

Work Health and Safety Procedures and Accident Management Procedures

1. Responsibilities

All staff and volunteers are required to follow WHS policy and safety management procedures. All staff are responsible for;

- Taking immediate action to eliminate or reduce hazards,
- Reporting observed safety hazards to their supervisor or appropriate manager if their supervisor is not available,
- Participating in consultation processes wherever possible,
- Attending required WHS awareness training, and
- Observing and promoting safe working practices.

1.1. The Chief Executive Officer (CEO)

The CEO is responsible for the implementation of WHS policy via a WHS procedure that is purpose built for MHF and takes all reasonable and practical measures to ensure that;

- The workplace is safe and without risks to health
- The behaviour of all persons in the organisation is safe and without risk to health
- Information about WHS is communicated to all staff
- There is regular discussion about WHS issues at all committee meetings
- Consultation with staff about matters impacting on WHS is thorough
- There is a register of accidents, incidents and injuries
- Regular workplace inspections take place to identify health and safety risks throughout the organisation
- Development and implementation of suitable control measures for the management of risks and hazards that cannot be eliminated
- Currency of appropriate insurances covering accidents and injury including Workers Compensation, Public Liability, and Motor Vehicle Third Party.

If the CEO does not have the necessary authority to fix a particular problem, the matter should be promptly reported to the appropriate person or body.

1.2. MHF Management Committee

The MHF Management Committee reports to the CEO and will ensure that the Work Health and Safety Management System is fully implemented. Specifically they are responsible for:

- Identifying and providing essential information and training
- Provision of adequate staff supervision
- Performing workplace inspections
- Including WHS and Risk as agenda items for all team meetings
- Assisting in the development of Emergency Evacuation Plans and conducting drills at least annually.

1.3. WHS Procedure

WHS is managed through MHF through establish management chains. These management chains are set out in the organisational chart.

WHS and risk must be a standing agenda item for all committee and team meetings held in MHF. This will facilitate weekly discussions within the organisation and timely management of WHS issues as they arise.

The CEO and managers within the organisation are responsible for ensuring WHS and risk are actively discussed at each meeting they chair and as a minimum must:

- Actively and positively communicate any WHS information to their team
- Actively encourage their team to communicate any WHS matters to them
- Report all WHS raised in their team with the Management Committee
- Consult with their team if there are any proposed changes to WHS management in MHF

2. Identifying Quality Equipment

Research into the safe application and use of any equipment or consumables should be conducted as part of the selection process prior to any new purchase. Suitability of the product in relation to the expected use, relevant product quality features should be evaluated, as well as associated hazards identified.

Manufacturer's data sheets and user guides must be obtained and made available to all staff and training requirements identified.

3. Accident and Injury Prevention

WHS accident and injury prevention measures are partially achieved via formal processes contained in the Risk Management policy and procedures. Hazard identification is undertaken in both the program assessments and routine workplace inspections.

This however does not eliminate the need for staff to remain vigilant in identifying and responding to new or existing threats.

Accident and injury prevention and incidents will be achieved via a combination of control methods including:

- Relevant staff training
- Maintenance of safety in the working environment
- Regular maintenance of equipment
- Appropriate supervision
- Identifying and implementing safe work practices
- Having effective emergency response processes
- Prompt action in removing or controlling potential hazards once identified

- Maintaining effective communication pathways
- Reporting and evaluation of all accidents injuries and near misses to inform continuous improvement
- Posting of relevant warning signs and safety information on billboards or other public places where it can be readily accessed.

4. Managing Workplace Injuries

The best practices and planning will not eliminate all possibilities for incidents, accidents and injuries occurring within the work place. At such times it is essential that staff remain calm and follow appropriate steps to manage the situation.

Follow these steps for crisis management;

1. Assess the situation
2. Ensure safety of self and others
3. Communicate with injured parties and coordinate other available persons
4. Seek appropriate assistance as required
5. Provide appropriate interventions to protect and preserve life

4.1. Provide First Aid

First Aid is any emergency care given to an injured or ill person before medical assistance arrives. For minor injuries the provision of first aid may negate the need for medical attention. The goals of first aid interventions are too;

- Preserve life
- Protect the unconscious
- Prevent the condition worsening
- Promote recovery
- Seek medical assistance

4.2. Transport to Medical Treatment

For any injury requiring external medical assistance, transport must be sought immediately. Given that the person suffering injury may also be subject to shock or numerous other influences that may impair their judgement it is essential that transport to medical assistance be arranged on their behalf.

Where there is no visible sign of injury, and the person is conscious, and able to self mobilise, it is reasonable for a manager or another staff member to transport them to medical assistance.

Where the patient is unconscious, or requiring ongoing application of first aid interventions, or unable to self mobilise, it is essential that an ambulance be called to provide medical assistance and transport.

4.3. Reporting

It is the staff member's responsibility to report injuries to their supervisor immediately following any event, and complete an Incident report detailing the event within 24 hours. Where the person injured is unable to complete this report themselves, it is the responsibility of their supervisor to investigate the event and fully record all details.

Incident reports relating to WHS must be forwarded to the CEO within 48 hours. The CEO will identify additional follow up requirements such as:

- Emergency modifications to the work place or work practices
- Identify requirements for debriefing or counselling through the Employee Assistance Program
- Forward Injury Report to the Workers Compensation Insurer
- Identifying claim requirements against Workers Compensation Insurance
- Incident is reviewed by the Management Committee at their next meeting
- Managing any return to work plans

Accidents will be categorised according to the classifications contained in the MHF Risk Analysis Procedures

SEVERITY		EXAMPLE
1	Insignificant	No injuries
2	Minor	First aid treatment on site fully meets needs.
3	Moderate	First aid applied, follow up external medical treatment required
4	Major	Extensive injuries, immediate emergency medical assistance required
5	Catastrophic	Death or Permanent Disability

4.4. Absence Due to Workplace Injury

If a staff member requires time off as a result of their injury, a medical certificate must be obtained from their doctor, so that a worker's compensation claim may be lodged. The injured party must inform their doctor that the injury was sustained in the workplace or whilst travelling to or from the workplace.

The medical certificate must be forwarded to the CEO so that the appropriate paperwork may be completed for the insurer.

4.5. Medical Expenses

MHF is required by the ACT *Workers Compensation Act 1951* to cover the costs of Medical Expenses incurred due to workplace injuries, or injuries sustained whilst travelling to or from the workplace. This legislation also requires that workers who are unable to attend work due to workplace injuries continue to receive wages equivalent to what they would have earned had they not been injured.

In order to control the risk to the organisation in regard to these expenses, and comply with legislation it is the responsibility of the CEO to ensure MHF maintains currency of appropriate insurance cover.

Medical Expenses includes health professional fees, medications, therapy expenses, essential aides or therapeutic equipment, and travel expenses to health professional appointments.



MHF are required to notify our insurer of all injuries within 48 hours of becoming aware of the injury. The workers compensation insurer must make contact with the injured party, the employer and the nominated treating doctor within 3 working days of receiving an injury notification.

Staff must advise medical practitioners when they are being treated for an injury that occurred in the workplace, and forward invoices and receipts to the CEO for reimbursement, until the insurer makes alternative arrangements for managing payment of ongoing medical expenses.

4.6. Return to work

Where significant injuries were sustained, requiring extended periods away from the workplace, and successful return to the workplace may require coordination with other rehabilitation requirements, it is essential to develop a formal Return to Work Plan.

It is the insurer's responsibility to develop and negotiate a formal Return to Work plan any time where an injury has resulted in a worker being unfit for work for more than 7 days. A Return to Work plan typically involves reductions or changes to the person's usual duties and/or hours of work.

The CEO will negotiate with the insurer, or where appropriate the worker, to identify suitable working hours and duties, that are consistent with medical advice, which are meaningful, productive and appropriate for the injured worker's physical and psychological condition.

The CEO may request specific assessments be conducted (e.g. by a psychologist, GP, or physiotherapist) in order to make informed decisions regarding a 'Return to Work' plan.

5. WHS Consultative Framework

MHF has adopted a consultative framework for addressing WHS to ensure it:

- Draws on the knowledge, experience and ideas of staff and volunteers,
- Encourages participation and input to improving safety at work,
- Meets the requirements for consultation under the *ACT Work Health and Safety Act 2011*.

MHF will implement consultative processes when changes that may affect health, safety or welfare are proposed to the premises where people work, the systems or methods of work, the equipment or substances used for work. Additionally, MHF will seek the input of staff;

- When risks to health and safety arising from work are assessed or when the assessment of those risks is reviewed
- When decisions are made about the measures to be taken to eliminate or control risks
- When introducing or altering the procedures for monitoring risks
- When decisions are made about the adequacy of facilities for the welfare of employees

Consultation will be achieved at a variety of levels including:

- Ongoing communication in regard to specific service delivery and workplace issues will be an agenda item at all Board, committee and team meetings.
- Ongoing monitoring of broad and specific WHS management effectiveness and analysis of accidents and injuries will be conducted by the Management Committee, with a mandate to make recommendations for continuous improvement.

Document History				
Author	Version	Amendment	Owner	Date of Effect
Policy Working Group	1.0	Document Created	MHF Board	14/1/2013
CEO	2.0	Revised following WHS Consultation period relating to shift away from WHS Committee to WHS structure managed through established meeting scheduled as standing agenda items	Board	1/1/24
CEO	3.0	Revised wording	CEO	1/02/2024