City of Kwinana

Audit and Risk Committee Meeting

14 June 2021

Minutes

TABLE OF CONTENTS

Present:

MAYOR CAROL ADAMS, OAM
DEPUTY MAYOR P FEASEY
COUNCILLOR M ROWSE
COUNCILLOR S LEE

COMMITTEE MEMBER, G MCMATH – Chair
COMMITTEE MEMBER, B ARNOLD

MR W JACK	-	Chief Executive Officer
MRS B POWELL	-	Director City Engagement
MR D ELKINS	-	Director City Infrastructure / Acting Director City Business
MRS M COOKE	-	Director City Regulation
MRS S WILTSHIRE	-	Manager Human Resources
MR R MARK	-	Manager Governance and Legal
MRS L BARKER	-	Functions Officer
MS A MCKENZIE	-	Council Administration Officer

PRESS - 0
PUBLIC - 0

1   Opening and announcement of visitors

The Chair, Gaye McMath declared the meeting open at 5:30pm and welcomed the Elected Members and the City Officers in attendance.

2   Acknowledgement of country

The Chair read the Acknowledgement of county

"It gives me great pleasure to welcome you all here and before commencing the proceedings, I would like to acknowledge that we come together tonight on the traditional land of the Noongar people and we pay our respects to their Elders past and present."

3   Attendance, apologies, Leave(s) of absence (previously approved)

Apologies

Nil

Leave(s) of Absence (previously approved):

Nil

4   Declarations of Interest (financial, proximity, impartiality – both real and perceived) by Members and City Officers

Nil

5   Confirmation of minutes

5.1   Audit Committee Meeting held on 2 March 2021:

<u>**COMMITTEE DECISION**</u>

MOVED CR P FEASEY   SECONDED CR S LEE

That the Minutes of the Audit Committee Meeting held on 2 March 2021 be confirmed as a true and correct record of the meeting.

**CARRIED
5/0***

*Committee Member, Ben Arnold abstained from voting on confirming the minutes of the Audit and Risk Committee minutes of 2 March 2021.

6   Reports

6.1   Occupational Safety and Health (OSH) Statistical Data Report, the Safety and Health Management System Framework – Tier Three Document and LGIS WorkCare Performance Based Claims (Workers Compensation) Report

DECLARATION OF INTEREST:

There were no declarations of interest declared.

SUMMARY:

This statistical data is provided to the Audit and Risk Committee for noting.

Council has endorsed a Health and Safety Policy to meet its moral and legal obligation to provide a safe and healthy work environment for all employees, contractors, customers and visitors. This commitment extends to ensuring the City's operations do not place the community at risk of injury, illness or property damage. At every Audit and Risk Committee Meeting the Committee receives a report detailing statistical data. This report entitled the City of Kwinana OSH Statistical Data Report is enclosed as Attachment A.

Relevant to the management of workplace safety is the City's Safety plan. Ultimately, this plan should be considered by the Audit and Risk Committee and, if appropriate, endorsed. Officers have determined that the current Safety Plan does not set out a suitable improvement strategy, and requires revision. Accordingly, Officers are currently developing a Safety and Health Management System Framework, using a risk approach to direct resources to address the City's biggest risks, with an overall approach of perpetual continuous improvement. The third tier of the framework has been completed and is enclosed as Attachment B.

LGIS WorkCare Performance Based Claims Report as Attachment C.

OFFICER RECOMMENDATION:

That the Audit and Risk Committee note:

1. City of Kwinana OSH Statistical Data Report detailed in Attachment A.
2. Safety and Health Management System Framework, Tier Three document detailed in Attachment B.
3. LGIS WorkCare Performance Based Claims Report as Attachment C.

DISCUSSION:

The OSH Statistical Data Report is provided to the Audit and Risk Committee at each Audit and Risk Committee Meeting. The City assesses the incident reporting data to provide information on the nature and extent of injury and/or disease, including a comprehensive set of data for the workplace, to assist in the efficient allocation of resources, to identify appropriate preventative strategies and monitor the effectiveness of these strategies and to provide a set of data for benchmarking against other Local Governments. As a result, the City can adequately identify, evaluate and manage the safety and health aspects of its workforce operations.

6.1 OCCUPATIONAL SAFETY AND HEALTH (OSH) STATISTICAL DATA REPORT, THE SAFETY AND HEALTH MANAGEMENT SYSTEM FRAMEWORK – TIER THREE DOCUMENT AND LGIS WORKCARE PERFORMANCE BASED CLAIMS (WORKERS COMPENSATION) REPORT

Summary of Statistical Data:

The statistical data report details information over a three-month period, 1 March 2021 to 31 May 2021. From the represented data, it is noted a decrease in incident frequency trend with five incidents reported in March and the total incidents reported for April and May combined was five.

A total of 10 incidents were recorded for the three-month period. Five from the City Infrastructure directorate, three from the City Development and Sustainability directorate, and two from the City Engagement directorate. (Noting, the teams that are domiciled to these directorates and have reported incidents have teams that are considered as "high risk" teams due to their operational nature. One of the incidents was listed as a Lost Time Injury, two first aid, three near misses, and five reports only).

Of note, is the City's current format for statistical data reporting is approaching one year's collation of data, with reporting having commenced from 1 July 2020. From 1 July 2021, it is the intention to provide further information and trending of data to include the incident frequency rates.

Safety and Health Management System Framework:

The City is currently developing a Safety and Health Management System Framework which will provide a structured approach to the City's safety and health activity, foster and protect personnel well-being, meet legislative requirements for safety and health, minimise overall risk from the City's perspective and promote continuous improvement in safety and health performance.

The framework will comprise of a three-tiered approach, with the tier three documentation now finalised. Safety and Health management processes shall be implements based on the commitments in the City's policy, and the performance requirements are outlined in this document. The tier three document has a focus on the procedures and standard operating protocols that comprise the framework.

LGIS WorkCare Performance Based Claims Report:

As part of the process of updating the Audit and Risk committee on the City's insurance program, City Officers have provided a brief to the Committee on the performance based workers' compensation insurance program utilised by the City. The performance based program rewards strong performance in safety by allowing an overall lower insurance premium where the total value of claims in a year is low. However, where the value of claims exceeds a minimum threshold, the total premium paid increases to an upper cap. Accordingly, this method does create a risk that the total premium paid in a particular year will be higher.

Relevant to this approach to workers' compensation insurance is appreciating that it is possible for a single relevantly minor incident, or a small number of incidents, to result in a higher premium (note, minor in terms of the cause, not the consequence – e.g. a twisted knee from uneven ground might result in ongoing rehabilitation and surgery). Accordingly, despite managing risk to the lowest reasonable level, it should still be expected that there will be incidents that result in the minimum threshold being exceeded in a year. For this reason, it is important to consider trends over time, to ensure the City is continuously improving its systems to manage workplace safety risks.

6.1 OCCUPATIONAL SAFETY AND HEALTH (OSH) STATISTICAL DATA REPORT, THE SAFETY AND HEALTH MANAGEMENT SYSTEM FRAMEWORK – TIER THREE DOCUMENT AND LGIS WORKCARE PERFORMANCE BASED CLAIMS (WORKERS COMPENSATION) REPORT

To mitigate the risk of a higher insurance premium in a single year, the Audit and Risk committee has previously recommended funds be allocated to a reserve, to be drawn on in the case of additional premiums (note premiums can be backdated, where an injury has an ongoing cost) for a given year. As part of the forward budget, City Officers have allowed for a standard premium of 2% of salaries (this is the premium the City would pay if it was not part of the performance-based system), with any savings being transferred to reserve. A reserve of $900k will allow for two years of maximum premiums. The reserve has a current balance of approximately $140k, with additional funds being transferred into the reserve at the end of the financial year, so is expected to have a closing balance of approximately $325k. Once a reasonable reserve balance has been reached, savings in premiums can be reallocated to other City programs or projects.

Attachment C provides the latest update from the City's insurer, LGIS (March 2021). To March 2021, this financial year, the City's claims total (including claims still to be paid) is just under $100k. The City's minimum threshold is $169,710. In the case that total claims exceed $169,710, the City will need to pay the full minimum premium of $311,842, representing 1.35% of total salaries. The minimum premium is $62,383 more than the discounted premium the City is charged if the minimum claims threshold is not exceeded (the City has only been charged $249,474 this financial year, receiving an additional discount on the minimum premium).

If the City is required to pay the minimum premium (i.e. the additional discount is lost due to exceeding $169,710 in claims), there are no further costs to the City until total claims for the year reach $233,881. In the case this latter threshold is exceeded, the City is charged 125% of the total cost of additional claims to a maximum total cost (including premiums already paid) of $692,982, representing 3% of the cost of salaries.

Based on the numbers above, if the City maintains the same claim rate for the remainder of the financial year, the City will receive a total benefit of $443,508 over the maximum possible premium, and $212,514 savings over the standard 2% of salaries based premium.

Attachment C also shows amounts outstanding from previous years, which are updated as old claims are finalised. Total additional premiums outstanding to date are just under $10,000.

The Audit and Risk Committee is asked to note the City's current performance, and the summary of the City's current position, as per Attachment C.

LEGAL/POLICY IMPLICATIONS:

Regulation 17 of the Local Government (Audit) Regulations 1996 provides:

17.   CEO to review certain systems and procedures

    (1)   The CEO is to review the appropriateness and effectiveness of a local government's systems and procedures in relation to —
(a)   risk management; and
(b)   internal control; and
(c)   legislative compliance.

6.1 OCCUPATIONAL SAFETY AND HEALTH (OSH) STATISTICAL DATA REPORT, THE SAFETY AND HEALTH MANAGEMENT SYSTEM FRAMEWORK – TIER THREE DOCUMENT AND LGIS WORKCARE PERFORMANCE BASED CLAIMS (WORKERS COMPENSATION) REPORT

> (2) *The review may relate to any or all of the matters referred to in subregulation (1)(a), (b) and (c), but each of those matters is to be the subject of a review not less than once in every 3 financial years.*
> (3) *The CEO is to report to the audit committee the results of that review.*

FINANCIAL/BUDGET IMPLICATIONS:

There are no financial/budget implications as a result of this report.

ASSET MANAGEMENT IMPLICATIONS:

There are no asset management implications as a result of this report.

ENVIRONMENTAL/PUBLIC HEALTH IMPLICATIONS:

There are no environmental implications as a result of this report.

There are no implications on any determinants of health as a result of this report.

STRATEGIC/SOCIAL IMPLICATIONS:

This proposal will support the achievement of the following outcome and objective detailed in the Corporate Business Plan.

Plan	Outcome	Objective
Corporate Business Plan	Business Performance	7.1 Attract and retain a high quality, motivated and empowered workforce so as to position the organisation as an "Employer of Choice"

COMMUNITY ENGAGEMENT:

There are no community engagement implications as a result of this report.

COMMITTEE DECISION

MOVED CR S LEE   **SECONDED MAYOR C ADAMS**

That the Audit and Risk Committee note:

1. **City of Kwinana OSH Statistical Data Report detailed in Attachment A.**
2. **Safety and Health Management System Framework, Tier Three document detailed in Attachment B.**
3. **LGIS WorkCare Performance Based Claims Report as Attachment C.**

CARRIED
6/0

6.1 OCCUPATIONAL SAFETY AND HEALTH (OSH) STATISTICAL DATA REPORT, THE SAFETY AND HEALTH MANAGEMENT SYSTEM FRAMEWORK – TIER THREE DOCUMENT AND LGIS WORKCARE PERFORMANCE BASED CLAIMS (WORKERS COMPENSATION) REPORT
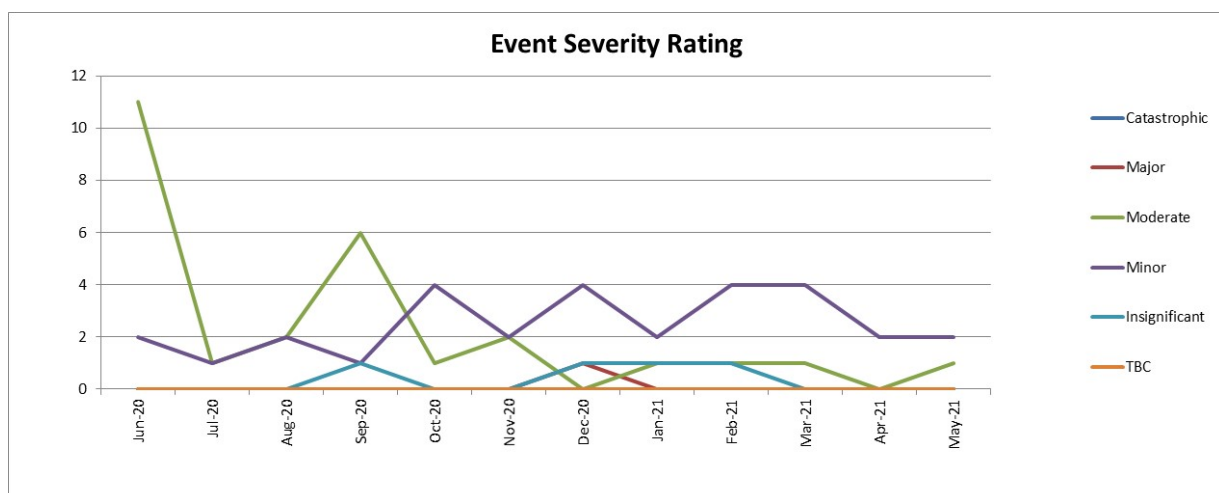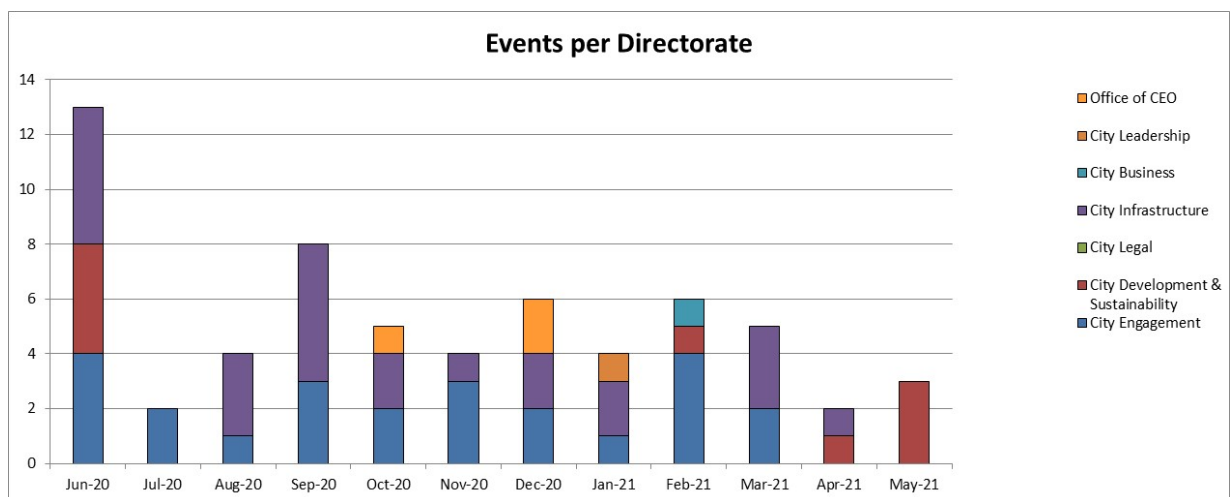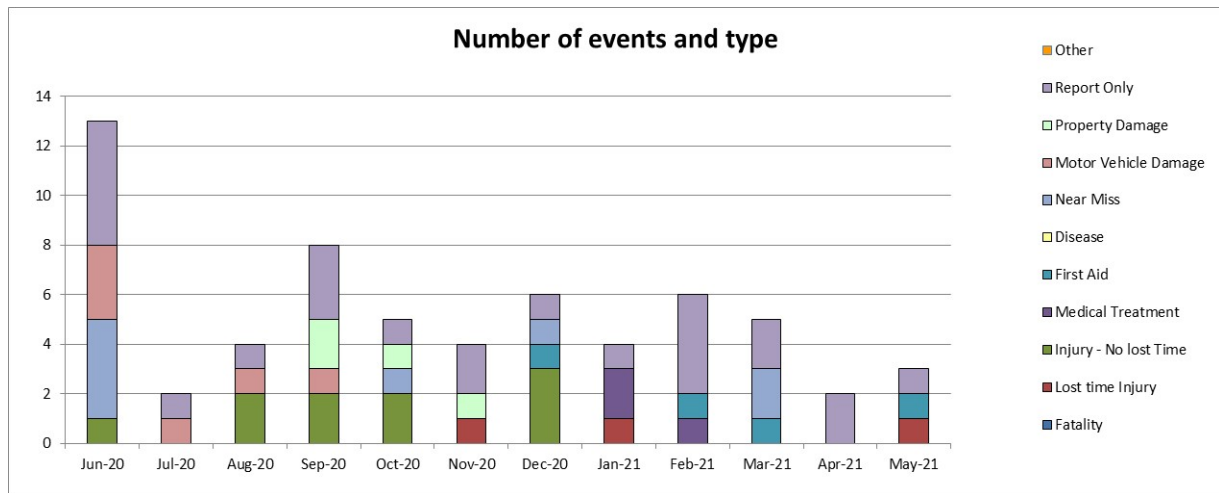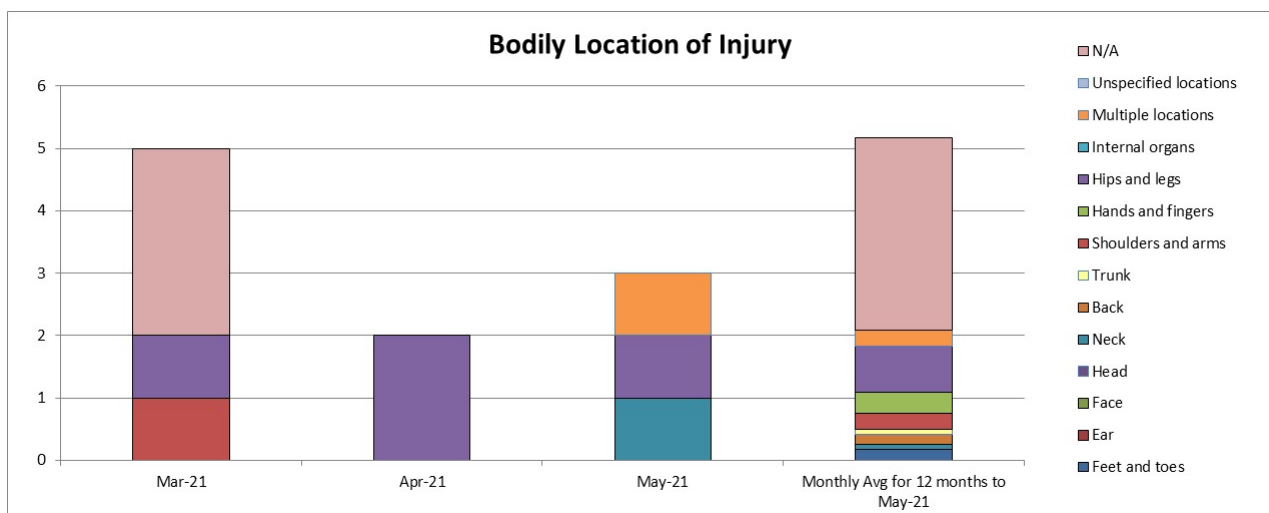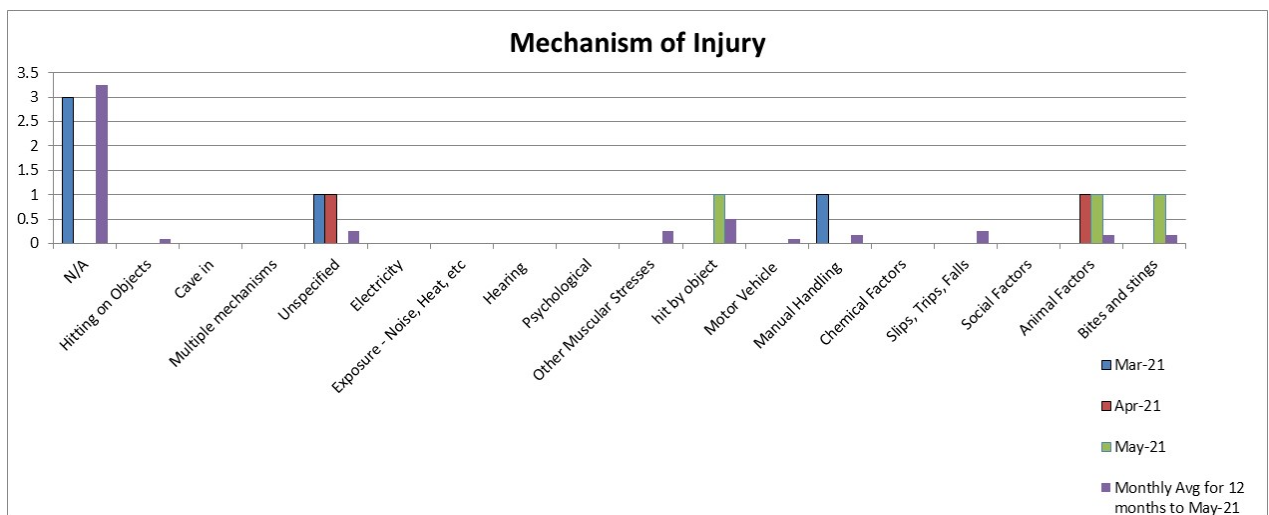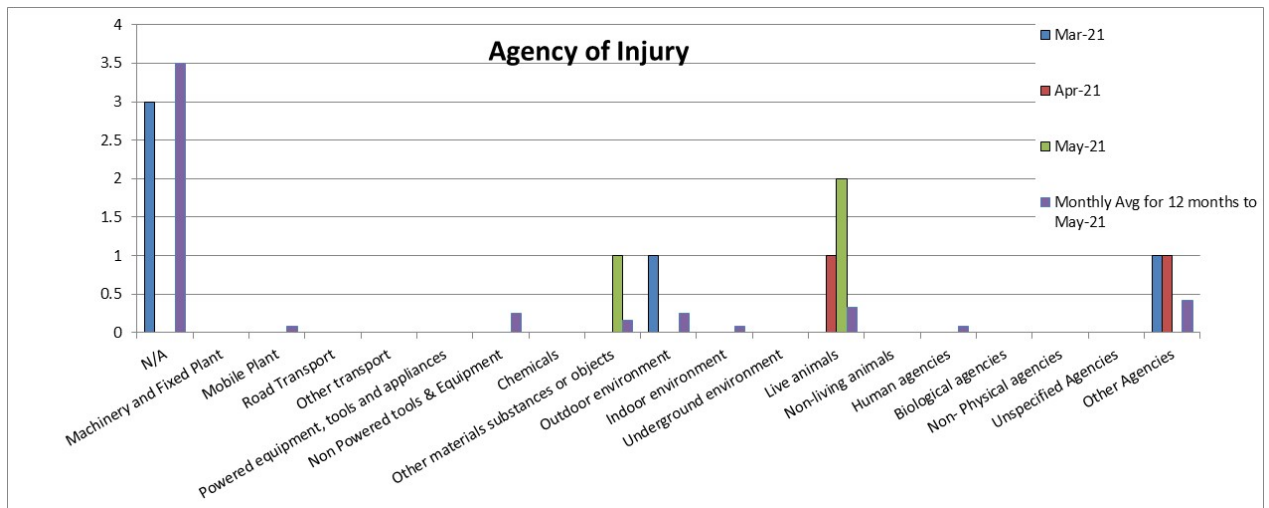
Audit and Risk Committee comments:
- Continue to encourage the reporting of all incidents, injuries and near misses.
- The Incident frequency trend has reduced from previous months.
- Greater level of detail provided with the statistics would be appreciated.
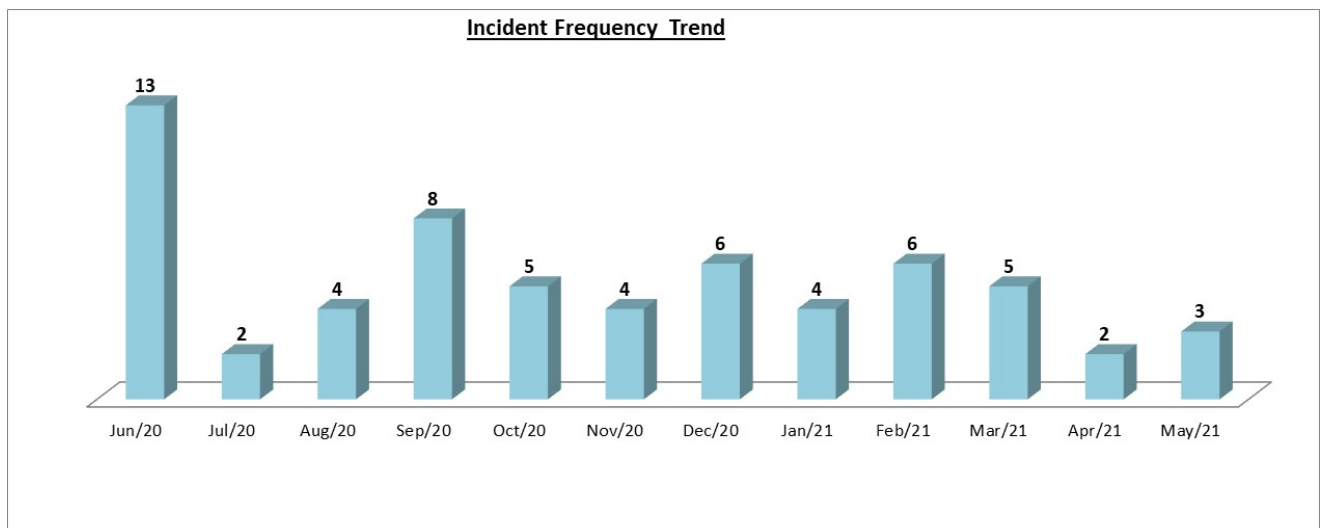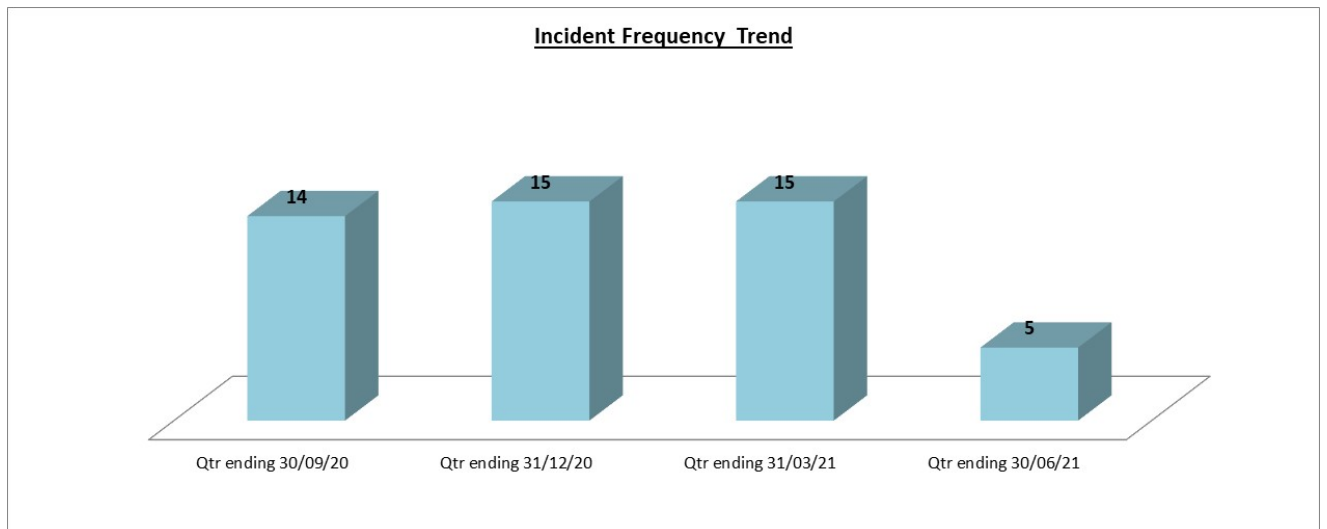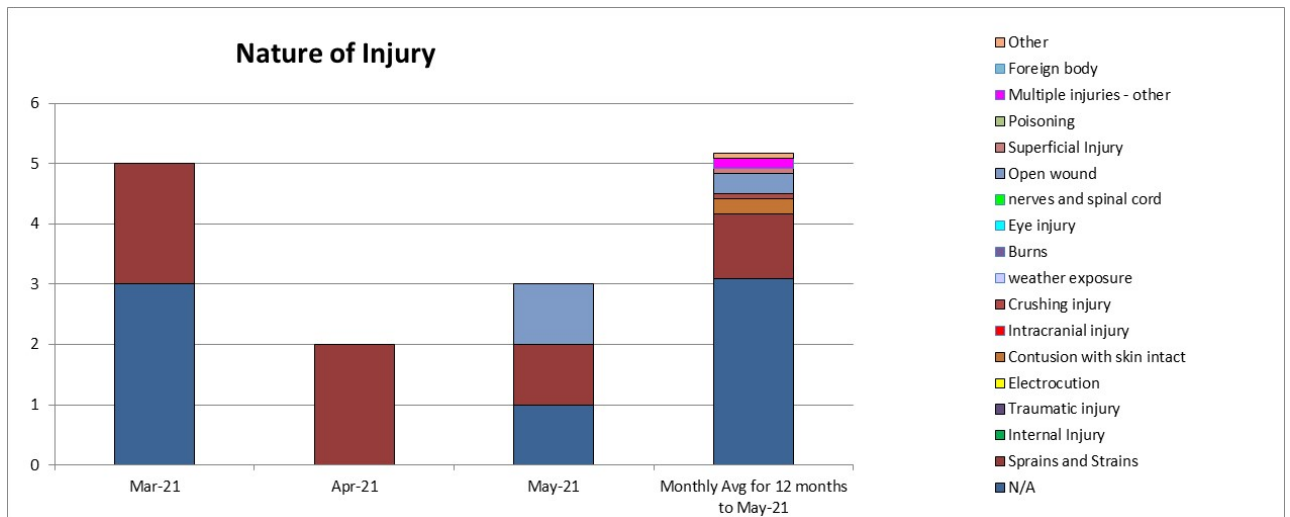
Audit and Risk Committee noted:

- That N/A is the abbreviation for 'Not Available' in Attachment A, within the Bodily Location of Injury graph.
- Within Attachment A, the Events per Directorate does not refer to the current City directorates due to the data being collated in a register that is not easily amended throughout the year. Following 30 June 2021, it will allow amendments to be made, including the formalising of the organisational structure.
- Incidents are recorded on an incident register, then all information captured is provided within a report, the report includes the details of the incident, what the corrective actions were and lessons learnt.
- A lost time injury was reported within the City Development and Sustainability directorate and is currently under investigation. It was confirmed that the lost time injury is a Workers Compensation Claim, once the investigation is complete the City will be looking at processes, corrective actions and mitigation, all of which will be presented to the City's OSH Committee for implementation.
- That notification to the Audit and Risk Committee and Council of a severe incident individually depends on the nature of the incident as per Tier 1, being the overview of the City's Policy and Framework.
- The Occupational Safety and Health (OSH) Policy review is due for completion, following the recently passed *Work, Health and Safety Act 2020.* The City is awaiting the release of the relevant Regulations prior to commencing the policy review. In addition, the policy review is recorded as an action within the City's OSH Management Action Plan.
- That Reporting an Incident Flow Chart (documented in Promapp) within Attachment B refers to Outputs, this would include incidents being monitored and revised which currently the OSH Committee prepare a report to the Executive Team, this report has the intention of then being presented to the Audit and Risk Committee (currently yet to occur).
- In regards to Attachment B, Contractor Management it was confirmed that as a principal the City has a full legal responsibility to ensure every contractor has safety procedures and processes and part of procurement includes this check. The City has a system in place to register, track and monitor. The outsourcing of risk is not an option.
- Incident reporting is made available to City Officers due to the incidental statistics being provided within the Team Meeting Agenda Template, which is consistent across all City Departments. The template is issued from a central point, distributed to all teams and then the item in confirmed as being reviewed and noted within each teams meeting minutes.
- Attachment C, LGIS WorkCare Performance Based Claims was confirmed as a performance based program rewards strong performance in safety by allowing an overall lower insurance premium where the total value of claims in a year is low. However, where the value of claims exceeds a minimum threshold, the total premium paid increases to an upper cap. Accordingly, this method does create a risk that the total premium paid in a particular year will be higher.
- The City has requested that LGIS provide a flow chart for clearer explanation of the LGIS WorkCare Performance Based Claims system.

City of Kwinana – OSH Statistical Data Report – 31 May 2021

Number of events and type

Events per Directorate

Event Severity Rating

Agency of Injury

Legend: Mar-21, Apr-21, May-21, Monthly Avg for 12 months to May-21

Categories: N/A, Machinery and Fixed Plant, Mobile Plant, Road Transport, Other transport, Powered equipment, tools and appliances, Non Powered tools & Equipment, Chemicals, Other materials substances or objects, Outdoor environment, Indoor environment, Underground environment, Live animals, Non-living animals, Human agencies, Biological agencies, Non- Physical agencies, Unspecified Agencies, Other Agencies

Mechanism of Injury

Categories: N/A, Hitting on Objects, Cave in, Multiple mechanisms, Unspecified, Electricity, Exposure - Noise, Heat, etc, Hearing, Psychological, Other Muscular Stresses, hit by object, Motor Vehicle, Manual Handling, Chemical Factors, Slips, Trips, Falls, Social Factors, Animal Factors, Bites and stings

Legend: Mar-21, Apr-21, May-21, Monthly Avg for 12 months to May-21

Bodily Location of Injury

Legend: N/A, Unspecified locations, Multiple locations, Internal organs, Hips and legs, Hands and fingers, Shoulders and arms, Trunk, Back, Neck, Head, Face, Ear, Feet and toes

Categories: Mar-21, Apr-21, May-21, Monthly Avg for 12 months to May-21

Nature of Injury

Legend:
- Other
- Foreign body
- Multiple injuries - other
- Poisoning
- Superficial Injury
- Open wound
- nerves and spinal cord
- Eye injury
- Burns
- weather exposure
- Crushing injury
- Intracranial injury
- Contusion with skin intact
- Electrocution
- Traumatic injury
- Internal Injury
- Sprains and Strains
- N/A

Incident Frequency Trend

Qtr ending 30/09/20	Qtr ending 31/12/20	Qtr ending 31/03/21	Qtr ending 30/06/21
14	15	15	5

Incident Frequency Trend

Jun/20	Jul/20	Aug/20	Sep/20	Oct/20	Nov/20	Dec/20	Jan/21	Feb/21	Mar/21	Apr/21	May/21
13	2	4	8	5	4	6	4	6	5	2	3

Safety and Health Management System Framework Tier 3

Procedures and Standard Operating Protocols

CONTENTS

POLICY

Occupational Safety and Health (OSH) Policy			
Approved by:	Executive Team		
Department:	Human Resources (Internal Policy)		
Original Approval Date	2006	Review Approval Date	October 2017
Next Review Deadline	March 2021	Document #	D16/34075 v*
Occupational Safety and Health Act 1984; *Occupational Safety and Health Regulations 1996*; *Workers Compensation and Injury Management Act 1981*;			

Policy Rationale:

The City of Kwinana (the **City**) recognises that it has a responsibility for the safety and health of all persons employed or engaged by the **City** and is committed to achieving zero harm within the **City's** working environment.

Occupational Safety and Health (OSH) Policy Statement(s):

The **City** recognizes its corporate responsibility under the *WA Occupational Safety and Health Act (1984)* and associated legislation and is fully committed to ensuring, that as far as practicable, it will provide a working environment that is without risk to its employees and others in the **City's** workplaces.

The **City** is committed to meeting its moral and legal obligation to provide a safe and healthy work environment for employees, contractors, customers and visitors. This commitment extends to ensuring the **City's** operations do not place the community at risk of injury or illness.

The **City**, in partnership with its employees, will have systems and processes to recognize the potential risks associated with hazards that may exist within the workplace and will take practical steps to provide and maintain a safe and healthy work environment for all persons.

The **City** will encourage and promote a culture of hazard identification, injury prevention and OSH awareness throughout the organization. In particular, the **City** will:-

- Be responsive to the needs and diversity of the organisation through the principles of equity, equality, access and participation;
- Recognise that all persons in the workplace are valued and that all reasonable endeavours will be undertaken to ensure their safety;
- Foster an organizational culture where all employees share their safety responsibilities;
- Consult with employees and management by means of the **City's** OSH Committee, safety and healthy representatives, risk assessments and hazard identification and prevention;
- Comply with all relevant legislation and seek to implement best practice;
- Ensure risk management processes are effectively being undertaken to eliminate or control risk exposure to the **City** as well as identify, promote and continuously improve safety and health performance within the organization;
- Provide and maintain relevant policies, procedures, systems, workplace information and training, associated programs and consultative mechanisms to support safety and health in the workplace; and
- Monitor the **City's** safety and health performance.

_____   _____

Wayne Jack   Date

Chief Executive Officer

CITY OF KWINANA – SAFETY AND HEALTH PILLARS

Safety and Health Management is an integral part of business planning with Safety and Health Management goals and targets established to drive continual improvement in performance.

Safety and Health Foundations

	HOME SAFELY EVERYDAY
VISION	**BEHAVIOUR**
CAUSES	POLICY / PLANNING / RESOURCES / IMPLEMENTATION / DELIVERY / MONITORING, MEASUREMENT / REPORTING & REVIEW
CONTROL	
MISSION	To strengthen and grow a safety culture at the City of Kwinana

SAFETY Control Pillars

POLICY	PLANNING/ RESOURCES	IMPLEMENTA-TION / DELIVERY	MONITORING, MEASUREMENT & EVALUATION	REPORTING & REVIEW
• OSH Policy & Statement	• OSH Action Plan	• Safety Inductions	• Contractor Audits	• Monthly Reporting
• Safety & Health Framework	• Leadership & Accountability	• Annual Training Program Compliance	• Internal Audits	• OSH Committee Reporting
• Take 5, JSAs, SWMS, Procedures / Guidelines, Registers	• Safety Reps	Training	• External Audits	• Statistics and Trends
	• Terms of Reference /Duty Statements	• Well-being Programs	• KPIs	• Executive Reporting
• Finance / Budgets	• Employee Communication & Consultation	• Return to Work Programs	• Safety & Health Awards	• Audit & Risk ¼ Reporting
	• Emergency Preparedness	• Systems – ChemAlert, Rapid Induct	• Appraisals	
	• Risk Procedures	• Ergonomic Program	• Surveys	

SAFETY AND HEALTH MANAGEMENT SYSTEM FRAMEWORK

INTRODUCTION

The purpose of the City of Kwinana's (the **City**) Safety and Health Management System Framework is to:

1. Provide a structured approach to the **City's** safety and health activity.
2. Foster and protect personnel well-being.
3. Meet legislative requirements for safety and health.
4. Minimise overall risk from the **City's** perspective.
5. Promote continuous improvement in safety and health performance.

These documents set out policy and specifies desired outcomes. It defines responsibilities and accountabilities, provides guidance on where to obtain additional information, and is the basis against which Safety and Health programs will be audited and appraised.

TIER 1 — City's Policy and Framework (Overview)

TIER 2 — City's Safety & Health Systems, Standards & Procedures (What & How)

TIER 3 — Safety & Health Framework Procedures and Operating Processes. (How)
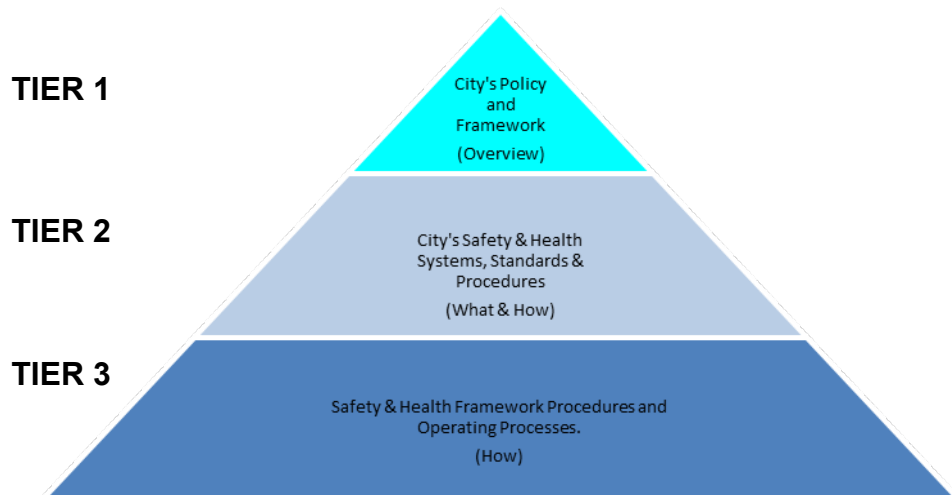
Tier 1: City's Safety and Health Framework
This is mandatory to all City operations as defined in the Framework. Safety and Health management processes shall be implemented based on the commitments in the Policy, and the Performance Requirements outlined in the Framework Tier 1.

Tier 2: City's Safety and Health Systems, Standards and Procedures
These are mandatory to all City operations as defined in this Framework. Safety and Health Standards are performance based in nature and typically focus on more specific areas of risk. Procedures are typically prescriptive in nature and address specific areas e.g. incident reporting and investigation, hazard and risk management, where it is important that activities are carried out consistently across the City.

Tier 3: Safety and Health Framework Procedures and Standard Operating Protocols
Each Business Unit shall apply Tier 1, 2 & 3 Systems and Procedures. In applying the Framework Tier 3 Procedure, the Business Unit will in addition develop its own processes, procedures, SWMS's, SOP's etc, and that will act as the basis for developing safety and health competencies of people.

RISK MATRIX

The following is the Risk Matrix used by the City. (For a comprehensive overview of the City's commitment and management of Risk across the organisation, please refer to the City's Council Policy – Risk Management D15/57852 v*)

Consequences:
Focuses on the potential consequence/s presented by the hazard in its assessed state of control. The consequences are those of credible scenarios (taking the prevailing circumstances into consideration) that can develop from the hazard. These can be thought of as the consequences that could have resulted from the release of the hazard if circumstances had been less favourable.

Likelihood:
Likelihood is estimated on the basis of historical evidence or experience that such severity has materialised within the industry the hazard is primarily associated with, or the company.

Cross-reference the Consequence and Likelihood to determine the Risk score. The colours within the matrix are aligned with the level of risk. The level of risk is utilised to determine the controls, communication and monitoring requirements of the hazard.

RISK MATRIX					
Likelihood	Consequence				
	Insignificant	Minor	Moderate	Major	Severe
Almost Certain	Medium	Medium	High	Extreme	Extreme
Likely	Medium	Medium	High	Extreme	Extreme
Possible	Low	Medium	High	High	Extreme
Unlikely	Low	Low	Medium	High	Extreme
Remote	Low	Low	Medium	Medium	High

DEFINITIONS

BCP	Business Continuity Plan which is designed to address the operations of the City in the event of a business disruption(s).
Crisis Management Team	A designated team who have the responsibility of implementing the Business Continuity Plan.
Employee	Any direct employee of City of Kwinana
ECO	Emergency Control Organisation Committee
ERP	Emergency Response Plan
LEMC	Local Emergency Management Committee. The committee contains members from State agencies and Local authorities (which includes the City) who implement the planned response under the *Emergency Management Act 2005* (WA) to provide prompt and coordinated responses to declared emergencies. The LEMC ensure that emergency management arrangements are prepared and maintained.
PCBU	Person conducting a business or undertaking
Officer	A person's position that has significant influence over the management of a business, eg: the CEO
Volunteer	A person who volunteers their own free time, for no financial payment, to undertake activities on behalf of the City.
Worker	Any person who carries out work in any capacity regardless of employment class e.g. employee or contractor.
Workplace	A place where work is being carried out. Or is customarily carried out.
Reasonably practicable	That which is or was, at a particular time, reasonably able to be done in relation to ensuring safety and health, taking into account and weighing up all relevant matters.
SSSP	Site Specific Safety Plan
SWMS	Safe Work Method Statement
SOP	Safe Operating Procedure
JSA	Job Safety Analysis
TA	Task Analysis
KPI's	Key Performance Indicators

PLANNING AND RESOURCES

RESOURCES

Specific information relating to Safety and Health is held on "The Hub" (Intranet) on the home page under the Health, Safety and Emergency icon for the reference of all staff.
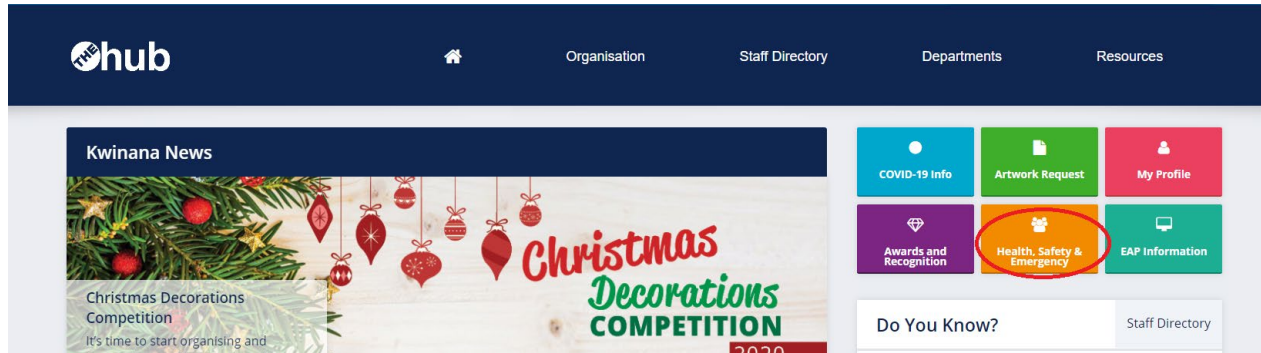
Extensive information on safety and health including guidelines are available on the intranet.

EMERGENCY PLANNING AND READINESS

INTRODUCTION

The City is committed to having effective and reliable emergency planning and responsiveness in the workplace and will provide the best possible protection for all those in the workplace in the event of an emergency.

The involvement of employees in emergency planning, training, testing and evaluation is an important part of protecting both people and assets, and provides assurance that information from all areas of the organisation is considered in ongoing planning and continuous improvements.

OBJECTIVE

The City will ensure that it has effective general emergency plans in place to manage emergencies likely to occur within any part of the organisation's operation and to comply with legislative requirements.

EMERGENCY PLANNING

The City strives to achieve the principles set out in the Australian Standard AS 3745-2010 (June 2018) planning for emergencies in facilities (workplaces) by applying the Preparedness, Prevention, Response and Recovery (PPRR) framework.

- Prevention – actions undertaken in advance. Sometimes this is referred to as mitigation.
- Preparedness – making arrangements, creating and testing plans, training, educating and sharing information to prepare should an emergency eventuate.
- Response – the assistance and intervention during or immediately after an emergency.
- Recovery – the coordinated process of supporting emergency-affected areas.

The following set out the principles applying to workplace emergency management: -

- Leadership – Management team retains responsibility for emergency management
- Safety – Individual safety, wellbeing and protection of life are paramount
- Response – Incident response is adapted in accordance with the level dictated by the circumstances at the time of an incident
- Support – Support is coordinated, integrated, timely, equitable, culturally appropriate and enhances resilience
- Communication – Communication is based on verified information and is timely and appropriate
- Ongoing Risk Identification – Risk identification efforts are continuous to ensure the mitigation of negative risks
- Support Agencies – The roles and responsibilities of external support agencies are understood and respected
- Confidentiality – The principles of confidentiality are respected.

The City will ensure there is a documented emergency plan that identifies potential emergency situations and meets relevant emergency service requirements that may be relevant to the particular workplace locations. The City will:

- Consider that evacuation may not always be the most appropriate response for dealing with an emergency and containment or other measures to manage the situation, rather than evacuation, may be the most appropriate response.
- Ensure that emergency procedures have been implemented and communicated to all employees, volunteers and contract staff.
- Will take into consideration any specific emergency service requirements for the emergency situations that have been identified. For example, fire evacuation procedures approved and tested by the fire service.

Please note: for emergencies relating to the continuation of business refer to the City's BCP or emergencies identified as responses to declared emergency situations refer to the Local Emergency Management Committee. (Further information is detailed in the City's Safety and Health Management System Framework – Tier 1).

Documented response plans will be included for each potential emergency situation identified. These response plans will be created by the Emergency Planning Committee (see below). Refer to your area workplace emergency management documents or the OSH - Emergency Procedures Flip Chart. (D19/51603 v*)

DESIGNATED STAFF

The City will maintain two designated committees for emergency planning and management. These being:-

- Emergency Planning Committee (EPC) – oversees the planning and arrangements for workplace emergency management; and
- Emergency Control Organisation (ECO) – has the responsibility for managing emergency events.

The EPC meet twice yearly to discuss learnings from the year and to plan the following year's requirements. The ECO will meet more regularly specifically after a drill or incident to "debrief" the process. The Emergency Report (D15/10402 v*) will be completed and actioned.
A list of designated employees who have been identified as emergency personnel is available to all staff on the Hub (Intranet) and on applicable notice boards.
Training schedules and records are to be kept and maintained by HR. (e.g. Emergency Evacuation Wardens training).

TESTING/EXERCISES

There will be periodic testing of emergency evacuation procedures at regular intervals, of no longer than 6 months apart, and a record of emergency evacuation drills is to be kept.

The EPC sets out the minimum requirements for emergency exercises, such as BCP testing, for each facility per year. The ECO plan, arrange and conduct exercises as part of operational activities in accordance with the set schedule.

REVIEW

There is a consultative meeting (ECO) to review emergency response procedures, after any practice drills and after any actual emergency event, with the Emergency Report (D15/10402 v*) being completed and actioned.

EVACUATION FUNCTIONS AND DUTIES

Employers are required to meet their obligations under the *Occupational Safety and Health Act 1984* and the *Occupational Safety and Health Regulations 1996* with respect to evacuation procedures. In accordance with Regulation 3.10 persons in control of a workplace are required to:-

- Develop an evacuation procedure for fire or other emergencies at the workplace;
- Display the evacuation procedures and a diagram, showing the exits and the position in relation to the exits, clearly and prominently at the workplace, where practicable;
- Practice the evacuation procedure at reasonable intervals, where practicable; and
- Train persons who would be required to help or control or extinguish a fire and provide appropriate protective clothing and equipment to these persons.

Steps for identified emergency events may include:-

a) Assist persons in immediate danger – if safe to do so.
b) Restrict the danger – if safe to do so. For example, close doors, turn off machine, shut off gas cylinder, stop process, and turn off power.
c) Raise the alarm – notify emergency services – provide contact details.
d) Attend to the emergency – if safe to do so. For example, attempt to extinguish the fire (trained persons only).
e) Evacuate to nominated assembly area.
f) Remain at the assembly area and ensure everybody is accounted for.

GUIDANCE NOTES FOR FIRST RESPONDER

As a first responder to any emergency, the responder will need to make an evaluation and act quickly with the appropriate response. It is important not to over-react, but if the responder cannot contain an emergency situation immediately and it has the potential to spread and place other people in immediate danger then the responder must activate the evacuation alarm.

Some situations that specifically require general evacuation are:

FIRE - A Fire that the responder cannot extinguish immediately with on-hand fire extinguishing equipment as required by the responder's training.
Example – The responder discovers a small fire and believes they have the right training and experience to put it out but there is a distance to walk to retrieve the fire extinguisher. Activate

the evacuation alarm before returning with the extinguisher. It is important that the general evacuation procedure has already begun in case the responder's attempt to contain the fire is unsuccessful.

HAZARDOUS MATERIALS - An uncontrolled release of a hazardous material that cannot be promptly contained without danger to any occupants.

Most releases of hazardous materials, for example spills of cleaning chemicals, are highly localised and can be easily contained without the need for a general evacuation.

Some hazardous materials or chemicals require a specific response for their containment and clean up. The respondent needs to know which of these materials are present in the area they are working and be familiar with the correct response to a spill.

DISABILITY (PERSONAL EMERGENCY EVACUATION PLAN - PEEP)

As per AS 3745 – Planning for emergencies in facilities, provisions should be considered for occupants with a disability. There is a requirement for the City to identify an employee with a disability who may need assistance during an emergency. In this instance, an individualised emergency plan is designed for the employee with a disability. If an individual plan is required, this will be prepared by the Health, Safety and Injury Management Advisor. (Noting, a requirement for a plan could be identified through the on-boarding process, worker's compensation process or a return to work program).

IMPLEMENTATION AND DELIVERY

CITY RISK ASSESSMENT PROCESS

RISK ANALYSIS

The City's Risk Assessment Process is used in the evaluation of a hazard, for example in a Safe Work Method Statement, Risk Assessment of an event and Change Management. The process has been developed to qualify the risk by considering the Likelihood and Consequence. (For a comprehensive overview of the City's commitment and management of Risk across the organisation, please refer to the City's Risk Management Strategy – D20/44400 v*. This strategy applies to all areas within the City's planning and organizational structure, operations and facilities.)

SIGNIFICANT HAZARD/RISK

Significant Hazard/Risk Assessment means a hazard or risk that is an actual or potential cause or source of;

a)   Notifiable Event; or

b)   Harm (being harm that is more than trivial) the severity of whose effects on any person depend (entirely or among other things) on the extent or frequency of the person's exposure to the hazard/risk; or

c)   Harm that does not usually occur, or usually is not easily detectable, until a significant time after exposure to the hazard.

CONTROL MEASURES

Controls are those policies, procedures, plans, processes and systems that have been designed and implemented over time in response to hazards/risks/issues that have or may occur. Most hazards/risks identified will not be new or unique, and there may be some controls already in place to manage them.

Controls typically fit into three distinct types:

1. **Preventative Controls** - aimed at preventing the risk occurring in the first place. They include policies, procedures, plans processes and systems;

2. **Detective Controls** - used to identify when a risk has become an issue/incident. They include audits, stocktakes, reviews, etc; and

3. **Mitigating Controls** - aimed at minimising the consequences that arise from the issue/incident. They include Business Continuity Plans, Disaster Recovery Plans, personal protective equipment, etc.

Following the identification of existing controls, it is necessary to evaluate them for effectiveness. The fact that proven processes are being followed does not necessarily mean that hazard/risk is being mitigated. The experience level of the personnel undertaking the processes and the rigour with which the processes are being followed and supervised will also impact upon the control effectiveness.

For each hazard/risk identified, the following questions need to be asked:

1. Is there anything in place at the moment that would effectively decrease the likelihood or the impact of this hazard/risk? If the answer is yes, then:
2. How effective are the current controls in preventing this hazard/risk from occurring or reducing the impact?

There is usually a direct correlation between the effectiveness of an existing control and the likelihood of the risk occurring (i.e. the more effective the control, the less likely the risk is to occur) and/or the impact of the risk (i.e. non effective controls may increase the impact).
The outcome of this evaluation should influence further analysis of the likelihood and potential consequences of the hazard/risk.

The table below shows the rating and description for the effectiveness of current controls at the City.

Table: Effectiveness of Control Measures

Effectiveness Rating	Description
Fully Effective	Fully effective at all times (i.e. will significantly reduce the likelihood and/or consequence of the risk at all times).
Substantially Effective	Effective in most circumstances (i.e. will have a reasonably significant effect in terms of reducing the likelihood and/or consequence of the risk)
Partially Effective	Partial control most of the time (i.e. will have some effect in terms of reducing the likelihood and/or consequence of the risk)
Largely Ineffective	Partial control in some circumstances (i.e. will have very little effect in terms of reducing the likelihood and/or consequence of the risk)
Totally Ineffective	Not effective at all in mitigating the risk (i.e. will not have any effect in terms of reducing the likelihood and/or consequence of the risk)

When determining the controls to be applied to a hazard/risk the following should be considered: -

RISK TREATMENT

Risk treatment consists of determining what will be done in response to the identified, analysed and evaluated risks, including identifying resource implications for the implementation of the treatment actions.

Risk treatment involves a cyclical process of:
   a)   Assessing a risk;
   b)   Deciding whether residual risk levels are tolerable;
   c)   If not tolerable, generating a new risk treatment; and
   d)   Assessing the effectiveness of that treatment.

Once implemented, risk treatments may become risk controls.

TREATMENT OPTIONS

Risk treatment decisions are guided by a series of questions:
   1.   Can the risk be avoided altogether by not undertaking the activity?
   2.   Can the likelihood of the risk occurring be reduced by strengthening/ensuring the effectiveness of current controls?
   3.   Can the likelihood of the risk occurring be reduced by adding new controls (i.e. initial treatments)?
   4.   If the event occurs, can the consequences be reduced through sharing the risk with another party or by a Business Continuity Plan/Crisis Management Plan?

Where risk treatment options can impact on risk elsewhere in the City, relevant staff or contractors they should be included in the decision making.

Selecting the most appropriate risk treatment option involves balancing the costs of implementation against the benefits with regard to legal, regulatory and other requirements. Decision making should also take into account such risks where risk treatment is not justifiable (e.g. severe consequence but rare likelihood).

There are four main treatment options for the mitigation of identified hazards/risks at the City.

These are listed in more detail below.

1.   Avoid
Avoiding a risk/event with detrimental consequences by deciding not to proceed with the activity likely to create the risk, or by disposing of the asset, etc.

2.   Treat
Treating risks to reduce the likelihood and/or consequence of the risk. (Refer to the table below for treatment of hazards/risks)

3.   Transfer/Share
Risk transfer/share involves transferring part of the risk (i.e. either management of the activity/service or consequences) to another party. Sharing risk does not mean that the responsibility/accountability for the risk has been transferred.

Examples of transferring or sharing of risk include:
   a)   **Contracting and/or Insurance** - the most widely used forms of risk transfer. In practice, it is virtually impossible to transfer all of the risk to a third party (e.g. transferring a risk to a contractor could still see the City's reputation damaged should an adverse event/incident occur).

b)   **Escalation** – occurs when there is a requirement for a higher level of line management within the City to take action in relation to a risk. When a risk has been escalated, management of the risk has not been transferred as the consequences will still impact on the area concerned.

The overarching principle in relation to risk transfer/share is that if the City owns all or part of the consequences then it still owns the risk.

4.   **Accept**
      Accepting the consequences of the risk occurring.

      Risks are accepted or retained for a number of reasons, including:
      a)   Risk treatment is not cost effective;
      b)   The risk is at or below the acceptable level for that type of risk;
      c)   The risk is outside the control of the Council; or
      d)   The risk exceeds the acceptable level for that type of risk but nothing more can be done to reduce the risk (if this is the case it needs to be escalated and well documented).

All risks, including those risks that are accepted with details on decision to accept, the risk needs to be recorded in the Risk Register (Camms System) along with the reason(s) for the decision not to treat the risk.

Table: Treatment of Hazards/Risks – Hierarchy of Control

ELIMINATE the hazard altogether For example - get rid of the dangerous machine	**Most Effective Control**
If the hazard cannot be eliminated then:	
SUBSTITUTE the hazard for a safer alternative For example - replace the machine with a safer one	
ISOLATE the hazard from anyone who could be harmed For example – keep the machine in a closed room and operate it remotely	
Use **ENGINEERING CONTROLS** to reduce the risk For example – attach guards to the machine to protect users	
Use **ADMINISTRATIVE CONTROLS** to reduce the risk For example – train workers how to use the machine safely	
Use **PERSONAL PROTECTIVE EQUIPMENT (PPE)** For example – use gloves and goggles to use the machine	**Least Effective Control**

When a decision has been made to treat the hazard/risk the hierarchy of controls can be utilised (Table above). This is with the aim to manage the hazard/risk to as low as reasonably practicable. The hierarchy of controls follows the premise that elimination is always the first choice as it is the best solution to get rid of the hazard/risk completely.

Administration and the use of personal protective equipment are the least effective of the hierarchy of controls. These types of controls should NOT be relied on as the primary means of hazard/risk control unless the options higher in the hierarchy have been exhausted.

SPECIALIST ADVICE

Administration
Where the competency for managing specific hazards is not available through internal staff, external specialists are to be contacted and involved in any review process.

HAZARD MANAGEMENT

INTRODUCTION

The City uses Risk Assessments/SWMS's and/or Work Instructions/Process Maps (Promapps)/ SOPs to systematically assess and control hazards associated with specific job/tasks.

The Customer Request Management system (CRM – Authority) is used to record hazards which is used across the organisation. Alternatively, hazards can be recorded via the hazard reporting form D14/75246v*, noting the information is taken from the form and entered into the CRM system.

The CRMs can be used to record, identify, assess and control hazards identified from sources such as;
- Event Reports
- Department meetings
- Safety committee meetings
- Audit findings
- Safety observations
- Legislation change
- Occupational Health Monitoring

RISK ASSESSMENTS/SAFE WORK METHOD STATEMENT RISK ANALYSIS

The City's Risk Assessments and/or Safe Work Method Statement (SWMS) processes are the systematic method(s) to identify, assess and control hazards/risks associated with tasks performed in the workplace. For the process to work effectively, a systematic approach must be taken in developing and constructing the Risk Assessment/SWMS's.

New equipment will require an approved SWMS, and a training schedule, prior to purchase and implementation.

Risk Assessments/SWMS's and Work Instructions/Process Maps (Promapps)/SOPs are reviewed at least annually. All scheduled reviews are to have employee involvement. The date and who was involved with the review is to be recorded on a copy of the document(s).

THE CUSTOMER REQUEST MANAGEMENT SYSTEM

Hazard Identification process:
The Hazard identification process can be used by any person to register a safety and health issue/concern (either directly in the CRM system or via the Hazard Report form D14/75246 v*). These are tracked and reviewed in the (Customer Request Management – CRM) system.

Electrical Equipment

Electrical equipment will be checked for safe operation in accordance and in compliance with AS/NZS 3760:2010 (In-service safety inspection and testing of electrical equipment).

HAZARDOUS SUBSTANCE MANAGEMENT

Introduction

The *Occupational Safety and Health Regulations* 1996, Part 5 stipulates that before a hazardous substance can be introduced into the workplace, the following must be undertaken:

- Obtain a copy of the Material Safety Data Sheet (MSDS);
- Conduct a risk assessment in consultation with person(s) likely to use the product;
- Notify the Health, Safety and Injury Management Advisor.

Information pertaining to Hazardous Substance Management is detailed in the Guideline D14/78154v*. Material Safety Data Sheet (MSDS), chemical supplier recommendations and safety and health considerations are incorporated into Business Unit document(s) such as SWMS/Work Instructions/SOPs. Refer to these prior to commencing any work. Only people trained in the use of hazardous substances may use hazardous substances.

All hazardous substances/chemicals must be approved by the **City**, prior to being brought in/on site. The master Hazardous Substance register, copies of current Material Safety Data Sheets are maintained in the Chem Alert software system. The procedure to introduce a new chemical is detailed in the Guideline D14/78154 v*.

Personal products which include for example; underarm deodorant, hand sanitiser, lipstick, make-up etc. do not require the same restrictions as other chemicals. The volume and risks of these are considered low.

Where products are purchased by the City, and the City has restricted the type and quantity (volume) of products available to staff, this information has been listed on the City's Intranet (Health, Safety and Emergency Management – Hazardous Substances).

Hazardous Substance and Chemical Inventory

Each business unit will be responsible for the management of Hazardous Substances/Chemical on site and will appoint a person to maintain the inventory and ensure that current MSDS's are available in Chem Alert (if applicable).

Where a contractor requires a hazardous substance on site, they must ensure that a current Material Safety Data Sheet (MSDS) for each hazardous substance is available at the point of use and applicable controls are listed in the task specific JSA or SWMS/Work Instruction/SOP. Where the volume of hazardous substance exceeds the quantities for transport of dangerous goods by rail or road, then the contractor is responsible for appropriate storage and handling in accordance with the appropriate Australian Standards.

CHANGE MANAGEMENT STANDARD

INTRODUCTION

Purpose

The purpose of this standard requirement is to ensure changes that have a reasonable potential to impact safety and health are effectively risk managed to eliminate or mitigate risks and ensure safety and health regulatory, certification and council requirements are able to be maintained prior to implementation of the change.

Change Management

Change is defined as an addition, revision, deletion, modification or replacement that is not "Replacement in Kind". Examples of change include, but are not limited to the following:

- Deviation from a set work process or instruction;
- Modification of a component on an item of plant or equipment;
- Addition or introduction of new plant, equipment or related software;
- Replacement of plant and equipment with different ratings, speeds, physical displacement, weight and operating features; and
- Changes to temporary or permanent works design.

"Replacement in Kind" is an identical exchange or replacement of equipment or skilled persons such that there would be no change in anticipated performance or results. Change does not occur when variations to plant, equipment, processes and people are within designed or agreed boundaries or tolerances. The change management process is used to ensure:

- New or existing work areas, processes, plant, equipment, material or substances are not adversely affected by the change;
- All required changes are managed through a risk management process that is relevant to the type of change.

ACTIVITIES THAT BRING ABOUT CHANGE

There are various activities that can bring about change within the City and they can be both reactive and proactive as listed below:
- Risk and opportunity analysis and audit outcomes;
- Issue resolution, incident investigation findings and emergency situations;
- Design and engineering modifications;
- Modifications to plant, equipment or substances;
- People management, for example communications, consultation, records and competencies;
- Changes to legislation, regulation, responsibilities, authorities and accountabilities;
- Rescheduling of activities;
- Unscheduled reallocation of staff or plant resources; and
- Adverse weather conditions.

Tools to Assist Change Management

There are various processes and forms that support risk analysis, management and communication of change.

These include, but not limited to:
- Design Change;
- Project Risk Assessment;
- Safe Work Method Statements;
- Plant Hazard Assessments;
- Chemical Risk Assessments;
- Capital Approval Process; and
- Take Five.

Consultation is necessary so employees affected by the change may express their opinions on whether the change is warranted and how things may best be arranged and carried out to effectively implement the change.

EMERGENCY CHANGES

Where changes are required to be carried out in an emergency or because of an emergency, the basic change management processes are still to be followed. In line with the urgency for an emergency change, the worker proposing the change (if competent) or a competent worker must carry out a documented risk assessment on the change to:

- Identify the potential hazards;
- Analyse the level of risk involved; and
- Determine controls required to implement change under the emergency conditions.

AUTHORISING CHANGES

The levels of approval for changes to policy, management systems and processes are:

At the Policy Level:

- Chief Executive (in consultation with the Executive Leadership team) where it affects the Council as a whole; or
- The Executive Leadership team, where it affects the operational requirements of the City.

At Management Systems Level:

- Relevant worker nominated to authorise change to the specific management systems.

At Procedural and Task Level:

- Relevant worker nominated as responsible for the documented process can authorise change to that document, approval is by the relevant employee's supervisor.
- A manager within their relevant area of responsibility and their level of authority can authorise change to a site based process, if no documented process is in place.

Changes to Plant or Equipment:

- Manager or designate, for an item of plant or equipment can authorise change to the item only with the manufacturer's, supplier's, designer's and/or an engineer's approval, provided that there is no change to how the equipment is intended to operate, safety mechanisms and/or guards. Retraining or familiarisation may be required for plant and equipment following change.

Design or Engineering Change:

- Engineering Change needs to satisfy the requirements of relevant legislation, design authority, any applicable design specifications and shall require technical approval from the manufacturer, supplier, designer and/or an engineer as applicable

Emergency Change:

- Manager or incident controller to authorise emergency change.

HEALTH MONITORING

INTRODUCTION

Objective

To provide a framework for the identification of Exposure and Health Monitoring, assessment, control and monitoring of health related risks to prevent illness to all workers.

A PCBU (Person Conducting a Business or Undertaking) must ensure that health monitoring is provided to a worker who works for the PCBU if:-

a)   The worker is carrying out on-going work involving a substance hazardous to health that is specified in a safe work instrument as requiring health monitoring; and

b)   There is a serious risk to the worker's health because of exposure to the substance hazardous to health.

Scope

Managing risks associated with substances hazardous to health. A PCBU must manage risks to safety and health associated with substances hazardous to health at the workplace.

Duties of employers where a significant hazard cannot effectively be eliminated:-

a)   To take all practicable steps to minimize the likelihood that the hazard will be a cause or source of harm to the employees; and

b)   To provide, make accessible to and ensure the use of by the employees, suitable clothing and equipment to protect them from any harm that may be caused by or may arise out of the hazard; and

c)   To monitor the employees' exposure to the hazard; and

d)   To take all practicable steps to obtain the employees' consent to the monitoring of their health in relation to the hazard; and

e)   With their informed consent, to monitor the employees' health in relation to exposure to the hazard.

Duties of employers to provide employees with results of health monitoring:-

a)   every employee is given all results to which this section applies of monitoring of the employee (whether as an individual or as one of a number of employees) in relation to safety or health; and

b)   all employees who ask for them are given all results to which this section applies of general monitoring of:

   i)   conditions in the employee's place of work; or

   ii)   the safety and health of employees there.

Health Monitoring Process Flow Chart (If required)

```
                          ┌─────────────────────┐
                          │      Protect        │
          ┌───────────────│  employees from     │───────────────┐
          │               │      hazards        │               │
          │               └─────────────────────┘               │
          ▼                                                      ▼
┌─────────────────────┐                            ┌─────────────────────┐
│    Environmental    │                            │  Personal Monitoring │
│     Monitoring      │──────────┐                 │    (e.g. Hearing)    │
│  (e.g. Noise Levels)│          │                 └─────────────────────┘
└─────────────────────┘          ▼
                        ┌─────────────────────┐
          ┌─────────────│  Select & Approve   │───────────────┐
          │             │  Service Provider to│               │
          │             │  perform monitoring │               │
          ▼             └─────────────────────┘               ▼
┌─────────────────────┐                            ┌─────────────────────┐
│ Discuss monitoring  │                            │  Provide staff with │
│ results with Service│                            │   information on    │──────┐
│   Provider/staff    │                            │     monitoring      │      │
└─────────────────────┘                            └─────────────────────┘      │
          │                                                    │                 │
          ▼                                                    ▼                 │
┌─────────────────────┐                            ┌─────────────────────┐      │
│  Re-evaluate hazard │                            │  Obtain staff consent│     │
│ control & implement │                            │    to undergo       │      │
└─────────────────────┘                            │     monitoring      │      │
          │                                         └─────────────────────┘      │
          │                                                    │                 │
          │                                                    ▼                 │
          │                              ┌─────────────────────┐               │
          │                              │   Advise staff of   │               │
          │                              │  individual results │               │
          │                              └─────────────────────┘               │
          │                                                    │                 │
          │     ┌─────────────────────┐          ┌─────────────────────┐       │
          │     │ OSH department to   │          │ Service Provider to │       │
          │     │ advise WorkSafe of  │◄─────────│ organise any addit- │       │
          │     │ any 'Notifiable     │          │ ional testing and   │       │
          │     │ Events' diagnosis   │          │ referrals/rehab for │       │
          │     └─────────────────────┘          └─────────────────────┘       │
          │                │                                                     │
          ▼                ▼                                         ┌─────────────────────┐
┌─────────────────────┐  ┌─────────────────────┐                   │     HR will         │
│  Safety and Health  │  │ Advise applicable   │                   │  assess/analyse     │
│      Reviews        │  │ Government Department│◄──────┐          │      trends         │
└─────────────────────┘  │ /Agency (e.g. WA     │       │          └─────────────────────┘
                         │ Health etc.)         │       │                     │
                         └─────────────────────┘       │                     ▼
                                   │                    │          ┌─────────────────────┐
                                   ▼                    │          │   Managers will     │
                         ┌─────────────────────┐       │          │ take action on      │
                         │ Department to escalate│      │          │ any adverse         │
                         │ to applicable         │◄─────┘          │     trends          │
                         │ Agencies/Service      │                 └─────────────────────┘
                         │ Providers             │                           │
                         └─────────────────────┘                           ▼
                                              ┌─────────────────────┐
                                              │   Confidential      │
                                              │ file/store health   │
                                              │ records securely    │
                                              └─────────────────────┘
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IMPLEMENTATION

IDENTIFICATION OF HEALTH MONITORING

Monitoring of the work environment and of individual staff health is part of the hazard management process. Information from monitoring helps determine how effective existing hazard controls are in maintaining the wellbeing of staff.

Responsibilities - Manager/Team Leader:
- Ensuring that employees are released from work in order to participate in the health monitoring program.

Responsibilities – Health, Safety and Injury Management Advisor
- When advised of any sub-optimal results relating to exposure assessment:
  - Conduct an investigation, seeking specialist advice where relevant.
  - Review the effectiveness and suitability of existing hazard controls. Review findings with senior management, management and employees.

Pre-employment / Baseline Health Testing
A pre-employment health assessment will be completed for all new permanent Employees who work at the City. The purpose of the pre-employment health assessment is to assess prospective Employee's medial capacity to safely complete work tasks, and records benchmarking for on-going health surveillance. The assessment is part of the recruitment process prior to offer and commencement of employment.

The City operates a three-tiered pre-employment health assessment process.
1. High Risk – Occupations working on high-risk operational sites will undergo a medical examination via the City's approved medical provider. This may, at the discretion of the City, include a physical capacity assessment. (Noting, Employees domiciled at the City Operations Centre will be required to undergo audiometric testing).
2. Low Risk – For lower risk permanent Employees e.g. office-based staff, a basic pre-employment health assessment will be undertaken by the City's approved medical provider.
3. Staff employed on a casual basis will complete a series of questions and a declaration regarding the Employee's health status.

Note: Employees in tiers 1 and 2 will also undertake a pre-employment drug and alcohol test via the City's approved medical provider.

To ensure that the City maintains a current understanding of health assessment requirements, it will review the pre-employment health assessment requirements (based on exposure to hazards) as part of the Safety and Health Framework review.

EMPLOYEE PARTICIPATION

INTRODUCTION

The employer will ensure that all employees have on-going opportunities to be involved and to have their interests represented in the safety and health of workplace practices via:
- Hazard and Improvement Reporting;
- Business Unit/Department Team Meetings;
- Department Tool Box Meetings;
- City of Kwinana Occupational Safety and Health Committee;
- Business Unit/Department Safety Representatives;

- Safety Interaction Form (D20/41036 v*);
- Annual Performance Review – Individual KPIs and actions.

HAZARD AND IMPROVEMENT REPORTING

A Hazard Report can be entered into a CRM to highlight a hazard in the workplace or identify areas for improvement which will alert the area responsible manager and the City's OSH section. Hazard Reporting can be done through;
- Logging into Authority (CRM);
- Completing a Hazard Report Form (D14/75246 v*);
- Submitting an improvement through the Staff Values nomination process "Why not yes?" Information regarding the nomination process is on the City's Intranet.

The Hazard Report will then require the responsible person to complete/detail actions taken (which may include completing a risk assessment that establishes whether the issue raised relates to a significant hazard.)

Employees are also encouraged to talk directly with their Managers/Team Leaders, their safety and health representative or any member of the OSH Committee if they wish to raise issues/concerns or have any other comments relating to the Safety and Health systems or management.

BUSINESS UNIT/DEPARTMENT MEETINGS OR TOOL BOX MEETINGS

It is the expectation of the City that business units/departments hold regular team meetings where safety and health forms a part of the meeting. At these meetings the safety representatives (if applicable) or the nominated chairperson will discuss and communicate items raised at the committee meetings that include agenda items:-
- OSH Committee Meeting Minutes;
- Monthly Safety Statistics;
- Monthly Safety Topic (As determined by the OSH Committee);
- General Business;
  o Any safety and/or health issues identified by the business unit/department;
  o New/amended safety and/or health documentation.

These meetings are an opportunity for employees to raise issues or concerns, which must be minuted and feedback on response given at the meeting. It is also an opportunity to forward/request information from other business units/departments.

OCCUPATIONAL SAFETY AND HEALTH COMMITTEE (OSH COMMITTEE)

As per the *Occupational Safety and Health Act* 1984 and *Occupational Safety and Health Regulations* 1996(WA) and is not a "committee" in the terms detailed in the *Local Government Act 1995.* The City's name of the Committee shall be Occupational Safety and Health Committee (OSH Committee).

The purpose of the OSH Committee is to provide a consultative forum that can effectively address the safety and health matters arising at the City of Kwinana with particular reference to the requirements of the Occupational *Safety and Health Act 1984 (WA), Regulations 1996 (WA)* and *Codes of Practice and Standards.*

All terms and conditions relating to the function and criteria of the OSH Committee are stipulated in the OSH Committee Terms of Reference D09/49159 v*. Noting, the frequency of the OSH Committee meetings is on a monthly basis and the minutes from the Committee meeting are escalated to the Executive Leadership team and included on the monthly team agenda template. It is important that communication between the committee and the employer (City) should be accurate and timely, thereby ensuring that issues are able to be dealt with promptly. For this purpose, either party may, from time to time, request a response from the other party within a specific timeframe.

SAFETY AND HEALTH REPRESENTATIVES

Safety and health representatives are elected by co-workers to represent them in consultation about safety matters with the employer.

Safety and health representatives are important because it makes sense for employers and employees to talk to each other about safety at work. The experience and knowledge of employees can make a significant contribution to identifying and controlling hazards and risks, and developing preventative measures to address safety and health issues that arise at the workplace.

A safety and health representative is the key to communication by making it easier to exchange ideas and concerns about safety between employers and employees. Safety and health representatives raise and discuss issues and concerns with employers and/or managers so they can work together and arrive at solutions to make the workplace safe.

Part 4 of the *Occupational Safety and Health Act* 1984 (Act) details the requirement for election of safety and health representatives in the workplace. The Act requires the person who conducted the election to notify the WorkSafe Western Australian Commissioner and the employer of the results of the election. Information pertaining to the election process for safety and health representatives can be found on the following website: www.commerce.wa.gov.au .

The City has developed a duty statement/guideline for safety and health representatives D21/14619 v*.

SAFETY BEHAVIOURAL OBSERVATIONS

The City has introduced a Safety Interaction process. This process permits any employee to observe unsafe practice, safe practice or make a suggestion in the workplace or identify areas for improvement which will alert the area responsible manager and the OSH section. The Safety Interaction form is located at D20/41036v*.

Employees are also encouraged to talk directly with their Managers/Team Leaders, their Safety and Health representative or any member of the OSH Committee if they wish to raise issues/concerns.

SAFETY RECOGNITION PROGRAM

INTRODUCTION

The City has the ability to recognise the employee's contribution to Health, Safety and Wellbeing through the Staff Values Award nomination process. This award can be on an individual or team basis whereby it is recognised that an exceptional level of commitment to an exemplary level is displayed. Applications for this award are via the nomination process (refer to the City's Intranet "The Hub") and the Executive Leadership Team will determine the outcome.

INFORMATION, TRAINING AND SUPERVISION

INTRODUCTION

Duties of employers in relation to training and supervision of employees the *Occupational Safety and Health Act* 1984 – section 19 states:

"*19.   Duties of employers*
  (b)   provide such information, instruction, and training to, and supervision of, the employees as is necessary to enable them to perform their work in such a manner that they are not exposed to hazards; and….
  (2)   In determining the training required to be provided in accordance with subsection (1)(b) regard shall be had to the functions performed by employees and the capacities in which they are employed."

General

This standard applies to all City operations.

Training and supervision is provided to ensure employees or embedded contractors are:
1.   Adequately trained in how to use the elements of the Safety and Health Management standard as it applies to them.
2.   Adequately trained in safety specific topics e.g. hazardous substance handling, working at heights, first aid, confined spaces etc. so they may carry out their role appropriately.
3.   Adequately trained in the use of all-relevant equipment, materials, substances, and personal protective equipment.
4.   Either competent to carry out their work or are supervised by a person who has appropriate knowledge and experience to ensure that they are doing the work safely until they are deemed competent to work unsupervised.

Please refer to the City's HR Policy – Learning and Development (D11/17628 v*) for additional information regarding the training processes at the City.

Objective

The City will ensure that all employees, embedded contractors, work experience personnel and volunteers are informed of their own responsibilities and the employer's responsibilities for Safety and health in the workplace. The City will ensure that employees, embedded contractors, work experience personnel and volunteers have specific knowledge concerning management of the risks to which they are exposed through workplace procedures, environment, equipment and materials.

INDUCTION

Induction Training
All new employees, embedded contractors, work experience personnel and volunteers, will complete a safety and health induction. This induction is ideally completed within approximately the first week of employment/engagement with the City.

The employee/embedded contractor/work experience personnel/volunteer and responsible officer jointly sign the induction checklist, which is kept on the employees/embedded contractor/work experience personnel/volunteers file as a record of the induction. Additionally, the induction for contractors is entered into the Rapid Induct Software system.

Furthermore, there must be an appropriate safety and health induction training that is site specific, this includes new employees and employees transferring to a new environment, role or task.

Responsibility of Induction Co-ordination
The City's HR Development Coordinator will organise a safety and health induction for all employees, work experience personnel and volunteers.

It is the responsibility of the Manager/Team Leader to co-ordinate the site induction of the employees.

Evidence of Induction
Evidence is required of employee safety and health induction training that includes consideration of the following needs (where appropriate):
- Employer and Employee Responsibilities
- Emergency Procedures
- Incident and injury reporting
- Hazard Management (general and job specific hazards)
- Any work authority requirements including, Confined Space Permits, Permit to Work
- Personal Protective Equipment
- Information about the health and safety forums
- Hazardous Substances

Signed Confirmation of Induction Training
Signed employee induction training records (or similar individual verification) is required.

Signed Confirmation of Employee's Acceptance of Responsibility
Signed evidence is required of acceptance by employee of their responsibilities.

TRAINING NEEDS

Identification of Training Needs
There must be identification of safety and health training needs in relation to risks associated with specific roles, tasks or areas of work throughout the City.

Managers' Responsibility for Training
Upon commencing employment with the City, managers are responsible for ensuring all employees undertake task/job training in their allocated teams. Training must include

familiarisation with the area's operation manuals/work instructions/process maps (Promapp), including hazards, controls and safe practices.

"ON THE JOB TRAINING"

When a new employee or volunteer starts or transfers to a different role in City, they will be supervised until deemed competent to work unsupervised. This is to ensure that they are safe. The process for this is as follows:

Activity	Responsibility	Process
Complete health and safety induction	Manager or Team Leader	Work through induction checklist
Introduce new employee/embedded contractor/volunteer to team	Manager or Team Leader	This is done to ensure everyone knows they will be learning and not yet competent in the role
Manager or Team Leader to assign suitable buddy to new employee/volunteer D09/11909 v*	Manager or Team Leader	Suitable buddies must: ▪ Have suitable experience in the role that they are buddy for ▪ Have good communication and people skills
Buddy to supervise new employee /volunteer through basic operational on-job training	Buddy (overseen by Manager or Team Leader)	This process includes reading operating procedures and ensuring practical application is followed through
Team Leader, assessor and new employee meet to discuss competence in role	Manager or Team Leader	This discussion includes: ▪ Progress to date ▪ Challenges they have had ▪ Areas they need more assistance in
Employee assessed – is the employee competent?	Manager or Team Leader	Yes: put employee onto regular duties No: Options available: ▪ Continue training with buddy ▪ Reassess buddy for suitability
New employee is put into regular duties	Manager or Team Leader	

Training Records and Refresher Training

All training records will be entered into HR Skills and Course register (currently in the Authority System) and any refresher requirements will be managed by HR through the system.

TRAINER SELECTION

Internal Trainer Selection
Existing competent staff with relevant skills, experience, operational knowledge and qualifications may be selected by the manager to provide training on a range of operations, ensuring the selection is based on one or more of the following criteria:
- Been trained in the position themselves;
- Knowledge and experience of the task/position they are teaching;
- Knowledge of safety and health requirements relevant to the position.

External (Specialist) Safety Trainer Selection
External training providers shall be used for training in specialist high risk areas or where training is a regulatory or pseudo regulatory requirement. Examples include:
- Certified Handler
- Working at Heights
- Working in Confined Spaces
- Safety and Health Representative
- First Aid
- Other areas that involve significantly hazardous situations

All specialist high-risk training shall be delivered to ATQF Standard level where available.

SUPERVISION

Supervision of Employees
Employees undergoing on-the-job training must be supervised by experienced and skilled employees to ensure that the employee's newness to the task or role does not endanger themselves, others or equipment.

Designation of Responsibilities
A process for the clear designation of responsibility for supervision of new employees is required.
Standard Operating Procedures (SOPs)/Work Instructions/Process Maps (Promapps) / Safe Work Method Statement (SWMS)

Ensure Standard Operating Procedures (SOPs)/Work Instructions (W/Is) /Process Maps (Promapps) and/or Safe Work Method Statement (SWMSs) procedures are followed and regularly reviewed/updated, to ensure that the trainer can deliver the required information in a consistent and effective manner.

Register
Managers must ensure that a register of SOPs/W/Is and SWMSs procedures is maintained on a regular basis.

REPORTING

Reporting Reminders
Reporting systems must be maintained in order to identify employees whose qualifications, certificates, licenses (e.g.: forklift, first aid, etc) are due expire at certain dates, so that they can be renewed. HR is responsible for notifying (via team reports) of expiry dates of applicable qualifications, certificates, licenses etc..

MONITORING, MEASUREMENT AND EVALUATION

SAFETY AND HEALTH MANAGEMENT SYSTEM REVIEW

SAFETY AUDITS

The City participates in the LGIS 3 Steps to Safety program which was established to recognise and meet the needs of Local Government with the aim of driving safety performance and minimising claims. The first part of the program is an assessment of the City's safety system against the WorkSafe Plan. The assessment methodology confirms that all evidence is examined and verified on site through scrutiny of documents, workplace inspections and interviews with representatives from the City. An action plan is developed from the deficiencies and opportunities for improvement identified during this assessment.

In addition to the WorkSafe Plan Assessment, and as a function of the OSH Committee as stipulated in Section 40 of the *Occupational Safety and Health Act* 1984, there is a requirement to ensure measures are in place for the safety and health of employees in the workplace. To assist with meeting this requirement, the Safety Representatives are to undertake regular workplace inspections. The OSH Committee has identified a schedule for the frequency of these inspections (noting, that departments/business units that have been classified as a high risk workplace will have an increased frequency of inspections). The OSH section will schedule (via Outlook calendar) to the department/business unit responsible person a notification of the requirement for the workplace inspection.

Furthermore, the administrator of the City's Chem Alert software system will notify the department/business unit responsible person to schedule an annual audit of Hazardous Substances/Chemicals on site.

All documentation relating to the assessment/audit processes will be recorded in the City's document management system.

SAFETY AND HEALTH ACTION PLAN

Annual health and safety KPI's are identified and set during the staff development review process. KPI's are generally based around recommendations arising from the annual safety and health review process, changes to legislation, organisation policy, staff suggestions, safety and health team suggestions or any improvement ideas generated from new technological advances.

Note: Safety and Health KPI's which include responsibilities and timeframes are developed from the CEOs individual safety and health KPI(s).

The City maintains a safety and health action plan, which includes/considers actions identified through all safety and health aspects of the City's framework.

REPORTING AND REVIEW

NEAR MISS INCIDENTS/ACCIDENT REPORTING AND INVESTIGATION

INTRODUCTION

All accidents and near miss situations which involve the City employees, embedded contractors, work experience personnel, volunteers and visiting members of the public need to be reported via the incident report form D10/711 v* and investigated because:

- This will identify and record hazards/risks or potential hazards/risks.
- This will distinguish between work and non-work related accidents.
- The correct reason for injury, illness and damage will be identified.
- It assists in the development of systems that will prevent similar occurrences.

INCIDENT REPORTING AND INVESTIGATION

Staff are required to report all incidents/events (including near misses) on the same shift as the event occurs (if practical).

Reports are to be entered into the incident register and reported to the Manager/Team Leader immediately or no later than the end of the shift that the incident occurred in (if practical).
On becoming aware of an accident/incident, the Manager/Team Leader will determine the severity of the incident (including notifiable event to WorkSafe), complete a risk assessment and apply corrective actions as per the Reporting an Incident Flow Chart.

REPORTING AN INCIDENT FLOW CHART (DOCUMENTED IN PROMAPP)
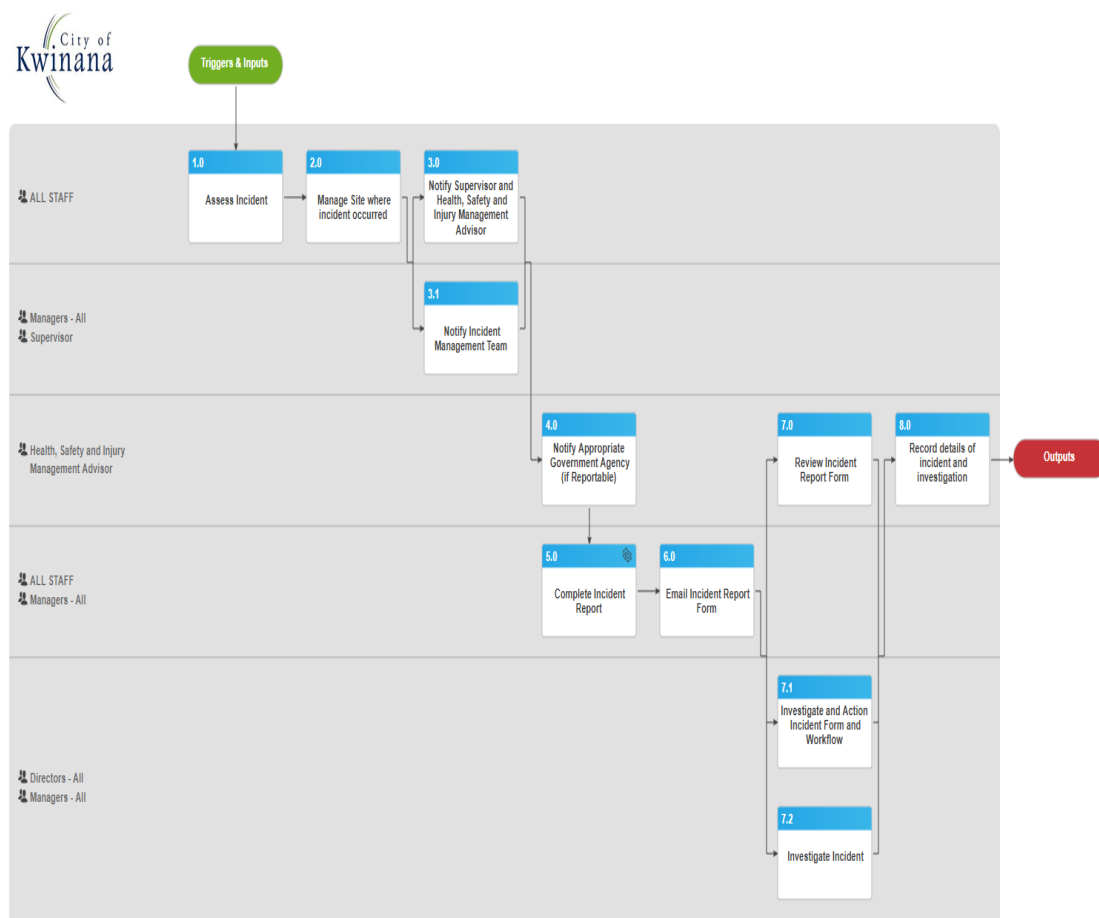
SERIOUS INJURY RESPONSE

The following procedure is to be used for any **INJURY** that will require medical treatment beyond first aid. For example, an ambulance may need to be called or the employee may require transport to the hospital or a medical centre.

The most senior person in the department at the time of the incident is responsible for ensuring this procedure is followed. CEO/Director/Manager/HR need to be notified.

ATTEND to the injured employee.
Ensure they have appropriate first aid treatment and make arrangements for further treatment and care. Get assistance from bystanders if an ambulance has been called so they can be directed to the right location.

SECURE the accident scene.
Once the injured employee is attended to and the area has been made safe, access to the area must be closed. Anything relating to the accident must not be disturbed or interfered with.

CONTACT the Department Manager, Health, Safety and Injury Management Advisor and Manager (HR) who will call their next of kin as required. The Health, Safety and Injury Management Advisor is responsible for contacting WorkSafe, as required.

CHECK that the applicable Director and the CEO has also been contacted in the case of serious injury.

ACCOMPANY the injured employee to any off-site medical treatment - This can be any person in the department at the time of the incident.

DOCUMENT a statement from the injured employee (via the Incident Report Form D10/711v*). Allow them to describe the incident in their own words. Email the form to the Health, Safety and Injury Management Advisor who will workflow the form to the supervisor/manager.

MANAGE any impact the incident may have on staff and customers.

ASSIST the Manager or Health, Safety and Injury Management Advisor with the incident investigation. Due to the serious nature of the incident, the Health, Safety and Injury Management Advisor will be included in the investigation team.

Critical Events – A Disruption to Business Continuity
An incident investigation form must be completed should a critical event occur. Please refer to City's Critical Incident Response/Business Continuity Plan/Guidelines.

Note: if a change of work practice or procedure is required due to a critical event

Injury and Incident Statistics Review

At least six monthly and annual reviews will be undertaken for injury and incident data. This review will include both management and employees and will be done during the health and safety committee meeting. The purpose of these reviews is to identify any injury trends and will be looking at lost time injuries, medical injuries, and near misses reported, and will include drilling down into the data to assist with identifying patterns and trends.

CONTRACTOR MANAGEMENT

Objective
The City values the highest standards of safety, health and environmental protection. The City has produced a comprehensive Contractor Management System guideline D14/89249 v* which defines how the City manages risk associated with the engagement and management of contractors. The guideline provides employees, who engage contractors to undertake work for or on behalf of the City, a process to follow from appointment to completion of works. Contained in this guideline, is a copy of the Contractor Safety and Health Handbook D10/50829 v*. This handbook is distributed to all contractors. Supplementing the guideline and handbook is the OSH Principles and Practices for Contractors document which requires the contractor to have read, understood and agreed to comply with the City's safety and health requirements. D09/27985v*.

In addition, the City currently maintains an on-line contractor management system (Rapid Contractor Management System – RCMS) which ensures the City's due diligence with respect to assessing contractor submissions through: - confirmation of insurances, cross checking of licences and registrations, confirmation that safe systems of work are in place and recording of decisions relating to the contractor. Guideline for RCMS D17/62852 v*.

FIT FOR WORK - REHABILITATION - RETURN TO WORK

The City maintains the Fit for Work policy as the City recognises that it has a responsibility to fulfil obligations under Work Health and Safety legislation to ensure the health, safety and welfare of employees, contractors (including labour hire and temporary employees), volunteers, work experience personnel, and other workers in the workplace. D09/30417 v*.

Key Objectives

The key objectives and/or policy statements are:
- The term "Fit for Work" means that an individual is in a state of mental, physical and emotional health to competently complete the inherent tasks of their position, and in a manner, which does not negatively affect or threaten the safety of themselves or others.
- An individual's fitness for work can be affected in a variety of ways including, but not limited to: illness, injury, fatigue, stress, alcohol, drugs and emotional or behavioural issues. These factors may lead to an increased likelihood of workplace incidents or injuries.
- The City adopts the approach that early intervention in such issues can assist people to deal with the situations which may otherwise place at risk their own, or others' safety and health.
- This policy provides the framework for dealing with these issues and the requirements of the individual and the City in meeting their responsibilities. The framework will ensure an effective, fair, consistent and constructive approach to the issues and at the same time adhering to any legislative requirements.
- Provide temporary suitable duties, if possible, to enable the return to work after a period of incapacity, e.g. by modifying the current work role or providing alternative duties.
- Ensure good communication is maintained between all parties.
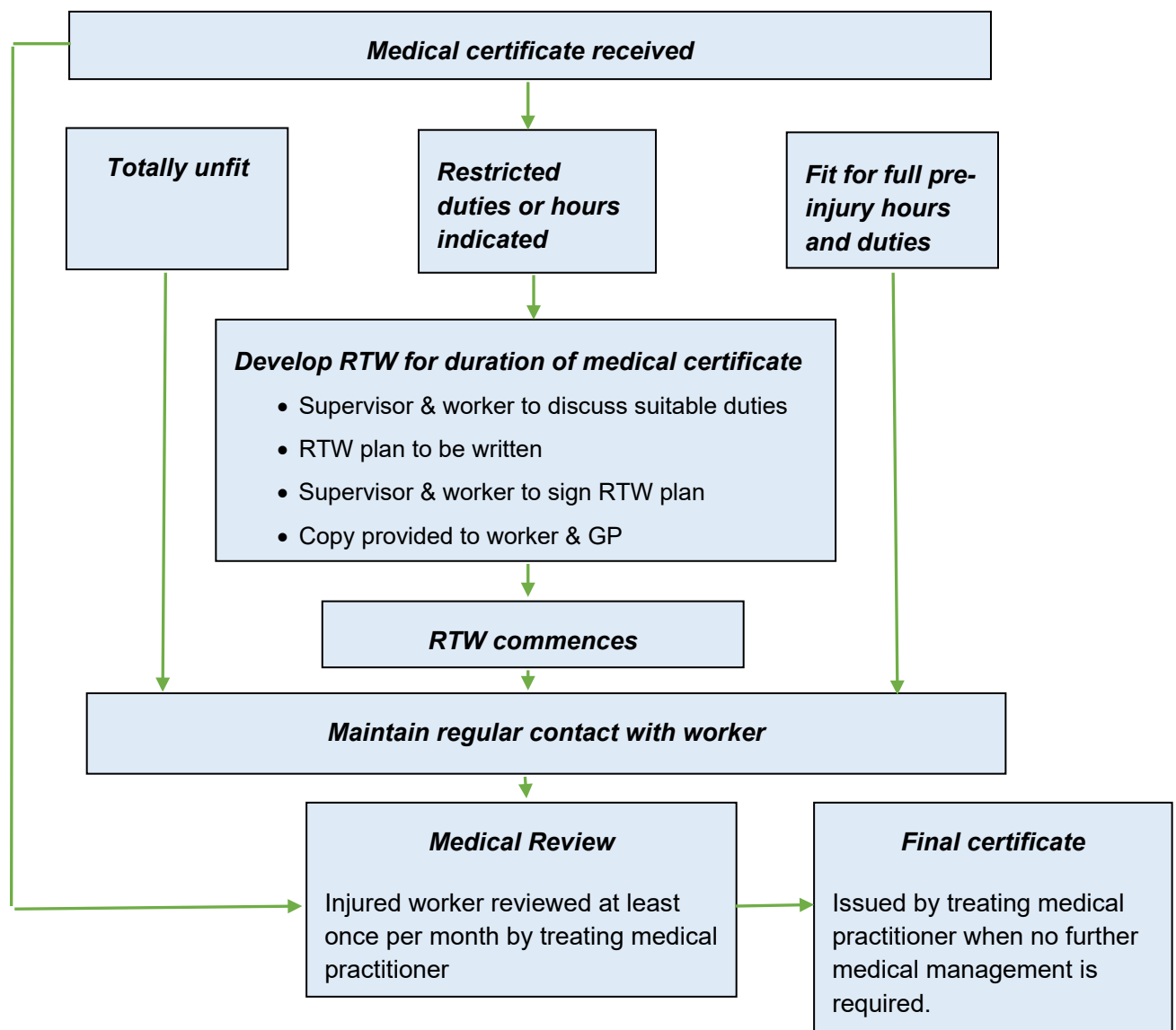
Fit for Work program

The aim of the program is: -
- To provide an awareness ensuring that individuals understand their obligation to be fit for work whilst working for the City, and support to ensure that individuals are given every opportunity to manage and maintain their own fit for work issues.

- Where appropriate, individuals are provided with rehabilitative measures to assist them in overcoming fit for work related issues.
- The fit for work program is designed to achieve awareness and support through: -
  - Defined responsibilities for Managers and employees;
  - Education and training;
  - Employee Assistance Program (EAP);
  - Assessment of fitness for work;
  - Management of assessment results;
  - Management of employees who are unfit for work; and
  - Disciplinary procedures.

The Return to Work procedure.

The return to work process will apply when an employee is absent because of injury and/or illness, or when an employee is having difficulty maintaining their pre-injury/pre-illness duties. If appropriate, the City will develop a written return to work plan together. The plan will set out the actions each party must take, and may involve a combination of training and suitable duties for the employee which increase in duration and/or frequency over time. It will also provide a time frame for monitoring progress and reviewing the plan. D15/71928 v*.

Return to Work (RTW) process flow chart

```
                    ┌─────────────────────────────────────┐
                    │   Medical certificate received       │
                    └─────────────────────────────────────┘
                                    │
        ┌──────────────┐   ┌──────────────────┐   ┌──────────────────┐
        │ Totally unfit│   │   Restricted     │   │ Fit for full pre-│
        │              │   │ duties or hours  │   │  injury hours    │
        │              │   │   indicated      │   │   and duties     │
        └──────────────┘   └──────────────────┘   └──────────────────┘
                                    │
                    ┌─────────────────────────────────────┐
                    │ Develop RTW for duration of medical  │
                    │ certificate                          │
                    │  • Supervisor & worker to discuss    │
                    │    suitable duties                   │
                    │  • RTW plan to be written            │
                    │  • Supervisor & worker to sign RTW   │
                    │    plan                              │
                    │  • Copy provided to worker & GP      │
                    └─────────────────────────────────────┘
                                    │
                          ┌──────────────────┐
                          │  RTW commences   │
                          └──────────────────┘
                                    │
                    ┌─────────────────────────────────────┐
                    │  Maintain regular contact with worker│
                    └─────────────────────────────────────┘
                                    │
        ┌──────────────────────────┐   ┌──────────────────────────┐
        │     Medical Review       │   │    Final certificate     │
        │                          │   │                          │
        │ Injured worker reviewed  │   │ Issued by treating       │
        │ at least once per month  │   │ medical practitioner     │
        │ by treating medical      │   │ when no further          │
        │ practitioner             │   │ medical management is    │
        │                          │   │ required.                │
        └──────────────────────────┘   └──────────────────────────┘
```

Roles and Responsibilities

Everyone has a role to play in the return to work process. Communication is the KEY. It is the expectation of management that a work injury be reported immediately and follow the guidelines set down in the safety and health process (incident and investigation).

As the employee you are responsible for:
- keeping in contact with your manager
- helping to develop a return to work plan
- asking your manager for information about your job to give to your doctor, physio, occupational therapist etc.
- telling your doctor etc. about the return to work process, and if temporary/alternative suitable duties are available
- telling your manager if the doctor etc. limits your capacity for any type of work
- providing medical certificates from your doctor
- returning to work when your doctor etc. certifies you are able to
- advising your manager of any barriers to the Return to Work process, regular updates on your condition, and any medical information required.

As the Manager/Supervisor/Team Leader you are responsible for:
- ensuring prompt medical attention for your injured/ill employee
- if necessary, accompanying your injured/ill employee to a treatment provider
- if required providing the treatment provider details about our return to work process. This could include providing them with a work task analysis or functional job description, and a list of suitable duties (please refer to HR/OSH for assistance)
- ensuring your injured employee is able to follow the treatment provider's recommendations
- helping develop and monitor a return to work plan (provide copy to HR for personnel file).

THE CITY OF KWINANA'S COMMITMENTS AS EMPLOYER

As part of our commitment to the program and procedure, the City agrees to:
- fulfil its legal obligations to ensure the safety of employees;
- start the return to work process as soon as safely possible after an employee's injury/illness;
- always follow medical advice, and if necessary liaise with health/medical providers to coordinate access to medical treatment.

DOCUMENT CONTROL

DOCUMENT CONTROL – SAFETY AND HEALTH MANAGEMENT SYSTEM FRAMEWORK TIER 3

This page belongs in the Safety and Health Management Framework Tier 3 and is to be used to track updates.

Changes will be made as necessary as per the process set out in the Safety and Health Management Framework Tier 3.

Document Title: Safety and Health Management Framework Tier 3

Creation Date: 2021

VERSION CONTROL

Version/ Amendment	Date	Recent Amendments	Authority to Amend
1.0	18 March 2021	Document developed	Executive Team

The master copy of this document (for the purposes of document control) is held in CM9.
All printed copies of this Health and Safety Management System Framework Tier 3 and any related forms are uncontrolled.

Uncontrolled if printed.

RELATED DOCUMENTS

Relevant Legislation

- *Occupational Safety and Health Act* 1984 (WA);
- *Occupational Safety and Health Regulations* 1996

Other Relevant Legislation

There is a variety of related legislation that also needs to be factored into the City's response to a crisis situation;

- *Dangerous Goods Safety Act* 2004 provides for the list of approved codes of practice

- *Emergency Management Act* 2005 (WA)

- *Fair Work Act* 2009 Cth.

- *Environmental Protection (Controlled Waste) Regulations* 2004

- ISO 31000: 2009: Risk Management – Principles and Guidelines

- AS 2436:2010: Guide to Noise and Vibration Control on construction, demolition and maintenance sites

- AS 2601: 2001: The demolition of structures - summary

- AS 2865: Confined Spaces

- AS/NZS 4360: 2004: Risk Management

- AS/NZS 1891 Series: Industrial fall-arrest system and devices – Harnesses and ancillary equipment

- AS/NZS 4576:1995: Guidelines for Scaffolding

- AS/NZS 4804: 2001. Occupational health and safety management systems – General guidelines on principles, systems and supporting techniques

- AS/NZS 4801: 2001. Occupational health and safety management systems – Specification with guidance for use

- National Code of Practice for the Control of Workplace Hazardous Substances (NOHS:2007(1994))

- National Code of Practice for the Safe Removal of Asbestos 2nd Edition (NOHS:2002(2005))

- Code of Practice – Excavation (WA)

- Codes of Practice – First Aid Facilities and Services; Workplace Amenities and Facilities; Personal Protective Clothing and Equipment: 2002 (WA)

- Code of Practice – Prevention of falls from height at workplaces (WA)

INFORMATION

Safety and Health information is available on:

WorkSafe WA (https://www.safeworkaustralia.gov.au)

Information regarding legislation is available on the website (www.slp.wa.gov.au).

LGIS WorkCare Performance Based Claims Report

City of Kwinana												
Claims Performance as at 31 March 2021												
Fund Year	**2009/2010**	**2010/2011**	**2011/2012**	**2012/2013**	**2013/2014**	**2014/2015**	**2015/2016**	**2016/2017**	**2017/2018**	**2018/2019**	**2019/2020**	**2020/2021**
Model	Original	Original	Original	Original	Original	Original	Original	Original	Original	Blended	Blended	Blended
Wages	$13,710,421	$14,617,730	$16,390,923	$17,343,907	$18,675,913	$20,577,466	$20,389,857	$20,626,146	$22,108,386	$22,768,805	$22,906,103	$23,099,405
Deposit Rate	2.00%	2.00%	2.00%	2.00%	2.00%	2.00%	2.00%	2.00%	1.45%	1.09%	1.12%	1.08%
Deposit Contribution	$274,208	$292,355	$327,818	$346,878	$373,518	$411,549	$407,797	$412,523	$320,572	$247,611	$257,407	$249,474
Deposit Claims Threshold	$205,656	$219,266	$245,864	$260,159	$280,139	$308,662	$305,848	$309,392	$240,429	$168,443	$175,107	$169,710
Min Rate	1.60%	1.60%	1.60%	1.60%	1.60%	1.60%	1.60%	1.60%	1.45%	1.45%	1.45%	1.35%
Min Contribution	$219,367	$233,884	$262,255	$277,503	$298,815	$329,239	$326,238	$330,018	$320,572	$330,148	$332,138	$311,842
Min Claims Threshold	$164,525	$175,413	$196,691	$208,127	$224,111	$246,930	$244,678	$247,514	$240,429	$247,611	$249,104	$233,881
Max Rate	3.50%	3.50%	3.50%	3.50%	3.50%	3.50%	3.50%	3.50%	2.75%	3.45%	3.25%	3.00%
Max Contribution	$479,865	$511,621	$573,682	$607,037	$653,657	$720,211	$713,645	$721,915	$607,981	$785,524	$744,448	$692,982
Max Claims Threshold	$359,899	$383,715	$430,262	$455,278	$490,243	$540,158	$535,234	$541,436	$455,985	$589,143	$558,336	$519,737

Current Status												
Status	MINIMUM	OPEN	CLOSED	MINIMUM	MINIMUM	closed	MAXIMUM	minimum	OPEN	OPEN	OPEN	OPEN
Deposit Exceeded	NO	YES	NO	NO	NO	YES	YES	NO	NO	YES	NO	NO
Maximum Exceeded	NO	YES	NO	NO	NO	NO	YES	NO	NO	NO	NO	NO
Claims Paid	$52,465	$427,186	$229,336	$154,938	$97,731	$342,547	$544,129	$162,827	$16,330	$217,425	$47,695	$1,888
Claims Incurred (paid + outstanding)	$52,465	$578,514	$229,336	$154,938	$97,731	$342,547	$544,129	$162,827	$16,330	$243,928	$47,695	$98,658
Contribution Required on Claims ($75 claims requires $100 contribution) No more than Max; No less than Min Based on claims paid, except for Blended in first 30 months where based on Claims Incurred	$219,367	$511,621	$305,781	$277,503	$298,815	$456,730	$713,645	$330,018	$320,572	$330,148	$257,407	$249,474
Contribution Paid to Date	$219,366	$511,621	$306,103	$277,503	$298,814	$447,746	$713,645	$330,018	$320,572	$330,148	$256,548	$249,574
Additional / Return Contribution Due	$1	$0	-$322	-$0	$0	$8,983	-$0	$0	-$0	$0	$849	$0

Claims Projection												
Claims Outstanding	$0	$151,328	$0	$0	$0	$0	$0	$0	$0	$26,503	$0	$96,770
Claims Incurred (paid + outstanding)	$52,465	$578,514	$229,336	$154,938	$97,731	$342,547	$544,129	$162,827	$16,330	$243,928	$47,695	$98,658
Reserving Required on Claims Incurred	$1	-$0	-$322	-$0	$0	$8,983	-$0	$0	-$0	-$0	$859	-$100

<u>**COMMITTEE DECISION**</u>

MOVED CM G MCMATH   SECONDED MAYOR C ADAMS

That, in accordance with Section 11.7 of the City of Kwinana *Standing Orders Local Law 2019,* the Audit and Risk Committee move behind closed doors to allow discussion of the Confidential Attachments relating to Items 6.2, 6.3 and 6.4.

**CARRIED
6/0**

The Council Chambers doors were closed at 5:56pm.

6.2   Risk Management Reporting

DECLARATION OF INTEREST:

There were no declarations of interest declared.

SUMMARY:

Council has endorsed a Risk Management Council Policy to manage all risks that have been identified and that could impact the City if they were not managed and evaluated appropriately. At each Audit and Risk Committee Meeting, a report is presented detailing identified risks and the progress of the actions to manage those risks.

The City is in the process of transitioning to Camms.Risk software for recording and managing of its risks. The Camms.Risk reports entitled the City of Kwinana Heatmap Report – Organisational Risk Register, is enclosed at Confidential Attachment A and the and the City of Kwinana Heatmap Report – All Risks detailed in Confidential Attachment B, for noting by the Committee.

OFFICER RECOMMENDATION:

That the Audit and Risk Committee note and provide comment where appropriate on the City of Kwinana Heatmap Report – Organisational Risk Register detailed in Confidential Attachment A and the City of Kwinana Heatmap Report – All Risks detailed in Confidential Attachment B.

DISCUSSION:

The City commenced its transition to Camms.Risk in March 2021. This software provides a more streamlined approach to the reporting of risk management, provides a better understanding on reporting requirements and the controls that should be in place for identified risks within the City.

This report is provided to the Audit and Risk Committee on a quarterly basis for their review and an opportunity to provide advice regarding risk management, as the City is focussed on creating a culture that is committed to openness and transparency and fulfilling its responsibilities in relation to risk management.

6.2 RISK MANAGEMENT REPORTING

All departments across the City have been requested to input their Organisational Risk Register Entries into Camms.Risk. All 'high' and 'extreme' rated risks were also requested to be entered along with the strategic risks. It is anticipated that the remainder of risks contained within previous team registers will be entered into Camms.Risk in the near future. This includes any new risk entries.

It should be noted that whilst the City is continuing to implement the new risk management software we are resolving some minor technical issues that are being addressed with the developer. The City is also looking to explore additional training options for City Officers in risk management and use of the risk management system whilst the transition is being completed.

LEGAL/POLICY IMPLICATIONS:

Regulation 17 of the Local Government (Audit) Regulations 1996 provides:

17.   CEO to review certain systems and procedures
(1)   The CEO is to review the appropriateness and effectiveness of a local government's systems and procedures in relation to —
(a)   risk management; and
(b)   internal control; and
(c)   legislative compliance.

(2)   The review may relate to any or all of the matters referred to in subregulation (1)(a), (b) and (c), but each of those matters is to be the subject of a review not less than once in every 3 financial years.

(3)   The CEO is to report to the audit committee the results of that review.

FINANCIAL/BUDGET IMPLICATIONS:

There are no financial implications identified as a result of this report.

ASSET MANAGEMENT IMPLICATIONS:

There are no asset management implications identified as a result of this report.

ENVIRONMENTAL/PUBLIC HEALTH IMPLICATIONS:

There are no direct environmental or public health implications identified as a result of this report.

STRATEGIC/SOCIAL IMPLICATIONS:

There are no strategic/social implications as a result of this proposal.

COMMUNITY ENGAGEMENT:

There are no community engagement implications as a result of this report.

6.2 RISK MANAGEMENT REPORTING

<u>COMMITTEE DECISION</u>

MOVED CR M ROWSE **SECONDED CM B ARNOLD**

That the Audit and Risk Committee note and provide comment where appropriate on the City of Kwinana Heatmap Report – Organisational Risk Register detailed in Confidential Attachment A and the City of Kwinana Heatmap Report – All Risks detailed in Confidential Attachment B.

CARRIED
6/0

Mayor Carol Adams exited the Council Chambers at 6:18pm

Audit and Risk Committee comments:
- The new system and reporting is a work in progress and the Audit and Risk Committee look forward to future revisions.
- Explore the possibility of centralised governance with repetitive risks and having a parent/child option for regulatory compliance risks.
- Improve readability due to being difficult to understand the dashboard, namely how each risk flows down.

Audit and Risk Committee noted:

- The City is continuing to implement the new risk management software and are resolving some minor technical issues that are being addressed with the developer. The City is also looking to explore additional training options for City Officers in risk management and use of the risk management system whilst the transition is being completed.
- The Heatmap reports provides summary of the risks, future trend analysis, risk overview detail and the mitigation in place.
- Some of the risks are missing their controls within the reports, it was confirmed each risk has a control attached to it and it was a software issue that has been reported.
- If an update to a risk is of serious note, the Audit and Risk Committee would be notified depending on the event, the Audit and Risk Committee would be updated by reporting and project updates.

Mayor Carol Adams returned to the Council Chambers at 6:19pm

6.3   Crowe Australasia Audit of Developer Contribution Payments

DECLARATION OF INTEREST:

There were no declarations of interest declared.

SUMMARY:

Crowe Australasia (Crowe) were retained by the City for the purpose of conducting an audit of the City's practices and procedures relating to developer contribution payments (DCPs). A report of the findings is presented at Confidential Attachment A for noting by the Audit and Risk Committee.

OFFICER RECOMMENDATION:

That the Audit and Risk Committee notes the findings of Crowe Australasia contained at Confidential Attachment A and provides comment where appropriate.

DISCUSSION:

The City appointed Crowe to conduct a review of systems and procedures relating to DCPs. Quotes were obtained from four prospective auditors, with Crowe ultimately selected on the basis of their competitive pricing and significant prior experience dealing with local government and DCPs.

The report makes a number of findings related to improvements in the City's practices in the following key areas:

- DCP Contribution calculation
- DCP requirements
- Operating Framework
- DCP delegations
- DCP Recording system
- Management Reporting
- Management Reporting
- Managing conflict of interest
- Bonds/Bank Guarantee Monitoring
- Infrastructure Projects - Legal Agreements

Those findings have been provided to the relevant officers for consideration. Progress of audit recommendations will be presented at future Audit and Risk Committee meetings.

6.3 CROWE AUSTRALASIA AUDIT OF DEVELOPER CONTRIBUTION PAYMENTS

Only two areas were classified as 'high' risk level:

Risk Description	Action to be taken
Delegations required to administer DCP transactions. A recommendation was made that the City review the current delegations to ensure they are appropriate to cover all transactions required under the management of DCP's.	The State Planning Policy is currently being reviewed and its finalisation is imminent. I would propose that we await the review of the Policy following the State Planning Policy is adopted. In terms of the authorisations and delegations these are reviewed on an annual basis by City Legal and Governance.
Managing the City's conflict of interest. A recommendation was made for the City to broaden the awareness and management of conflict of interest requirements over the lifecycle of the DCP and across the DCP function.	Conflict of interest is managed through various governance requirements of local government. Investigation of where COI can be introduced in the DCP process needs to be explored in the future.

The remainder of risks were classified as 'moderate' or 'low' risk to the City.

LEGAL/POLICY IMPLICATIONS:

Local Government Act 1995

7.3.   Appointment of auditors
(1)   *A local government is to, from time to time whenever such an appointment is necessary or expedient, appoint* a person, on the recommendation of the audit committee, to be its auditor.*

Planning and Development (Local Planning Schemes) Regulations 2015:

71.   Development contribution plan
(1)   *A local government must prepare a development contribution plan for each area identified in a local planning scheme as a development contribution area.*
(2)   *A development contribution plan may be prepared concurrently with the identification of the development contribution area to which it relates.*
(3)   *A development contribution plan is prepared for the purpose of setting out who is to contribute to the cost of providing infrastructure or facilities in a development contribution area and how those contributions are to be determined.*
(4)   *A development contribution plan must set out the following —*
          (a)   *the development contribution area to which it applies;*
          (b)   *the infrastructure and administrative items to be funded through the plan;*
          (c)   *the method of determining the contribution of each owner of land in the development contribution area;*
          (d)   *the priority and timing for the provision of the infrastructure;*
          (e)   *whether costs of providing infrastructure and administrative items are to be reviewed annually and if so, the method proposed for the annual review of the costs;*
          (f)   *the term for which the plan is to have effect*

6.3 CROWE AUSTRALASIA AUDIT OF DEVELOPER CONTRIBUTION PAYMENTS

FINANCIAL/BUDGET IMPLICATIONS:

There are no direct financial/budget implications as a result of this report.

ASSET MANAGEMENT IMPLICATIONS:

There are no asset management implications identified as a result of this report.

ENVIRONMENTAL/PUBLIC HEALTH IMPLICATIONS:

There are no direct environmental or public health implications identified as a result of this report.

STRATEGIC/SOCIAL IMPLICATIONS:

There are no direct strategic/social implications as a result of this proposal.

COMMUNITY ENGAGEMENT:

There are no community engagement implications as a result of this report.

COMMITTEE DECISION

MOVED CR P FEASEY   SECONDED CR S LEE

That the Audit and Risk Committee notes the findings of Crowe Australasia contained at Confidential Attachment A and provides comment where appropriate.

**CARRIED
6/0**

Audit and Risk Committee comments:
- Developer Contributions to be strengthened moving forward.
- The City has a large number of Developer Contribution areas.
- Request Developer Contribution education be investigated and provided to the Elected Members and the Independent Audit and Risk Committee Members.

Audit and Risk Committee noted:

- Confirmed that the Audit and Risk Committee and Council will receive updates to the management comments due to the intent to take the recommendations into an action plan.
- That item 4.9 of Confidential Attachment A be actioned as a high priority.
- That the Director City Legal was included within Confidential Attachment A, Appendix 2, as personnel contacted during the audit due to still being an employee with the City at the time of the audit commencing.
- That the review approach within Confidential Attachment A, Appendix 4, is acceptable.

6.4 Systems and Procedures Audit 2021

DECLARATION OF INTEREST:

There were no declarations of interest declared.

SUMMARY:

The *Local Government (Audit) Regulations 1996* requires that not less than once in every three financial years, the City review the appropriateness and effectiveness of its systems and procedures.

Paxon Group were retained to conduct the City's 2021 systems and procedures review. A report of their findings is presented at Confidential Attachment A. Overall the controls in place by the City were deemed to be satisfactory. Recommendations were made for improvement in several areas where further controls were determined to be appropriate.

OFFICER RECOMMENDATION:

That the Audit and Risk Committee receive the system and procedures audit report of Paxon Group at Confidential Attachment A and provide comment where appropriate.

DISCUSSION:

Not less than every three financial years, the Chief Executive Officer is required to review the appropriateness and effectiveness of systems and procedures in relation to:
(a)   risk management;
(b)   internal control; and
(c)   legislative compliance.

After carrying out a systems and procedures audit the local government is to prepare an audit report in a form approved by the Minister. The local government's Audit and Risk Committee is to review the audit report and is to provide the results of that review to Council.

The City last conducted a systems and procedures audit in 2018, and was required to undertake a further review in 2021. At its Ordinary Council Meeting held on 16 December 2020, Council resolved to appoint Paxon Group to conduct such audit on behalf of the City.

Paxon Group have now completed their review. A copy of their findings is provided at Confidential Attachment A.

Overall, Paxon Group considered the City has a 'satisfactory' control environment in respect of appropriateness and effectiveness of City's systems and procedures. There were three risk ratings rated as 'High' across the business areas considered:

6.4 SYSTEMS AND PROCEDURES AUDIT 2021

Risk Description	Action to be taken
Risk of possible security breach arising from previous employees continuing to be listed as a current system user. One example was incorrectly identified, with it subsequently being determined that the employee had been re-employed subsequent to their termination.	No further action required. The employee was terminated effective 27 December 2020 but was subsequently re-hired with a new ID on 9 February 2021. The City has procedures in place relating to the re-hiring of terminated employees.
Risk of fraud from a lack of segregation of duties between requisition/purchase order and invoice.	Amend processes to ensure segregation of duties at all levels in the procurement process. Separation of duties will be achieved efficiently when the new business system is implemented.
Risk resulting from a lack of policy addressing 'whistle blowers'.	Whistle Blowing is referenced in the new Code of Conduct and in the City's Public Interest Disclosure – Guidelines. Training of four PID Officers is anticipated undertaken at the beginning of the new financial year through the Public Sector Commission. Guidelines to be updated.

The recommendations outlined the report have been provide to the relevant officers for actioning. The actions will be recorded within Performance Manager and reported back to the Committee every six months.

The next system and procedures audit is to be completed in 2024.

LEGAL/POLICY IMPLICATIONS:

Local Government Act 1995:

7.3.   Appointment of auditors
(1)   A local government is to, from time to time whenever such an appointment is necessary or expedient, appoint* a person, on the recommendation of the audit committee, to be its auditor.

Local Government (Audit) Regulations 1996:

17.   CEO to review certain systems and procedures
(1)   The CEO is to review the appropriateness and effectiveness of a local government's systems and procedures in relation to —
    (a)   risk management; and
    (b)   internal control; and
    (c)   legislative compliance.
(2)   The review may relate to any or all of the matters referred to in subregulation (1)(a), (b) and (c), but each of those matters is to be the subject of a review not less than once in every 3 financial years.
(3)   The CEO is to report to the audit committee the results of that review.

6.4 SYSTEMS AND PROCEDURES AUDIT 2021

FINANCIAL/BUDGET IMPLICATIONS:

The budget allocation for the completion of the System and Procedures Audit has been included in the 2020/2021 budget, within account 400053.1085.60.

ASSET MANAGEMENT IMPLICATIONS:

There are no asset management implications identified as a result of this report.

ENVIRONMENTAL/PUBLIC HEALTH IMPLICATIONS:

There are no environmental implications identified as a result of this report.

STRATEGIC/SOCIAL IMPLICATIONS:

There are no direct strategic/social implications as a result of this proposal.

COMMUNITY ENGAGEMENT:

There are no community engagement implications as a result of this report.

COMMITTEE DECISION

MOVED CR S LEE   SECONDED MAYOR C ADAMS

That the Audit and Risk Committee receive the system and procedures audit report of Paxon Group at Confidential Attachment A and provide comment where appropriate.

CARRIED
6/0

6.4 SYSTEMS AND PROCEDURES AUDIT 2021

Audit and Risk Committee comments:
- Request that the rating schemes be aligned with that of the City's own risk management system for all future audits.
- A recent KPMG report identifies cyber fraud as the top risk to an organisation.
- A register of policies, including their review requirements, to be presented to the Audit and Risk Committee.
- That the Internal Audit Program be developed with consultation of the Audit and Risk Committee Chair.

Audit and Risk Committee Noted:

- That Confidential Attachment B refers to the City's risk report being outdated which is due to the process currently transitioning, and that comment relates to the previous spreadsheet system.
- That the City is working on a solution to the issues raised on page 5 of Confidential Attachment B, specifically with the new system Corporate Business system. City Officers recognise the concern and have monitoring controls currently in place as the current system does not easily allow segregation of duties.
- Confirmed that the Audit and Risk Committee and Council will receive updates of the actions to address the identified weaknesses.
- The City has plans in progress for cyber fraud prevention and a report will be presented to the Audit and Risk Committee and Council in the future.
- In regards to the 'Whistle Blower' Policy, both the Employee Code of Conduct and Elected Members, Committee Members and candidates Code of Conduct have been presented to Council and adopted. PID Officer training is being undertaken in July 2021 and all employees will be notified of the available PID Officers and this will also be included in employee inductions for new starters. In addition, employees upon receiving the employee code of conduct and training will sign a declaration of acknowledgement.
- Internal Audit Program will be developed with consultation of the Audit and Risk Committee Chair.

COMMITTEE DECISION

MOVED CM G MCMATH   **SECONDED CR M ROWSE**

That the Audit and Risk Committee return from Behind Closed Doors.

CARRIED
6/0

The Council Chambers doors were opened at 6:56pm.

7   Late and urgent Business

Nil

8 Confidential items

Nil

9 Close of meeting

The Chair, Gaye McMath declared the meeting closed at 6:57pm.