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GREATER SHEPPARTON CITY COUNCIL OCCUPATIONAL HEALTH AND SAFETY POLICY STATEMENT

The City of Greater Shepparton will conduct its business in a manner that contributes to the health and well being of its employees, and ensure the safety of employees, contractors and the public.

The City of Greater Shepparton is **committed** to:

- providing a safe and healthy work environment to prevent injury and illness
- the identification and quick resolution of health and safety issues in the workplace
- consultation and cooperation between management and employees to resolve workplace health and safety issues
- establishing and providing resources to support an Occupational Health and Safety Committee and Health and Safety representatives
- educating staff with respect to OH & S issues and training staff in safe work practices
- providing appropriate safety equipment, clothing and protective gear to prevent accidents and injuries
- regularly monitoring the health and safety of employees who work in high risk areas, especially providing hearing and eyesight testing on a regular basis
- development a work place based rehabilitation program to assist injured employees to return to the workforce as soon as possible after an injury or illness
- encouraging a consultative approach between all parties to improve health and safety performance.

The Council recognises and takes very seriously its duties and responsibilities under the **Occupational Health and Safety Act 2004** and accepts accountability for the management of the OH&S programs and the resolution of health and safety issues.

The Council will create and maintain an appropriate occupational health and safety management system in accordance with appropriate Australian Standards and legislation. This system will be monitored to ensure its integrity and effectiveness.

The Council encourages a consultative approach between all parties to improve health and safety performance.

All employees have a duty of care to protect not only their own health and safety, but also that of their fellow employees and are actively encouraged to participate with management in the continual improvement of workplace standards.

This Policy will be reviewed as required to reflect changes in the organisation or Occupational Health and Safety legislation.

At the City of Greater Shepparton, safety in the workplace is the responsibility of every employee. Any breach of Council Policy and CoGSAFE Procedures may be dealt with using the Human Resources [Discipline Procedure](#)

The Occupational Health and Safety Manual – CoGSAFE – sets out the Council’s commitment to and requirements for Occupational Health and Safety in the workplace.

Chief Executive Officer

Date:/...../.....

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OCCUPATIONAL HEALTH and SAFETY ACT

1. OCCUPATIONAL HEALTH AND SAFETY ACT 2004:

The **objectives** of the *Occupational Health and Safety Act 2004* (section 2) are:

- (a) *to secure the health, safety and welfare of persons at work;*
- (b) *to protect persons at work against risks to health or safety;*
- (c) *to assist in securing safe and healthy work environments;*
- (d) *to eliminate, at the source, risks to health, safety and welfare of persons at work;*
- (e) *to provide for the involvement of employees and employers and associations representing employees and employers in the formulation and implementation of health and safety standards."*

The *Occupational Health and Safety Act 2004* (the Act) provides a framework for preventing workplace injury and disease.

The involvement of employees in decisions concerning their health and safety is central to the Act's - and Council's - strategy for the prevention of workplace injury and disease.

The Act imposes certain requirements on both employers and employees to co-operate to prevent injury and accidents and to ensure the provision of and access to safe and healthy working conditions.

2. MANAGEMENT (EMPLOYER) RESPONSIBILITIES (SECTION 21):

The *Occupational Health and Safety Act 2004* [section 21 (1)] requires the employer:

"to provide and maintain so far as is practicable for employees a working environment that is safe and without risks to health".

NB Under section 21(3) the definition of an "employee" includes:

"an independent contractor engaged by an employer and any employees of the independent contractor".

To achieve this the Council shall "... so far as is practicable" [section 21 (4)]:

- * monitor the health of Council employees;
- * keep information and records relating to the health and safety of employees;

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- * monitor conditions at any workplace under Council's control and management;
- * provide information to employees with respect to health and safety at the workplace, including the names of people to whom an employee may make an inquiry or complaint in relation to health and safety.

Under the Act, the Council is responsible for health and safety with respect to:

- * plant and systems of work - all plant and equipment must comply with safety standards;
- * handling, storage and transport of plant and substances - including maintaining a register of chemicals and all basic materials;
- * all workplaces within its control and management - monitoring workplaces and conducting assessments as required;
- * providing facilities for the welfare of employees - first aid officers, first aid facilities and first aid kits to be available;
- * providing appropriate training, information, supervision and instruction with respect to OH&S for all employees.

Council is also committed to implementing appropriate rehabilitation procedures to assist any employee to return to work as quickly as possible, according to the [Rehabilitation - Return to Work Policy and Procedures](#).

3. EMPLOYEE RESPONSIBILITIES (SECTION 25):

The *Occupational Health and Safety Act 1985* [section 25 (1)] requires that, while at work, the employee ***must***:

*“... take reasonable care for his or her own health and safety and for the health and
and
Take reasonable care for the health and safety of persons who may be affected by the employee's acts or omissions at the workplace”.*

Further the Act sets out that an employee “***shall not***:

- “(2) *intentionally or recklessly interfere with or misuse anything provided at the workplace in the interests of health, safety or welfare”; or*
- (3) *In determining for the purpose of sub-subsection (1)(a) or (b) whether an employee failed to take reasonable care, regard must be had to what the employee knew about the relevant circumstances.*

Also, **every** employee is required (section 25) to:

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*“... co-operate with his or her employer with respect to any action taken by the employer to comply with a requirement imposed by or under ”the Occupational Health and Safety Act 2004 or regulations
”*

To achieve these requirements, all employees are required to:

1. Familiarise themselves with and understand Council's Occupational Health and Safety Policy and Procedures, CoGSAFE, and the Rehabilitation and Return to Work Policy and Procedures.
2. Take all reasonable care in the performance of their duties so as to prevent injuries to themselves and others (including members of the public), including working within all restrictions and safety guidelines.
3. Immediately report all injuries, accidents, safety incidents and near misses to their Supervisor.
4. Co-operate with management to enable rehabilitation obligations imposed by the *Accident Compensation Act* and the Occupational Rehabilitation Guidelines to be met by the employer.
5. Co-operate in reasonable workplace changes, designed to assist rehabilitation of fellow employees.

The Health and Safety Representatives, and the Occupational Health and Safety Committee have a key role in achieving these objectives and co-ordinating OH&S training etc.

The Position Descriptions of all employees will include appropriate responsibilities and accountabilities for OH&S issues.

***** OH&S TRAINING *****

The Council is committed to providing on-going OH&S training and awareness for all employees and in all areas of Council's operations.

The provision a safe working environment and the application of safe work procedures and practices are part of Council's commitment to its employees.

OH&S training will be integrated with Annual Training Programs, as appropriate, and will cover the following issues as appropriate and as required:

- manual handling;
- safe working practices, including traffic management;
- handling chemicals and other substances;
- first aid qualifications and awareness;

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- awareness of environmental conditions eg 'sun smart';
- workplace safety awareness;
- awareness of infectious diseases;
- stress management;
- safe plant operating procedures; and
- hazard identification and Management
- Risk Assessment and Management

Other issues covered will include:

- fire evacuation;
- hearing testing;
- injury prevention;
- first aid.

Training is provided for Health and Safety Representatives and for OH&S Committee members to ensure they are aware of and equipped to fulfil their roles and responsibilities.

Specific OH&S training will be provided for Managers and Supervisors.

OH&S education, training and awareness are essential to the prevention of workplace accidents and to the implementation of safe working practices and procedures.

At the City of Greater Shepparton, safety in the workplace is the responsibility of every employee.

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*** OH&S CONSULTATIVE PROCEDURES ***

The Act recognises that health and safety issues will arise from time to time and establishes consultative procedures to attempt to resolve issues which arise at a workplace and provides for the joint participation of employers and employees in determining safe working conditions at the workplace level.

This is achieved by:

- * the identification of designated work groups; **(DWG)**
- * the election of Health and Safety Representatives; and **(HSR)**
- the establishment of a Health and Safety Committee. (section 72) **(OHS)**

1. HEALTH AND SAFETY REPRESENTATIVES:

Health and Safety Representatives are elected by all employees in the designated work group to represent the interests of employees in each designated work group and to deal with day-to-day safety issues with a nominated management representative in that work area. Term of Office is for a 3 year period.

The Act sets out the general functions of Health and Safety Representatives (section 58 & 60) which include:

- * inspections of workplaces at any time and, in particular, immediately after any accident, hazardous situation, dangerous occurrence or immediate risk to the health and safety of any person;
- * accompanying inspectors during any inspections of workplaces;
- ❖ If a member of the designated workgroup (DWG) consents, be present at an interview concerning occupational health and safety between an the member and an inspector; or the member and the employer concerned or its representative
- * issuing Provisional Improvement Notices requiring action to be taken to remedy an alleged contravention of the *Occupational Health and Safety Act only after consulting with the person about remedying the contravention.*

Provisional Improvement Notices (PIN's) are legal directions which assert non-compliance with or a contravention of a provision or provisions of the Act and require that the contravention be remedied.

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The employer is required to provide Health and Safety Representatives with access to information relating to:

- * actual and potential hazards arising at any workplace under the control of the employer, the conduct of the undertaking of the employer or the plant or substances used for the purposes of that undertaking; and
- * the health and safety of employees.

The employer should, if practicable, consult with Health and Safety Representatives on matters relating to all proposed changes to the workplace, the plant or substances used at the workplace or conduct that may affect health or safety of any member of the designated work group.

The employer must also provide Health and Safety Representatives with time off work with pay to enable them to perform and fulfil the requirements of their position.

Functions of Health and Safety Representatives:

The specific functions and responsibilities of the Health and Safety representatives include:

- * raising awareness among employees of health and safety issues and procedures;
- * being proactive in identifying and managing hazards;
- * conducting inspections of the workplace, especially after any accident, dangerous occurrence or risk to health and safety;
- * consulting with Managers and Supervisors on all relevant proposed changes to the workplace and any plant, equipment or substances used which may affect the health, safety and welfare of employees in the workplace;
- * consulting with employees on proposed changes which may affect their health and safety;
- * issuing **Provisional Improvement Notices** (PIN's) relating to alleged failures to comply with the Act or Regulations (see section 5, below);
- * seeking advice from consultants and/or union advisers from outside the workplace;
- * representing employees on the OH&S Committee; and
- * establishing workplace employee committees to discuss and formulate procedures on health and safety issues and address workplace safety issues for recommendation to the OH&S Committee.

The Council's *CoGSAFE Manual* sets out in detail the roles and responsibilities of Health and safety Representatives in all operations and in all workplace situations.

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The **Designated Work Groups (DWG) elected Health and Safety Representatives (HSR)** set out in Appendix 2. All elected Health and Safety Representatives (and their proxy representatives) will be provided with approved training to enable them to properly, effectively and thoroughly carry out and fulfil all their responsibilities.

Guidelines (below) set out the consultative procedures to be followed in the introduction of workplace changes to ensure that all affected employees are informed of and consulted on the proposed changes.

The Health and Safety Representatives, and/or the OH&S Committee, or Committee members can initiate, undertake and/or co-ordinate the consultation on relevant workplace changes.

2. OH&S COMMITTEE:

Council is committed to effective consultation and communication on all relevant OH&S workplace issues and changes.

The OH&S Committee (the Committee) makes recommendations to EMT on OH&S issues and interacts with the BVCC or it's equivalent as required.

The Act (section 72(3)) sets out the roles and responsibilities of the Health and Safety Committee as follows:

In particular, the Act (section 72) sets out the roles and responsibilities of Health and Safety Committees as follows:

- * *to facilitate co-operation between the employer and the employees in “instigating, developing and carrying out measures designed to ensure the health and safety at work” of all employees;*
- * *to “formulate, review and disseminate (in other languages if appropriate) to employees the standards, rules and procedures relating to health and safety that are to be carried out or complied with at the workplace”.*

To facilitate the resolution of OH&S issues in the workplace, the following arrangements apply:

- (i) the elected Health and Safety Representatives are responsible for workplace issues and must implement and undertake their statutory obligations and requirements;
- (ii) an OH&S Committee will be comprised of the elected Health and Safety Representatives, nominated member(s) of the Consultative Committees, the Risk Management Officer and the designated Health and Safety Officer and will meet on a regular basis, and report and make recommendations to the EMT;

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- (iii) there will be regular meetings;
- (iv) the Committee will deal with issues such as: compliance with legislation, Regulations and Codes of Practice; policies and procedures; expenditure on research, surveys and reviews etc (including of equipment, the working environment and employees); developing training programs, and resolving issues which cannot be resolved through other mechanisms.

It is essential that all OH&S issues are dealt with, and resolved wherever possible, in the workplace between the employee, the relevant workplace Health and Safety Representative and the Supervisor/Manager.

Where an issue cannot be resolved at the workplace it should be referred to the EMT for resolution and decision. (Refer Section 3.03 Issue Resolution)

If the issue cannot be resolved, then the matter can be referred to Council's Grievance Procedure

Detailed procedures for resolving workplace OH&S issues are set out in the Council's *CoGSAFE Manual*.

The members of the Health and Safety Committee are listed in Appendix 2.

3. INTRODUCTION OF WORKPLACE CHANGES:

Under these guidelines, Management will consult with elected Health and Safety Representatives about all relevant proposed changes to the workplace, the work environment, job redesign and/or new technology, equipment, materials etc. which may affect the health, safety and welfare of employees.

In all cases, adequate time - generally at least two weeks - will be allowed from the date of notification of the proposed changes to the representative(s) to enable him/her/them to:

- (i) gain independent advice eg unions, consultants* etc;
- (ii) consult the other Health and Safety Representatives; and
- (iii) consult other staff, including calling staff meetings during working hours [subject to at least five (5) days notice being given to the relevant Manager/Supervisor].

Notification of any proposed changes should be given to the Health and Safety Representatives. At any time, any member of the OH&S Committee, as well as the Health and Safety Representatives, can initiate staff consultative procedures and request independent advice and information*.

(*NB. Any approach to consultants or other action by a member of the OH&S Committee which will incur a cost to the Council must have the prior approval and support of

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the OH&S Committee and the EMT. The approach to consultants will be made jointly by the Health and Safety Representative(s) and management, and such costs, as are reasonable, and approved, in the situation, will be met by Council).

All **MAJOR** changes to the work environment - job redesign, the introduction of new technology or equipment etc. - **must** be referred to the OH&S Committee for approval prior to their introduction*.

*NB See the 'Introduction of Change' [or similar] clauses in the relevant Award and the relevant Certified Agreement.

Health and Safety Representatives may request that any proposed change be referred to the OH&S Committee for discussion and decision.

To facilitate and assist consultation on the introduction of workplace changes, Council will:

- * compile and maintain a register of chemicals and all toxic materials used;
- * ensure that all new equipment complies with safety standards;
- * undertake regular environmental monitoring, as required;
- * provide appropriate training for all employees on OH&S issues and procedures;
- * ensure that there are sufficient people suitably trained in First Aid appropriate to their Work Area and provide and maintain First Aid kits and supplies; and
- * include OH&S training in the induction of all new employees.

The **written notification** of proposed changes should include information on:

- existing practices, equipment, technology etc.;
- proposed changes to practices, equipment etc;
- justification of the proposed changes - efficiency, economy, effectiveness, current problems, availability, safety record, complaints etc.;
- alternatives or options considered in selecting the proposed change(s);
- consultation carried out in selecting the preferred/proposed changes, especially with the staff directly involved in the change(s);

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- all available information relating to the changes, especially relating to equipment, chemicals (toxicity etc.), handling procedures etc; and an assessment of the training requirements and of any new safety gear or equipment required, if applicable, for staff involved in the implementation of the changes.

Where the Health and Safety Representative(s), after consultation with staff, do not agree to or accept the proposed changes, OR where management does not accept any alterations or modifications to the changes recommended by the Health and Safety Representatives, the matter will be referred to the OH&S Committee for recommendation to EMT.

If the OH&S Committee fails to agree on the proposed changes or alterations, then in **accordance with the Council's Grievances Procedure** , a **Grievances Committee** will be initiated with an appropriately qualified person nominated - in agreement between the parties - as the Independent Chairperson

NB. No action taken by a Health and Safety Representative in accordance with this procedure will be used for the purpose of any disciplinary action or dismissal by the Council against an elected representative.

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*** OTHER PROVISIONS ***

REPORTING ACCIDENTS AND INJURIES:

All accidents, whether resulting in an injury or not, MUST be immediately reported to the Manager/Supervisor, or a Health and Safety Representative who will investigate the matter and take appropriate and necessary action to prevent a similar occurrence.

The written report of the accident or incident shall include:

- * name of the person involved
- * date and time of the accident/incident
- * nature of the accident/incident ie what happened
- * cause of the accident/incident ie why it happened
- * conditions of the work environment eg wet, gravel surface etc
- * details of any injury
- * names of any witnesses to the accident/incident

ANY employee who identifies anything which appears dangerous or hazardous should immediately report it to their Manager/Supervisor, or Health and Safety Representative.

A Workplace Injury and Illness Record Book is maintained for each Designated Work Area.

The Supervisor is required to forward reports to the Return to Work Coordinator following each and every event, incident or accident within 24 hours or as soon as practicable.

PROVISIONAL IMPROVEMENT NOTICES (PIN'S)

Provisional Improvement Notices (PIN's) are covered under sections 60 - 62 of the Act and provide powers and responsibilities for Health and Safety Representatives to identify and redress workplace safety issues.

A Health and Safety Representative may issue a PIN where s/he is of the opinion that any person:

- * is contravening a provision of this Act or Regulations; or

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- * has contravened such a provision in circumstances that make it likely that contravention will continue or be repeated.

The PIN requires the person to remedy the contravention or matters which lead to the contravention.

The Health and Safety Representative must consult with the person to whom the PIN is to be issued before issuing them with the notice.

A PIN shall [section 60 (3)]

- * ;
- * state the representative's belief on which the issue of the notice is based and the grounds for that belief; and;
- * specify the provision of this Act or the regulations and the representative considers has been or is likely to be contravened; and
- * specify a day (at least 8 days after the day on which the notice is issued) before which the person is required to remedy the contravention or likely contravention.

Under section 60 of the Act the Health and Safety representative may include in the PIN directions or options about how the situation can be remedied or resolved, including reference to relevant approved Codes of Practice.

The person to whom the PIN is issued may, subject to section 63 of the Act, and within seven (7) days of receiving the Notice, require an Inspector to attend at the workplace. An Inspector shall inquire into the circumstances relating to the PIN and may:

- * enquire into the circumstances the subject of the provisional improvement notice.
- * affirm (with or without modifications) or cancel the provisional improvement notice by giving written notice to the health and safety representative who issued it and the person to whom it was issued.
- *

It is an offence under the Act to not comply with a PIN (unless it is subject to an appeal).

DISCRIMINATION AGAINST EMPLOYEES:

Under section 76 of the Act employees who are fulfilling the requirements and responsibilities of the Act are protected from discrimination including dismissal, injury or any detriment to their employment.

SPECIFIC HEALTH AND SAFETY POLICIES

1. PERSONAL PROTECTIVE EQUIPMENT (PPE):

All employees will be provided with Personal Protective Equipment (PPE), including protective clothing, appropriate to their work requirements and conditions.

The equipment and/or clothing is provided for the safety and protection of employees and for the safety and protection of other employees and members of the community.

PPE and clothing and safety equipment provided by Council **MUST** be worn or used on all occasions when an employee is working for the Council.

Protective clothing to be provided includes:

- | | | |
|-------------------------|---|-----------------------------------------|
| * protective long pants | * | long sleeved shirts (with Council logo) |
| * overalls | * | safety footwear |
| * hard hat | * | eye protection/sunglasses |
| * ear protection | * | gloves |
| * dust mask | * | wide brimmed sun hat |
| * safety vest | | |

- A suitable broad brimmed hat with a rim of at least 8 cm wide or a bucket hat with a brim of 6-7cm and constructed from material that transmits less than 10% of UV radiation.
- In the winter period – 1 May to 1 September when the UV rays are at their lowest the wearing of Council Logo Beanies and baseball caps is acceptable.

Other equipment may be provided as appropriate to the Work Area.

SPECIFIC ITEMS OF PROTECTIVE CLOTHING OR SAFETY GEAR:

- * **Hard hats** shall be worn by all employees working on road and construction sites, where necessary, pruning or felling trees, and when working in trenches, and in all other circumstances where such measures are appropriate.
- * **Ear Protection** shall be worn by all employees operating or working near plant and noisy equipment. Specific items of equipment require hearing protection to be worn and such items are identified by the standard hearing protection symbol.
- * **Eye Protection** - safety glasses, safety spectacles, and/or visors shall be worn by all employees engaged in using chain saws, grinding discs, welding equipment, slashers and brush cutters. One pair of tinted safety glasses, which meet appropriate standards, will be supplied to each employee when that employee is working outside for extended periods.

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- * **Safety Vests** - all outdoor staff will be provided with high visibility (yellow/orange) safety vests which **must be worn and fastened** at all times when working in any situation when high visibility is required. Plant operators and truck drivers **must** wear vests when out of their vehicles.
- * **Hand Protection Gloves** will be supplied and must be worn whenever directed or as deemed necessary.

2. **NON-SMOKING - SMOKE FREE WORK ENVIRONMENT:**

The Council provides a **smoke free work environment**, which includes all Council buildings, offices, including the perimeter of buildings, vehicles and confined areas in which Council staff are employed or may be working from time to time.

The Council has adopted a non-smoking policy, and observation of and adherence to this policy is a condition of employment of all employees. However, employees who smoke out of working hours will not be discriminated against or disadvantaged in their employment at the Council.

Employees are not to smoke or stop work to smoke during working hours, other than at morning and afternoon tea and lunch breaks.

3. **SUN PROTECTION - "SUN SMART":**

All employees working in locations where they are exposed to direct sunlight shall take adequate precautions by using an approved sunscreen provided and supplied by the Council (minimum SPF 30+) on all exposed areas of skin and wearing clothing which covers the arms and legs.

A wide brimmed hat will be supplied by the Council and **MUST** be worn in addition to the above to protect the ears, face and neck,

4. **FIRST AID:**

In the event of injury, employees should immediately seek treatment from a qualified and trained First Aid officer so that early and appropriate treatment can be applied.

An appropriate number of qualified and trained First Aid officers will be appointed by Management (as deemed appropriate under the First Aid Code of Practice - see Appendix 1) to undertake the role and responsibilities of administering First Aid in the workplace.

The names of these officers will be displayed in a prominent position at all workplaces.

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First aid training will be provided by the Council on a regular basis to any employee on a voluntary basis and such training will be updated as required.

Employees who are trained in first aid are encouraged to provide first aid in the workplace and emergency situations in which they are involved or which they observe.

5. ALCOHOL AND/OR DRUGS:

Employees must not bring alcohol onto any Council property in any form other than in circumstances, such as social functions, which have been authorised in advance by the Chief Executive Officer (CEO).

Employees must not report for duty, at any time of the day, under the influence of alcohol to the extent that it may impair their ability to effectively perform the requirements of the position, including their ability to meet all relevant statutory requirements regarding the safe operation of vehicles, plant, equipment and/or machinery.

In all circumstances where alcohol in the workplace has been authorised, and in work related activities where alcohol is available, the Council encourages employees to practice responsible and sensible drinking habits.

Employees must not bring non-prescription (ie illegal) drugs onto any Council property in any form.

Employees must not:

- report for duty if under the influence any drugs, or
- use any drugs on any Council property,

other than those, which have been prescribed by a medical practitioner, and for which a prescription or medical certificate can be produced, if required.

If an employee is using a prescription drug, he/she should advise his/her Manager or Supervisor. The Employee should also ascertain and inform the Manager or Supervisor of the impact or effect of the drug, especially if he/she is required to use or operate plant or equipment, or to drive a vehicle, where the drug could impair the employee's performance and/or judgement.

NOTE: Breaches of this policy, including the unlawful operation of vehicles, plant, equipment or machinery, will be dealt with in accordance with the Council's **Discipline Procedure**, including **Instant Dismissal** if justified in the circumstances.

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Plant and machinery operators are required by law to have a zero alcohol reading when operating their vehicles.

All employees are to have a zero Blood Alcohol Content (BAC) limit at all times whilst on duty, or while on-call and potentially required to report for duty.

Employees (and any other authorised persons) must be under the legal BAC while using Council vehicles, whether on duty or not.

See also:

- **Vehicle Policy**
- **Discipline Procedure**
- **Instant Dismissal (see extract below)**

WORKPLACE RELATIONS ACT 1996 – Instant Dismissal

The *Workplace Relations Act 1996* - Regulation No 30CA states:

“(1) For paragraph 170CM (1) (c) of the Act, serious misconduct includes:

- (a) wilful, or deliberate, behaviour by an employee that is inconsistent with the continuation of employment; and
- (b) conduct that causes imminent, and serious, risk to:
 - (i) the health, or safety, of a person; or
 - (ii) the reputation, viability or profitability of the employer’s business.

“(2) For subregulation (1), conduct that is serious misconduct includes:

- (a) the employee, in the course of the employee’s employment, engaging in:
 - (i) theft; or
 - (ii) fraud; or
 - (iii) assault; or
- (b) the employee being intoxicated at work; or
- (c) the employee refusing to carry out a lawful and reasonable instruction that is consistent with the employee’s contract of employment.

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- “(3) Subregulation (2) does not apply if the employee is able to show that, in the circumstances, the conduct engaged in by the employee was not conduct that made employment in the period of notice unreasonable.
- “(4) For this regulation, an employee is taken to be intoxicated **if the employee’s faculties are, by reason of the employee being under the influence of intoxicating liquor or a drug (except a drug administered by, or taken in accordance with the directions of, a person lawfully authorised to administer the drug), so impaired that the employee is unfit to be entrusted with the employee’s duty or with any duty that the employee may be called upon to perform.**”

EMPLOYEE ASSISTANCE PROGRAM:

The Council’s Employee Assistance Program (EAP) may assist employees (and members of their immediate families) who may be experiencing problems with alcohol or drugs.

Employees who consider that they may have a problem with alcohol or drugs are encouraged to seek help and advice from the EAP, in confidence, at any stage.

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6. INFECTION CONTROL - NEEDLESTICK AND BODY FLUIDS SAFETY

It is recommended that all staff recognise that all body fluids of all people have the potential to contain an organism, which, if transmitted to another person, may cause infection or disease.

The aim of this policy is to provide protection to employees against the transmission of infectious diseases (eg HIV, Hepatitis B etc).

Protection against transmission of infectious diseases can only be achieved by employees taking appropriate precautions.

This policy applies to all employees, however, employees working in high risk areas, in particular, are required to adhere to and implement the appropriate procedure.

Situations covered include (but are not limited to):

- needlestick injuries
- handling body substances
- cleaning of body substances
- examination of high risk facilities.

DEFINITIONS:

Body substances – any substance (human or animal) that has the capacity to transmit infectious diseases and includes blood, sputum semen, vomit, oral secretions, spinal fluid, urine and faeces.

Needlestick – an injury caused by a sharp implement where foreign body substances have penetrated the external layers of skin and includes:

- contamination by foreign body substances entering the external layers of skin as a result of an open cut or wound
- any method of transmittal of foreign substances through the external layers of skin, through eyes, through inhalation and/or ingestion.

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APPENDIX 1

OCCUPATIONAL HEALTH AND SAFETY ACT 2004:

Other relevant sections of the *Occupational Health and Safety Act 2004* are attached in the Appendices, and include:

- * Inspections and the Role of Inspectors (Part 9)
- * Legal proceedings (Part 11)
- * Discrimination (section 76)

GUIDELINES (section 12)

The provisions of a Code of Practice are not mandatory but they provide practical guidance to employers. The provisions in a Code constitute compliance with the section of the Act or regulation to which the Code is giving guidance.

A Health and Safety Representative may cite a Code of Practice in a Provisional Improvement Notice (PIN) as a means by which an alleged non-compliance with the Act or Regulations may be remedied.

A complete list of the Codes of Practices is contained in the Health and Safety Procedures Manual – Section 3.12.

Codes of Practice will continue to be a practical guide for those who have OHS duties and Worksafe will continue to regard those who comply with the topics covered in the Codes of Practice as complying with OHS laws. Worksafe will progressively review all Codes of Practice and replace them with guidance material and in, appropriate cases, with Compliance Codes.

Copies of the relevant Codes of Practice are available from the Human Resources Officer.

A Code of Practice does not have the same legal force as Regulations.

Contravention of or failure to comply with Regulations under the Act is an offence.

Contravention of or failure to comply with an approved Code of Practice is not in itself a breach of the Act. COMMITTEE and HEALTH AND SAFETY REPRESENTATIVES:

Section 2.01
Occupational Health and Safety Policy

The members of the OH&S Committee (as at February 2008) are:

- * Greg Sidebottom – (Chairperson) Management Representative
- * Rita Jenkins –Senior Human Resources Officer
- * Parker Boundy - Risk Management Officer
- * EMT Representative – Director on Rotational Basis
- * Ross Barker – Human Resources Manager
- * Elected Health and Safety Representatives

Health and Safety Representatives:

The elected HSRs and the Designated Work Areas are:

DESIGNATED WORK GROUP	HEALTH AND SAFETY REPRESENTATIVES
Tatura/Mooroopna Depots:	Joe Maloney
Doyles Road Depot:	Tony Ellis /Mat Evans
Welsford Street – Grd Floor	Bev Bell
Welsford Street – 1st Floor	Brian Doyle
Family and Children’s Services:	Kristie Lynch
Aged and Disability Services:	Joan Macreadie
Eastbank Centre	Matt Schroeders
Aquatic & Leisure Services	David Harris
Art Gallery	Jo Ely



REHABILITATION - RETURN TO WORK

OCCUPATIONAL REHABILITATION is defined as the restoration of an injured or ill employee to their fullest physical, social, vocational and economic usefulness.

The City of Greater Shepparton recognises the need for and benefits of a workplace based rehabilitation program and is committed to maximising such benefits to the mutual advantage of both the employee and the employer.

Council's commitments to employees and to the workplace are:

1. To prevent occupational injury and illness by providing a safe and healthy working environment for all employees.
2. To ensure that a return to work as soon as possible after an injury is the normal practice and expectation.
3. To ensure that Occupational Rehabilitation by accredited rehabilitation providers is provided for injured employees who are expected to be off work for more than a short period (up to a maximum of 20 days) and is commenced as soon as possible, in a manner consistent with medical advice and judgement.
4. To assist injured employees to return to suitable duties/employment where possible, and as soon as safely possible, as an integral part of the rehabilitation process.
5. Rehabilitation programs are to be individually developed for the injured or ill employee by the **Return to Work Coordinator** in consultation with the employee, his/her supervisor, the Rehabilitation Provider (if required) and any other relevant parties.

Employees should advise their doctor that their employer has a Return to Work policy and it is likely that the doctor will be contacted by the **Return to Work Coordinator** to assist the employee in returning to appropriate employment.

6. To inform employees of their **rights** under the *Accident Compensation Act* and associated guidelines, notably:
 - * the right to their choice of doctor and rehabilitation provider
 - * access to interpreter services, where appropriate
 - no dismissal within twelve (12) months of injury, solely or principally because of that injury, unless permanently unfit to return to work.



- NB
- (i) Participation in rehabilitation is voluntary but non-participation may result in reduced weekly benefits
 - (ii) Participation in a rehabilitation program will not, of itself, disadvantage an employee in regard to either their job security or promotion opportunities.

REHABILITATION PROCEDURES

In the case of a workplace accident resulting in an injury to an employee, the following procedures **must** be followed:

1. All work related injuries must be reported to the relevant manager/supervisor as soon as practicable after the injury has occurred.
2. The injured employee is required to complete a Accident/Incident Injury Report as soon as practical after the accident. This ensures that the Council has an accurate description of the incident, which will enable the appropriate investigation by the manager/supervisor to occur.
3. If medical attention is required the employee should first notify their manager/supervisor and then arrange for an appointment with their doctor.

(NB) The employee has the right to choose his/her own doctor. However, the Council reserves the right to also have an injured employee examined by a doctor of the Council's choice.).

Except in an emergency, no employee should leave their work site without advising their Manager/Supervisor. In an emergency, the manager/supervisor should be notified as soon as practicable.

4. If a WorkCover claim is to be made then the WorkCover Medical Certificate together with the Accident/Incident Report should be lodged with the Return to Work Coordinator for immediate attention. A WorkCover claim form must also be completed together with an interview with the Return to Work Coordinator before the claim can be acted on.
5. An 'ordinary' doctor's certificate will NOT be accepted by the WorkCover Authority for the purposes of verifying a WorkCover claim. The WorkCover Authority will only accept the prescribed WorkCover Medical Certificate (which all doctors should have in their possession).
6. The treating practitioner should issue an interim certificate indicating the employee's "Capacity for Work".



7. Following receipt of such a certificate from a doctor the injured employee will be interviewed by the Return to Work Coordinator to decide upon an appropriate return to work program. This is likely to include consideration of suitable work that might be available, to determine a possible commencement date and to obtain any other information relevant to the return to work that might be required.
8. While every endeavour will be made to accommodate a return to work program in the employee's original department or work area, it may be necessary to relocate the employee to another department or work area, if suitable work is not readily available.
9. Alternative work, where provided, is only temporarily available and should not be construed as a permanent replacement for pre-injury employment conditions.
10. All expenses relating to the provisions of this policy shall be borne by the Council if the injury/illness is accepted as work related.
11. Employees will be advised in writing of the proposed position and the terms and conditions, including the salary, of their appointment.
12. Council will allow reasonable access to the workplace by the rehabilitation providers.

***** RETURN TO WORK COORDINATOR *****

Council's **Return to Work Coordinator** is:

RITA JENKINS - 5832 9723

The Return to Work Coordinator is responsible for following the injured employee's progress from the time of the injury or illness to their fullest possible recovery and return to employment.

This will be achieved by:

1. Ensuring that the injured person obtains immediate treatment and appropriate management of his or her condition.
2. Facilitating early return to work by maintaining contact with:
 - * the injured employee
 - * managers and supervisors
 - * co-workers
 - * unions
 - * doctors and health care professionals



- * rehabilitation providers
 - * insurers
 - * any other person involved in the rehabilitation process.
3. Developing a return to work program of each individual in consultation with the treating practitioner, Manager/Supervisor and rehabilitation provider, if appointed.
 4. Monitoring and evaluating the process and effectiveness of the return to work program for injured workers, upgrading duties in consultation with treating doctors, employees and managers/supervisors.
 5. Advising management on issues arising out of the implementation of the return to work program.
 6. Maintaining confidential records in accordance with the Council policies and guidelines.



***** REHABILITATION PROVIDERS *****

Council's **Rehabilitation Providers** are:

- * ***Work Right Consulting***
- * ***Wills Injury Management***

The **Authorised Agent** is:

- * ***QBE Workers Compensation (Vic) Limited 5831 2222***

ROLE OF REHABILITATION PROVIDERS:

The role of the Rehabilitation Providers is to:

1. Provide rehabilitation to injured employees, where appropriate; and
2. Liaise with the Return to Work Coordinator, the treating doctor, the Insurer (Authorised Agent) and the employee's manager/supervisor to develop an appropriate written rehabilitation plan for the injured employee.

***** DISPUTES *****

Any disputes over rehabilitation procedures will be handled by liaising with the employee, manager, the employee's doctor and the employee's representative (including the relevant union), if required.

In the event of a dispute over any aspect of the Return to Work Plan, immediate action will be taken to resolve the situation through effective and constructive discussion with all parties to the Return to Work Plan.

If resolution is not then possible, the services of the ***WorkCover Conciliation Service*** will be requested to provide assistance.