organisation must separately login to the online portal and activates the plan, and at that time also upload evidence of authorisation.

16.3 SUPPORTING A BSP

A Behavior Support Practitioner supports the implementation of a BSP through the provision of person- centered training, coaching and mentoring.

Workers are required to have appropriate knowledge and understanding of evidence informed practice approaches to behavior support. Workers will be provided with training in the appropriate use of restrictive practices and must be familiar with the agreed upon restrictive practices in the participant's BSP.

Workers must understand the difference between routine restrictive practices and PRN restrictive practices (restrictive practices that are in a participant's treatment plan which are only used when a particular behavior is displayed, not as routine) and only use PRN restrictive practices as a last resort to prevent harm to participants and others.

Workers must understand that the use of an unplanned restrictive practice which is not documented in a participant's BSP constitutes a reportable incident and must be actioned in accordance with reporting guidelines.

Where an unauthorised restrictive practice has been used workers and management must engage in debriefing to identify areas for improvement and to inform further action. Consideration should be given to evaluating BSP effectiveness and the development of fade-out strategies for the use of the restrictive practice. The outcomes of the debriefing are to be documented.

16.4 RECORD KEEPING

The organisation must keep written information relating to the use of restrictive practices and records must be kept for seven years from the day created. Record keeping should document both:

- Compliance in the use of restrictive practices, and
- The reduction and minimisation of restrictive practices and the use of alternatives, where possible.

Records of the use of restrictive practices will include a description of the use of the regulated restrictive practice, including:

- The impact on to the person with disability or another person
- Any injury to the person with disability or another person;
- Whether the use of the restrictive practice was a reportable incident and why the regulated restrictive practice was used
- A description of the behaviour of the person with disability that lead to the use of the regulated restrictive practice
- The time, date and place at which the use of the regulated restrictive practice started and ended
- The names and contact details of the persons involved in the use of the regulated restrictive practice
-
- • The names and contact details of any witnesses to the use of the regulated restrictive practice
- The actions taken in response to the use of the regulated restrictive practice
- What other less restrictive options were considered or used before using the regulated restrictive practice
- The actions taken leading up to the use of the regulated restrictive practice, including any strategies used to prevent the need for the use of the practice

16.5 REVIEWING A BSP

The Behavior Support Practitioner evaluates strategies through regular engagement with the participant, and by reviewing and monitoring each participant's behavior support plan as well as the organisation's practices at pre-determined intervals with an intention to reduce and ultimately eliminate all restrictive practice use.

A review must be undertaken as soon as practicable after a change in circumstances occurs that requires the plan to be amended or in any event, at least every 12 months while the plan is in force.

16.6 REPORTING

The Organisation is required to comply with reporting requirements in relation to the use of regulated restrictive practices as prescribed in the NDIS Restrictive Practices and Behavior Support Rules and in association with Reportable Incident guidelines as required.

If a restrictive practice is used that is not documented in the participant's BSP, the organisation will record the use and report the incident to the NDIS Commission as well as the participant's family or advocates.

The Organisation is required to comply with the monthly online reporting requirements of the NDIS Behaviour Support Group. The Organisation must also report weekly to the NDIS Reportable Incidents Group where approval has been obtained for short term use of a regulated restrictive practice and while the approval is in force. Prior to lodging reports the Restrictive Practices Governance Committee verify and endorse the reports. The NDIS Commission may request more information or follow-up actions.

16.7 PROCESS REVIEW

Data associated with the management of restrictive practices is monitored to identify actions for improving outcomes.

The Restrictive Practices Governance Committee and the Restrictive Practices Compliance Officer are responsible for providing feedback to workers, and with the participant's consent, their support network, and the Behaviour Support Practitioner about the implementation of the BSP to inform the reduction and elimination of restrictive practices.

Policy, procedure and practices regarding the use of restrictive practices will be reviewed by the Restrictive Practices Governance Committee and the Restrictive Practices Compliance Officer in line with:

- NDIS Practice Standards
- incident reports and feedback from all stakeholders
- changes in best practice
- changes in circumstances affecting service-delivery

17 THREATENING SITUATIONS

17.1 INTRODUCTION

As part of your role, you may be required to work with other persons in the workplace that may pose a threat to you.

17.2 ORGANISATION'S RESPONSIBILITIES

The Organisation is responsible for:

- developing procedures to assist workers
- reviewing work practices to minimise the risks
- providing facilities that minimise risks wherever possible and
- providing support for workers who have been exposed to threatening situations.

17.3 WORKER RESPONSIBILITIES

Should you be exposed to a situation in which you are threatened in any way you should:

- stay as calm as possible
- if not involved in the situation move as far away as possible and inform a manager or supervisor
- not respond aggressively as this can escalate the situation
- never chase, touch or handle the offender in any way
- avoid making eye contact with the offender, however if safe to do so, observe any distinguishing features, tone of voice, build, clothing
- cooperate and obey instructions, never provoke the offender

- always let the offender/s go
- write down details immediately and convey these to a manager or supervisor
- inform a manager or supervisor if the offender/s is likely to be recorded on CCTV footage so the footage can be saved for the Police and/or security and
- follow any specific security arrangements that are implemented by the organisation

18 HEALTH AND HYGIENE FOR FOOD HANDLERS

18.1 INTRODUCTION

As part of your role, you may be required to work with food in the workplace.

18.2 ORGANISATION'S RESPONSIBILITIES

The organisation is responsible for:

- educating workers on safe health and hygiene practices to minimise the spread of disease through food
- providing workers with the amenities for safe health and hygiene practices and
- directing food handling workers who are suffering symptoms of food borne illnesses or contagious disease to get a clearance from their doctor before returning to work.

18.3 WORKER RESPONSIBILITIES

You are responsible for:

- doing whatever is reasonable to prevent your body, anything from your body or anything you are wearing, coming into contact with food or food contact surfaces
- doing whatever is reasonable to stop unnecessary contact with ready-to-eat food
- wearing clean outer clothing, depending on the type of work you do
- making sure bandages or dressings on any exposed parts of the body are covered with a waterproof covering
- not eating over unprotected food or surfaces likely to come in contact with food

- not sneezing, blowing or coughing over unprotected food or surfaces likely to come into contact with food and
- not spitting, smoking or using tobacco or similar preparations where food is handled. You must tell your supervisor if you know or think you may have made any food unsafe or unsuitable to eat. For example, if your jewellery may have fallen into food.

18.4 HAND WASHING RULES FOR FOOD HANDLERS

You are expected to wash your hands whenever your hands are likely to contaminate food including:

- immediately before working with ready-to-eat food
- after handling raw food
- immediately after using the toilet
- before you start handling food or go back to handling food after other work
- immediately after smoking, coughing, sneezing, using a handkerchief or disposable tissue, eating, drinking or using tobacco or similar substances and
- after touching your hair, scalp or a body opening.

18.5 CORRECT HAND WASHING

- use the hand washing facilities provided
- clean your hands thoroughly using soap or other effective means
- use warm running water and
- dry your hands thoroughly on a single use towel or in another way that is not likely to transfer disease-causing organisms onto the hands.

19 REMOTE/ISOLATED WORK

19.1 INTRODUCTION

As part of your role, you may be required to work in remote or isolated areas away from your normal workplace. This can include working off-site, travelling in the course of your duties and work that is isolated from the assistance of others due to location, time or the nature of the work being performed.

When performing remote/isolated work you can face higher levels of exposure to hazards than when you are working in a controlled environment and you may not have the same level of access to support and emergency services.

19.2 ORGANISATION'S RESPONSIBILITIES

The organisation is responsible for:

- identifying, assessing and controlling any hazards associated with remote/isolated work in consultation with workers
- consulting with workers on communication procedures applying to remote/isolated work and the frequency of contact required. This may be at the start and end of each shift, at pre-set intervals, or as often as required based on the type of work being performed
- providing appropriate means of communication (for example a mobile phone, satellite phone, digital two way radio, GPS tracking device, pager or land-line phone) and
- providing workers with access to a nominated person or management representative at all times whilst performing remote/isolated work.

19.3 WORKER RESPONSIBILITIES

You are responsible for:

- ensuring you are familiar with weather and local conditions before commencing your journey

- assessing the risks posed by any hazards and controlling hazards where safe to do so
- contacting your manager where any hazard prevents you from performing your duties
- maintain regular contact with your nominated person in accordance with agreed communication procedures
- reporting any incidents and/or injuries sustained whilst performing remote/isolated work as soon as practicable.

20 PERSONAL PROTECTIVE EQUIPMENT (PPE)

20.1 INTRODUCTION

Exposure and injury can be prevented with the use of PPE where preventative measures for a hazard require additional control. Use of PPE is only to be considered when more effective control measures have been ruled out.

Hearing protection, eye protection, skin protection, respiratory protection and other personal protection can be achieved by wearing specific items developed to prevent injury.

20.2 ORGANISATION'S RESPONSIBILITIES

The organisation shall:

- ensure they supply suitable PPE and protective clothing
- that PPE and protective clothing meets relevant legislative, Australian Standard and/or industry requirements or guidelines
- ensure that information and training is provided in the correct use, wear and maintenance of PPE and protective clothing supplied
- ensure tasks are assessed to determine correct level of PPE required
- ensure that PPE and protective clothing being used are in an appropriate condition for the works being performed
- replace damaged or worn PPE and protective clothing and
- ensure their workers wear and use such items supplied to them.

20.3 WORKER RESPONSIBILITIES

You have a responsibility to:

- wear and use PPE and protective clothing provided as instructed
- maintain and care for the PPE and protective clothing supplied and

- report damaged or worn PPE to your manager.

20.4 DETERMINATION OF PPE AND PROTECTIVE CLOTHING

Determination of whether PPE and/or specific protective clothing are required will be based on a risk assessment of a hazard or task and, where relevant:

- information contained in the SDS for chemicals and dangerous goods
- operating procedures for plant,
- SWMS, and
- safe operating or work procedures.

20.5 SELECTION OF PPE AND PROTECTIVE CLOTHING

All PPE selected shall conform to the appropriate legislative, Australian Standard and/or industry requirements or guidelines. PPE supplied by the organisation remains the property of the organisation.

Before any PPE is used it should be inspected to ensure:

- a good fit on the user
- it is appropriate for the task and will protect the user from the hazards it is intended to control
- it does not introduce any new hazards
- is in good condition and
- the user understands the correct usage of the equipment.

If there are any defects or deficiencies found with the PPE after inspection it must be taken out of service immediately and reported to the manager. New products are continually being developed and made available this may mean an item that has been in use may be superseded and no longer available. If new equipment requires selection, the most effective PPE should be chosen according to the risk assessment or SDS information.

20.6 PROTECTION

Where defined by signage on plant, entrances to buildings/rooms or work sites all identified PPE must be worn.

21 ARMED ROBBERY

21.1 INTRODUCTION

Armed robbery may arise at any time this can threaten the health and safety of workers and customers. The organisation has an obligation to ensure health and safety of workers and customers.

21.2 ORGANISATION'S RESPONSIBILITIES

The organisation is responsible for:

- implementing preventative control measure in consultation with workers and
- providing support to workers after an armed robbery incident. The organisation should as far as reasonably practicable:
- ensure that workers have access to receive follow up post trauma counselling
- encourage workers to return to normal work activity once a medical clearance is obtained
- When workers are reluctant to return to work, the worker will consult with a doctor, psychiatrist or psychologist to make a decision on returning to work
- contacting any worker who takes time off in the days following the armed robbery, to ensure that they are receiving appropriate medical/ psychological help and
- provide the opportunity for workers to return in another role or at a different site if they are too traumatised to resume their previous role.

21.3 WORKER RESPONSIBILITIES

You must be aware of the following in the event of an armed robbery:

- stay calm and try to control emotions

- follow the offender's instruction at all times
- speak only when spoken too. Explain in advance what you have to do to comply. For Example: "I am now going to open the cash register"
- do not attempt to retaliate or apprehend the offender
- avoid eye contact and show your hands
- remember as many details as possible of the offender and incident and
- only activate the alarm systems when it is safe to do so.

Once the offender and or threat is removed from the premises, the following procedure will be adopted:

- close the premises immediately. All workers and customers are to remain on premises until the Police arrives to provide witness information.
- call Triple Zero (000) and provide:
- premise's address
- description of getaway vehicle and direction last seen and
- follow any instructions given by the emergency services operator.
- attend to any injured person and provide first aid
- isolate the premises and do not clean the crime scene, to ensure any evidence is not disturbed and
- when the police arrive provide as much information as possible.

22 SHARPS - SAFE USE, HANDLING AND DISPOSAL

22.1 INTRODUCTION

Sharps and needle/syringe injuries can cause considerable anxiety in the workplace because of the fear of contracting blood-borne diseases such as HIV, hepatitis B and hepatitis C as well as other diseases. 'Sharps' refers to objects or devices with sharp points, protuberances or cutting edges that are capable of cutting or piercing the skin, not limited to needles, syringes and acupuncture equipment.

This policy must be implemented in conjunction with the organisation's Infection Control Policy and in accordance with the Infection Control Program.

22.2 ORGANISATION'S RESPONSIBILITIES

The organisation is responsible for:

- identifying and assessing the risks associated with the use, handling and disposal of sharps
- controlling, as far as is practicable, the risk to workers who may be potentially exposed to sharps risks and
- ensuring that workers have the skills, knowledge and level of competence and/or qualifications to undertake any task that may present as a risk from the use, handling and disposal of sharps.

22.3 WORKER RESPONSIBILITIES

You are responsible for:

- ensuring that you have the skills, knowledge and level of competence and/or qualifications to undertake any task that may present as a risk of infection from the use, handling or disposal of any sharp
- following any procedure, guidance or instruction you receive on how to perform work or tasks that may present as a risk of infection from the use, handling or disposal of sharps, including the use of personal protective equipment, disposal containers and waste procedures

- taking reasonable care to prevent risks to other workers associated with sharps at the workplace notifying management of any risks or breaches of the sharps procedures or the Infection Control policy that you become aware of and
- immediately reporting to management any incident related to the use, handling or disposal of sharps.

22.4 NEEDLE PRICK

In the performance of your duties, if you happen to be pricked by a needle for whatever reason, you are to contact your team leader immediately. If the incident occurs after hours (5.00pm to 8.30am) or during a weekend shift, you are to contact after hours.

For all incidents you are required to fill out and complete an incident report. You are to attend a medical centre for any related first aid or injury management required.

23 SAFE KNIFE WORK

You are responsible for:

- observing where body parts are (including co-workers) in relation to the path of the blade and not undertaking knife related work if you or a co-worker could be injured by the knife
- keeping clear of knife work if you do not need to be in the area
- returning the knife to its sheath or storage surface upon completion of cutting and prior to walking around
- using the correct type of knife for the task and for its intended purpose
- keep the blade sharp to allow for less exerted effort and maintain good posture while keeping the blade under control
- only using a suitable, stable cutting surface with sufficient lighting
- cleaning up to prevent slippery floors and/or trip hazards
- understand the effects of a dull blade, such as requiring more force and tearing the material rather than cutting
- wear prescribed personal protective equipment, such as cut resistant clothing, steel mesh gloves, apron and closed in shoes and
- adhering to any tag out procedure for knives.

24 SUN SAFETY

24.1 INTRODUCTION

Workers who work outdoors for all or part of the day have a higher than average risk of skin cancer. This is because ultraviolet radiation in sunlight or 'solar UVR' is a known carcinogen. All skin types can be damaged by exposure to solar UVR. Damage is permanent and irreversible and increases with each exposure.

24.2 WORKERS RESPONSIBILITIES

You will:

- co-operate with measures introduced by management to minimise the risks associated with exposure to solar UVR
- follow information, training and instructions about using sun protection control measures
- participate in sun protection education programs
- act as positive role models and
- be responsible for their own sun protective practices at work.

25 WORKING LATE

25.1 INTRODUCTION

There may be occasions the organisation requires you to work late. While it is not always hazardous to work late or outside regular business hours, it can mean you are working alone and/or that you are traveling to or from work after dark. Areas that are considered safe during daylight hours can change and become lonely or isolated when the workday ends or after dark. Whether a situation is a high or low risk will depend on your location, the type of work you do, whether or not you interact with the public, and the consequences of an emergency, accident or injury. It is important to assess each location and situation individually. In many situations, when you are working late, you are working alone, or the risks and solutions are similar to when you are working alone.

25.2 ORGANISATION'S RESPONSIBILITIES

The organisation is responsible for:

- ensuring a risk assessment has been completed for the work to be carried out after normal work hours have ended and
- providing information on increased risks associated with the location, environment and layout of the site including access points and exits after normal work hours have ended.

25.3 WORKER RESPONSIBILITIES

You are responsible for:

- ensuring you comply with any site-specific health and safety policies and procedures
- always letting the Organisation, family member or security guard know you are working late and when you expect to leave
- using the working late checklist to check you are following safe procedures
- using the "buddy system". Arrange to work late on the same night as

a friend or colleague

- planning ahead and think about which areas are safe where you can retreat to and/or call for help
- before it is dark outside, moving your car to a well-lit area that is close to your building or a parking lot attendant
- before your co-workers leave, checking that all the doors and windows are locked and make sure nobody is in the washrooms and storage room
- if you enter a room and suspect that someone might be inside, do not call out. Back out quietly and go to a safe area with a lockable door. Call for help
- if you encounter someone you don't know, indicate that you are not alone. Say "my supervisor will be right here and will be able to help you"
- if you suspect someone is lurking outside, call the police or security officers
- asking the Organisation to consider providing safe transportation home or to parking areas after hours. Consider designating parking spots that are close to the building and well-lit for those who work after hours and
- being aware of the services offered by your local transit company for after-hours commuters (eg they may have a "request stop" service that allows commuters to get off anywhere along the route after dark, rather than at a designated stop).