

# SESLHD PROCEDURE COVER SHEET



**Health**  
South Eastern Sydney  
Local Health District

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<b>KEY TERMS</b>	Work health and safety, WHS, consultation
<b>SUMMARY</b>	This guideline provides information on the representation and participation of SESLHD workers in health and safety matters at the workplace, and guidance on resolving health and safety issues in SESLHD through the agreed consultation mechanisms.

## **COMPLIANCE WITH THIS DOCUMENT IS MANDATORY**

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## 1. POLICY STATEMENT

[Division 2 of the NSW WHS Act 2011](#) states: *The person conducting a business or undertaking must, so far as is reasonably practicable, consult, in accordance with this Division and the regulations, with workers who carry out work for the business or undertaking who are, or are likely to be, directly affected by a matter relating to work health or safety.*

[Division 2 NSW WHS Regulation 2017](#) gives guidance on Health and safety representatives for the workplace.

## 2. BACKGROUND

This document is design to provide practical guidance for SESLHD managers and staff on how to effectively consult with workers, external persons conducting a business or undertaking (PCBU) and others who are or likely to be directly affected by health and safety matters.

This document also provides guidance to duty holders who share responsibility for the same work health and safety (WHS) matter on how to consult, co-operate and co-ordinate activities with each other.

Consultation can be through a number of different ways, the focus of this document is on two consultation processes:

- [Health and Safety Committees \(HSC\) – Section 7](#)
- [Health and Safety Representatives \(HSR\) – Section 8](#)

This guide includes methods on how to facilitate worker participation and representation.

For advice on other agreed arrangements, please contact the [local WHS&IM Unit](#) for advice.

## 3. PRINCIPLES

### 3.1. What is consultation?

Consultation is a two-way process between the PCBU (Organisation - SESLHD) and workers where both parties undertake to:

- talk to each other about health and safety matters
- listen to each other's concerns
- seek and share views and information
- consider the other party's view before making decisions.

### 3.2. Consultation requires that SESLHD:

- share relevant work health and safety information with workers
- give workers a reasonable opportunity to express views and to raise health or safety concerns
- give workers a reasonable opportunity to contribute in the decision-making process relating to the health and safety matter
- take the view of workers into account
- advise workers of the outcome of any consultation in a timely manner.

### 3.3. When to consult:

SESLHD managers and workers must consult when:

- identifying hazards and assessing risks arising from the work carried out or to be carried out
- making decisions about ways to eliminate or minimise risks
- making decisions about the adequacy of welfare facilities in the workplace such as: toilets, drinking water, washing facilities, dining areas, change rooms and first aid
- proposing changes to the workplace that may affect the health or safety of workers such as: changing the system of work, new products or projects, purchasing new or used equipment, restructuring the department or service
- making a decision about required changes to procedures
- resolving health or safety matters
- monitoring health of workers
- monitoring the conditions at the workplace
- providing information and training for workers
- conducting investigations into incidents or 'near misses'.

See [Section 6 - Consultation Process and Flow Chart](#)

## 4. DEFINITIONS

**Health and Safety Committee (HSC) member** – is a representative of a work group nominated for the period of two (2) years. This process can be formal or informal and should be documented.

- A one day training program is provided by SESLHD to HSC members.
- Further information, see [Section 7 – Role of the HSC](#) of this document or please contact the [local WHS&IM Unit](#)

**Health and Safety Representative (HSR)** – is a person elected by the work group using the formal and documented election process ([SESLHDGL/020 Work Health and Safety - Nomination and Election of Health and Safety Representatives Guideline](#)) to represent the workers on work health and safety matters for a term of three (3) years.

- It is recommended the HSR attends an accredited five (5) day SafeWork NSW approved training. On completion of the training, the HSR will be registered on the SafeWork NSW database.
- For further information go to [Section 8 - Role of HSR](#) of this document or contact the [local WHS&IM Unit](#)

**Health, Safety and Wellbeing (HSW)** – is the strategic unit responsible for the SESLHD WHS Management System [Contact details](#)

**Officer** – is a person who can make decisions that significantly affect the organisation (such as Directors).

**Other agreed arrangements** – an alternative process for consultation on work health and safety matters agreed between the PCBU and its workers.

- Other agreed arrangements may include regular scheduled meetings or team meetings where work health and safety is an agenda item, shift start-up meetings, or briefing sessions.
- These arrangements must be planned and developed in consultation with the workers.
- Once agreed these arrangements must be followed as the method for work health and safety consultation.
- For further information please contact the [local WHS&IM Unit](#).

**Person conducting a business or undertaking (PCBU)** - includes organisations and individuals conducting a business or undertaking.

- SESLHD is a PCBU.

**WHS&IM Unit** - locally based Work Health and Safety and Injury Management Department, working within facilities across SESLHD.

**Worker** – includes any person who carries out work for SESLHD.

- This can include any person who works as a:
  - employee
  - trainee/ apprentice
  - volunteer
  - clinical or work experience student
  - contractor or subcontractor
  - employees of a contractor or sub-contractor
  - employees of a labour hire company (agency) assigned to work for SESLHD.

**Workgroup** – an identifiable group of workers, who perform similar types of work and have similar health and safety concerns and conditions within the workplace i.e.: department, unit or service.

**Resources, facilities and assistance** include where/when available, access to:

- A private room for conducting interviews or HSR meetings

- Equipment such as computers, telephones and photocopiers
- WHS or other noticeboards
- A place to securely store their safety records and confidential documentation
- Email, internet and other SESLHD systems for safety related activities
- Transport or travel expenses to commute between their workgroups places of work
- HSR Facility Time, agreed regular paid time to for the purposes of exercising his or her powers or performing his or her functions under the Act.

## 5. RESPONSIBILITIES

**5.1. Workers:** will comply with work health and safety procedures including agreed consultation procedures and any measures put in place to protect their own health and safety and do not adversely affect the health and safety of patients, visitor and others within SESLHD workplace. Workers are required to participate in work health and safety (WHS) consultation process to ensure they meet the organisational obligations under the WHS Act 2011 and Regulation 2017.

**5.2. Line Managers:** are required to follow SESLHD procedures for consultation.

Managers are to consult (Section 2 - When to consult) with the department workers, HSR or HSC members on work health and safety matters in the workplace by:

- meeting regularly with workers and/or representatives (HSR or HSC) to discuss health and safety matters as outlined in the [Agenda - Consultation Meeting with the Team/Health and Safety Representative form](#)
- granting permission to attend a paid training course relative to the role, see HSC ([Section 7 – Role of the HSC](#)) or HSR ([Section 8 - Role of HSR](#)) training requirement
- taking all workers health and safety concerns into consideration, and document feedback responds to outline the course of action taken or the reason for action not being required
- providing department's HSR access to information that relates to the work and safety of workers and work place hazards (including associated risks) e.g. environmental monitoring reports, exposure reports and test results (Note: HSRs must not be given worker personal information)
- enabling the HSR to attend interviews concerning work health and safety between one or more consenting workers and SafeWork NSW Inspector or another department or contractor at the workplace (or representative)
- providing HSR and HSC with resources, facilities and assistance that are reasonably necessary to enable the HSR and HSC to perform the required functions under SESLHD policy and the WHS Act
- providing HSR and HSC members sufficient time at normal pay, that is reasonably necessary to perform the required functions as specified in the WHS Act including: access to the Health Safety and Wellbeing unit and Sector Work Health Safety and Injury Management services
- permitting a HSR to accompany a SafeWork NSW Inspector during an inspection of department.

**Please Note:** The PCBU must not allow the HSR or HSC to have access to any personal or medical information concerning a worker without the worker's consent unless the information is in a form that does not identify the worker and could not reasonably be expected to lead to the identification of the worker.

**5.3. Health Safety and Wellbeing Service:** will establish and maintain work health and safety consultation procedures to meet legislative requirements and achieve SESLHD work health and safety objectives.

**5.4. Officers:** will ensure work health and safety consultation procedures are in place to meet legislative requirements and achieve SESLHD work health and safety objectives. Officers are also required to exercise due diligence to understand health and safety matters arising from the nature of SESLHD business affecting workers, ensure compliance to the WHS Act and Regulations, including engaging in the consultation process where matters are escalated to them.

**5.5. Health and Safety Committee (HSC) member:** focus is on the health and safety matters across the service or facility and will facilitate cooperation between management and workers. Some of the activities will depend on level of the committee (facility or local department/service) including:

- consultation in the workplace and providing feedback to the work group
- workplace inspections
- involvement in investigations if required
- analysis WHS statistics
- conducting meetings
- review policies and procedures
- actively promote and comply with WHS policy and procedures
- complete action items in a timely manner
- promoting WHS activities
- facility or department/service workplace changes for example: re-development that may change access or pose a risk to workers and others
- discuss and disseminate safety alert information to work groups
- discuss SafeWork NSW interaction with the work group

Please contact the [local WHS&IM Unit](#) for further information.

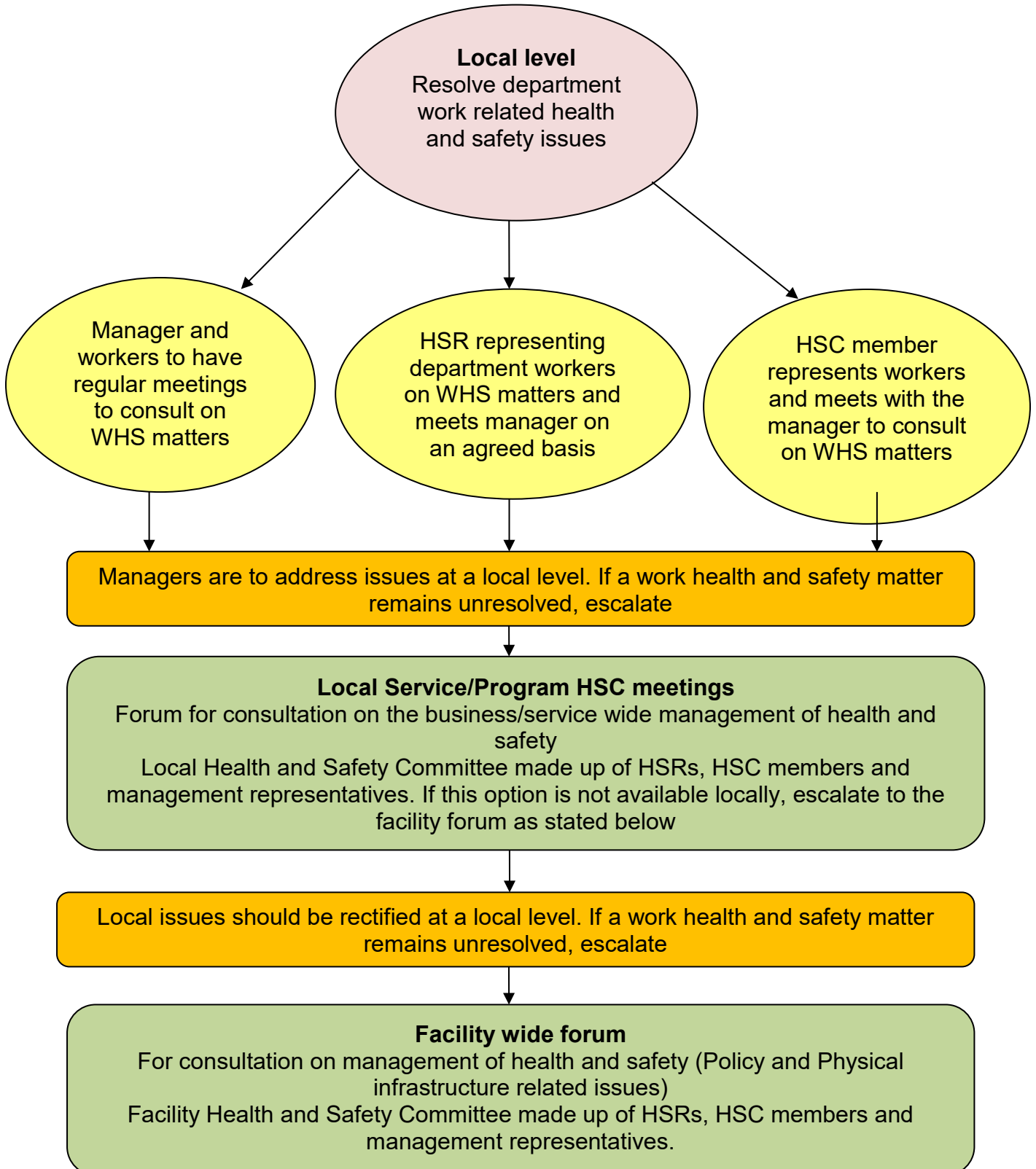
**5.6. Health and Safety Representatives (HSR):** represent the interests of the members of their own work group (ward/department/service) and to contribute to work health and safety matters.

- The HSR must provide leadership and information to workers of the work group.
- The HSR will deal directly with all stakeholders to resolve health and safety risks to the work group.
- A HSR can also elect to join the site HSC, or can request the formation of a HSC where one does not exist at a SESLHD site.

For further information see [Section 8 - Role of HSR](#) contact the [local WHS&IM Unit](#)

**6. CONSULTATION PROCESS**

In SESLHD departments, services or facilities, the following consultation arrangements or a combination of the following are utilised:



## 6.1. How Consultation Works in SESLHD

### Health and Safety Reporting and Consultation Management

Stage	Reporting responsibility	Consultation	Escalation
1	Worker identifies hazard, problem, fault or poor outcome and reports to the department manager/HSR/HSC member.	In consultation, the decision is made to implement a code of practice or complete a risk assessment and implement internally developed controls.	In consultation, it is identified that the matter is beyond the delegation of the manager or resources of the department. Issue reported up via the escalation process.
2	The manager/supervisor reports the matter to: <ul style="list-style-type: none"> <li>The department/service senior manager and if required through ERMS for service issues</li> <li>The site maintenance department via Maximo/BEIMS service request or for maintenance and repair issues</li> <li>The line manager of another department via direct email for interdepartmental issues</li> <li>The HSR or HSC consult with workers and also has a responsibility to escalate unresolved issues to the Committee</li> </ul>	The senior manager of the service in consultation with the Manager/HSR/HSC member and resolves the problem.	In consultation it is identified that the matter is beyond the delegation of the senior manager or resources of the service. Issue is escalated.
		Maintenance undertakes service, repair or other remedial works.	In consultation it is identified that the matter is beyond the scope or resources of the maintenance department. Issue is escalated.
		The other department line manager in consultation with the Manager/HSR/HSC member and resolves the problem.	In consultation it is identified that the matter is beyond the delegation of the other line manager or the resources of the department. Issue is escalated.
3	The senior manager	Escalates the service related issue to their Director and if required, through ERMS to seek advice on how it can be resolved.	Unresolved issues are tabled at the Executive Team meeting for mention and resolution and/or where required implement: <ul style="list-style-type: none"> <li>interim control directive</li> <li>provide resource allocation</li> <li>escalation process to Ministry of Health and SafeWork NSW</li> </ul>
	The maintenance department	Escalates the maintenance or repair issues to the Site Manager to notify them and seek advice on how it can be resolved.	
	The other department line manager		
			The manager/supervisor reports the matter to the line manager and if required, through ERMS as an inter-service issue, reported up via normal systems as per stage 2.



## **7. ROLE AND FUNCTIONS OF HEALTH AND SAFETY COMMITTEES (HSCS) IN SESLHD**

### **7.1. The Role:**

The HSC will focus on health and safety matters across the service or facility and will facilitate cooperation between management and workers. Some of the activities will depend on level of the committee (facility or local department/service) including:

- consultation in the workplace and providing feedback to the work group
- workplace inspections
- involvement in investigations if required
- analysis of WHS and incident statistics
- review policies and procedures
- actively promote and comply with WHS policy and procedures
- complete action items in a timely manner
- promoting WHS activities
- facility or department/service workplace changes for example: re-development that may change access or pose a risk to workers and others
- discuss and disseminate safety alert information to work groups
- discuss SafeWork NSW interaction with the work group.

### **7.2. Training for HSC members**

A one day training course is provided to committee members. Please contact the [local WHS&IM Unit](#) for further information.

### **7.3. The functions of a Health and Safety Committee are to:**

- facilitate co-operation in instigating, developing and carrying out measures designed to ensure the workers' health and safety at work
- assist in developing standards and safety rules to be followed or complied within the service or facility
- represent workers of departments who do not have a HSR or HSC member to resolve issues which cannot be resolved within a department due to the cost or broader nature of the matter
- address health and safety matters which involve service-related practices, procedures, equipment, safety rules and policies
- actively be involved in facility Health and Safety Committee meeting, this is the forum to consult on infrastructure, major developments or changes to the workplace and other facility managed safety matters
- provide a venue for 'horizontal' consultation between departments, services, facilities and other organisations in SESLHD

**Note:** in the absence of a HSR, the Health and Safety Committee (local or facility) may take the role of the HSR in addressing specific issues regarding the health and safety of the workers from a specific workgroup.

### 7.4. Health and Safety Committee meetings:

A Health and Safety Committee must:

- Meet at least once every 3 months
- Meet at any reasonable time at the request of at least half of the members of the committee
- The make-up of the committee can be agreed to between the workers and the employer or business (or other PCBU)
- The PCBU can only nominate up to half of the members. The role of workers on HSCs is to ensure genuine worker representation regarding health and safety matters
- Worker representation must be greater than that of management. A quorum is 50% + 1 of the full committee membership
- Committee members are nominated for a period of twenty four (24) months and can be re-elected for consecutive terms
- The committee chair person must be elected by the committee members (this can be a management representative) for a period of twenty four (24) months and can be re-elected for consecutive terms
- A nominated committee member is required to attend 75% of meetings over a twelve (12) month period. See the Health and Safety committee Terms of Reference for further information
- A HSR is to be a member of the committee, if they consent. If there are two or more HSRs at a workplace, then they can choose one or more who consent to be members of the committee
- The facility WHS co-ordinator, infection control, maintenance, security and fire representatives may be requested to attend meetings regularly as advisors to committee members, although advisors attend committee meetings, they have no voting rights.

## **8. ROLE OF HEALTH AND SAFETY REPRESENTATIVES (HSRS) AND DEPUTY HSRS**

The WHS Act sets out specific powers and functions that a HSR can perform to enable them to represent the interests of the members of their own work group (ward/department/service) and to contribute to work health and safety matters.

Election process for HSR: [SESLHDGL/020 Work Health and Safety - Nomination and Election of Health and Safety Representatives Guideline](#)

Although a HSR has the ability to exercise certain powers and functions, HSRs can choose not to exercise them. The WHS Act 2011 does not impose a duty on HSRs to carry out the powers and functions of a HSR.

### **8.1. The Role:**

In order to represent the workgroup effectively, HSR activities must include assisting:

- with the review and promote WHS policies, procedures and activities
- management in making decisions on health and safety including WHS policies and procedures
- in obtaining and facilitating the required WHS and safety alert information to work group
- by demonstrating commitment and passion to improving health and safety in the workplace
- by being an effective communicator
- in consultation in the workplace and providing feedback to the work group
- being involved in investigations and workplace inspections, if required
- with the analysis of WHS statistics
- in conducting meetings with workers and managers
- in completing action items in a timely manner
- in the consultations with worker and manager regarding facility or department/service workplace changes (for example, a re-development that may change access or pose a risk to workers and others)
- in discussing SafeWork NSW interaction with the work group.

The HSR may also be involved in:

- reviewing de-identified incident reports
- discussions with other HSRs and HSC members
- discuss with workers and the PCBU to gather information on WHS matters including actions taken to mitigate risks
- checking that the consultation procedures are being appropriately followed by workers.

### **8.2. Training for a HSR to obtain full power of the role**

A HSR can request (this is recommended) to attend an accredited five (5) day SafeWork NSW approved training, this training provides the HSR with the additional powers to fully exercise this role. On completion of the training, the HSR will be registered on the SafeWork

NSW data base. This training currently is only provided externally. For further information, please contact staff education or [local WHS&IM Unit](#).

Trained HSRs are entitled to attend an annual one day HSR refresher course.

### 8.3. The powers and functions of HSRs include:

- representing the workers in discussion with manager to resolve WHS matters
- monitoring the departments compliance with the WHS Act and SESLHD safety-related policies and procedures in relation to the work group
- investigating complaints from work group about WHS matters
- inquiring into any department work that may pose a risk to the health or safety of the work group
- inspecting the workplace in the event of an incident or any situation involving a serious risk to the health or safety
- accompanying a SafeWork NSW Inspector during a workplace inspection
- attending interviews with one or more workers, management and an inspector where required for example: interviews may be required after an incident has occurred, for return-to-work purposes or as part of issue resolution processes
- **Note: A HSR can only attend interviews with the consent of the worker and the interview must be about work health and safety matters**
- receiving and disseminating information concerning the WHS of workers in the work group
- where necessary, requesting the assistance from a WHS Consultant
- in some circumstances directing a work group member to cease unsafe work and issuing a Provisional Improvement Notice (PIN), as stated previously in Section 7, specific five day training is required for this function to be available to a HSR
- providing feedback to workers with the assistance of the manager
- if the issue remains unresolved, escalate by utilising the organisation's resolution procedure.

### 8.4. Circumstances that would result in a HSR no longer being able to represent the work group or hold office

A HSR ceases to hold office if:

- they leave the work group
- they are disqualified from being a HSR by SafeWork NSW
- any person adversely affected by a decision or action of a HSR can apply to SafeWork NSW to have them disqualified
- the HSR resigns, the HSR must advise the SESLHD in writing of the resignation and provide this letter to the workgroup manager
- the work group manager notifies the facilities WHS&IM Manager
- the WHS&IM Manager notifies the Health Safety and Wellbeing department of the resignation
- Health Safety and Wellbeing contact SafeWork NSW to remove the HSR from the register.

### 8.5. Process for removal of the HSR

The HSR is removed from the position of representation when:

- the majority of members of the group agree the person should no longer represent the work group
- the majority of work group members sign a written declaration that the HSR should no longer represent work group, the workgroup representative informs the HSR
- the workgroup notifies relevant manager of this decision and the facility WHS&IM Manager
- once the outcome is confirmed, WHS&IM Manager contacts Health Safety and Wellbeing for action
- Health Safety and Wellbeing contact SafeWork NSW to remove the HSR from the register.

## 9. DOCUMENTATION

- [Health and Safety Committee \(HSC\) Terms of Reference](#)
- [F156 Committee Performance Evaluation](#)
- [Template 003 T17/532 Agenda - Health and Safety Committee](#)
- [Template 002 T17/530 Minutes - Health and Safety Committee](#)
- [Template 001 T17/525 Agenda - Consultation Meeting with the Team/Health and Safety Representative](#)
- [Template 004 T17/536 Minutes - Consultation Meeting with the Team/Health and Safety Representative](#)

## 10. AUDIT

This procedure will be audited through the NSW Health WHS & IM Audit Tool every two years

## 11. REFERENCES

### External

- [Work Health and Safety Act 2011](#)
- [Work Health and Safety Regulation 2017](#)
- [SafeWork NSW Code of Practice - Work health and safety consultation, coordination and cooperation](#)

### Ministry of Health

- [PD2013\\_050 Work Health and Safety: Better Practice Procedures](#)

# SESLHD PROCEDURE

## Work Health and Safety - Consultation Guideline

**SESLHDGL/019**

### Internal

- [SESLHDGL/020 Work Health and Safety - Nomination and Election of Health and Safety Representatives Guideline](#)
- [SESLHDPR/271 Work Health Safety - Statement of Commitment Procedure](#)
- [F189 HSR Record of Health and Safety Issue](#)

## 12. REVISION AND APPROVAL HISTORY

Date	Revision no.	Author and Approval
November 2012	1	Dieter Schultejobann, WHS Officer, Health, Safety and Wellbeing Service Approval: Director of Workforce Services
July 2015	2	Ron Taylor WHS Consultant – Health Safety and Wellbeing
August 2017	3	Desktop Revision and Links Update - John Parkinson, WHS Consultant
November 2017	3	Updates endorsed by Executive Sponsor
June 2020	4	Risk rating reduced to Medium Risk. Review date amended to November 2020 to align with Medium Risk rating. Executive Sponsor updated from Director Workforce Services to Director People and Culture. Approved by Executive Sponsor.

**Appendix 1:****Health and Safety Committee (HSC) Terms of Reference**

*Note: these Terms of Reference are a guide and advice should be sought from your local Work Health and Safety Co-ordinator when developing these terms for local use. Please read user guide at the end of the document before proceeding.*

**1. MEMBERSHIP**

Workers must have greater representation than management = 50% plus 1 of the full committee membership.

Committee members are elected for a period of 24 months, and individuals can be re-elected for consecutive terms.

Appointed management representative will have delegated authority to act and make decisions on behalf of the management during the course of any WHS committee meetings.

The committee Chairperson shall be elected by the health and safety committee membership for a period of 24 months (majority vote), this includes a management representative if nominated.

The site's WHS co-ordinator, infection control, maintenance, security and fire representatives may be requested to attend meetings regularly as advisors to committee members, although advisors don't have voting rights.

A HSR can also elect to join the facility health and safety committee or if there isn't one, can request the formation of a health and safety committee.

The management representative with nominated delegation shall be:

- Insert nominate position/s

The additional management representatives/advisors:

- Insert nominate position
- Insert nominate position
- Insert nominate position

Worker representatives shall be nominated and elected from the following areas:

- Insert area / group / department
- Insert area / group / department
- Insert area / group / department
- Insert area / group / department
- Insert area / group / department
- Insert area / group / department

*Select one option below and delete unwanted option*

Any vacant positions will be filled on a casual basis until the term of office has expired. *or*  
Any vacant positions will be filled through nomination and election of a representative from the area/group/department.

## 2. MEMBERSHIP ATTENDANCE

Committee members will cease to be a member of the WHS Committee if they:

- resign from the committee
- fail to attend 3 consecutive meetings without providing apologies to the chairperson
- resign from their employment
- breach confidentiality

A minimum requirement for attendance of a nominated committee member shall be 75% attendance in any 12 month period. A committee member whose attendance falls below 75% in 12 months and who cannot show reasonable cause for such lack of attendance will have their position on the committee revoked. The position will be made available to another representative member of their workgroup.

Internal or external persons invited to attend the meetings at the request of the Chairperson on behalf of the committee to provide advice and assistance have no voting rights and may be requested to leave the meeting at any time by the chairperson.

Attendance at a meeting for the purposes of these terms of reference implies that the members and advisors have input through agreed mechanism which provides for participation in the decision making process of the committee.

Agreed mechanisms may include:

- a direct personal presence
- via electronic media
- through representation of a committee member's views on the agenda and to raise issues via written notification at the time of the meeting

All WHS committee members must complete HSC or HSR training as prescribed by the organisation (see sections 6 & 7 of this document). Members are to notify the Chairperson on completion of the training, the Chairperson will retain member training records. Committee members HSC or HSR training should be held within three calendar months of election and appointment.

## 3. QUORUM REQUIREMENTS

A quorum of members must be present before a meeting can proceed. A quorum is 50% +1 of the full committee membership including a management representative with delegated authority.

Workers must have greater representation than the management.  
Decisions will be made by consensus upon majority agreement.



Should circumstances arise whereby an extraordinary meeting is required, the minimum quorum must also apply.

#### 4. ROLE

The role of a Health and Safety Committee is to:

- share relevant information about work health and safety with workers within the organisation including workers, contractors, students and volunteers
- give workers the opportunity to express safety views and to contribute in a timely manner to the resolve WHS issues at the workplace
- ensure that safety views of workers are valued and taken into account in decision making
- review all measures taken to ensure the health, safety and welfare of persons in the workplace
- perform such other functions as prescribed by the regulations
- provide a consultative forum to effectively address health and safety matters in the workplace and include all required legislation

The Chairpersons role and responsibilities include:

- scheduling meetings and notifying committee members
- inviting specialist advisors to attend meetings when required by the committee
- guiding the meeting according to the agenda and time frame
- ensuring all discussion items end with a decision, action or definite outcome
- review and approve the draft minutes before distribution

#### 5. OPERATIONAL TERMS OF REFERENCE

5.1 The terms of reference of a Health and Safety Committee are to:

Provide leadership in WHS and facilitate:

- co-operation between workers and management
- initiation, development, carriage and monitoring of measures designed to ensure the health and safety of workers, clients, visitors, contractors students and volunteers, and others in the workplace

Assist in the development, review and distribution of WHS practices, procedures and policies to workers within the workplace

Consult with the health service representative on any proposed changes to work health, safety or injury management practices, procedures or policies

Keep facility WHS performance under review through:

- identifying trends of work-related injuries, incidents and hazards
- identifying trends in positive workplace WHS activities and achievements

- evaluating the implementation and ongoing performance of injury and incident reduction programs
- monitoring worker and management WHS training within the workplace and in services that are represented by the committee members

Develop annual [WHS Plans](#) using the template provided as part of the organisations WHS Promotional Calendar

Assist with the implementation of the facility/service WHS Plan

Assist in:

- the promotion of activities focused on reducing work-related injuries and improving staff health and welfare
- identifying threats to the health and safety within the workplace
- improve WHS and IM performance
- identifying any additional training for workers which would improve WHS practises and outcomes in the workplace

Where a workgroup is not represented by a HSR, the health and safety committee may investigate issues normally managed by the HSR

Another function as are prescribed or agreed upon by the health service and the health and safety committee

- 5.2 A health and safety committee may establish a subcommittee and delegate some functions to focus on a specific WHS matter and report the findings back to the health and safety committee.
- 5.3 A health and safety committee will provide workers, management and Sector Workforce Safety and Injury Management unit with reports on WHS activities undertaken by the committee across the workplace, this could be in the form of committee minutes.
- 5.4 Provide quarterly reports to the Executive on agreed WHS related Performance Indicators.  
Listed below are the agreed WHS performance indicators:
- a) Number of items raised at the committee
  - b) Number of items resolved within 3 months
  - c) Managers meeting attendance

## 6. FREQUENCY OF MEETINGS

Meetings shall be held **[insert day and time]** of the month for a period of **[insert number]** hour(s).

A special or extraordinary meeting may be called by:

- half the committee members
- the committee chairperson

- an elected health and safety representative
- the Health Service

## **7. EXECUTIVE SPONSOR**

Relevant Facility, Service or Stream Manager

## **8. SECRETARIAT**

The secretariat must be appointed by the health and safety committee.

The role of the secretariat is to:

- prepare agendas and issue notices for meetings, ensuring all necessary documents requiring discussion or comment are attached to the agenda
- distribute the agenda and other relevant attachments one week prior to the next meeting
- take notes of proceedings and prepare the minutes of the meeting
- ensure the minutes are checked by the chairperson and accepted by committee members as a true and accurate record at the commencement of the next meeting
- distribute the minutes to all committee members for distribution to workers in the work group
- arrange for the minutes and related information to be distributed to other stakeholders (Quality Manager and/or Senior Manager), workgroups and PCBU's where required

## **9. REGISTRATION**

The committee will register these terms of reference with the district Health, Safety Wellbeing Service. This registration will identify the site/division/service/group that the committee represents and will be stored centrally on the SESLHD intranet.

## **10. METHOD OF EVALUATION**

Evaluation will be conducted annually using the [F156 Committee Performance Evaluation](#) form and should be reviewed against the Committee Terms of Reference (TOR).

The Chairperson will circulate the anonymous [F156 Committee Performance Evaluation](#) to committee members annually, it is recommended that the committee schedule the month of the year to complete this task. The purpose of this evaluation is to gain feedback and implement appropriate changes based on the outcome of the review.

The Terms of Reference (TOR) will be reviewed annually from the date of approval. They may be altered to meet the current needs of all committee members by agreement of the majority of the committee and include a review of agreed WHS Performance Indicators.

# SESLHD PROCEDURE

## Work Health and Safety - Consultation Guideline

SESLHDGL/019

The above Terms of Reference for [insert name of Facility or Department WHS Committee] have been agreed to on this the [insert date and day] of [insert year] at [Insert place]:

\_\_\_\_\_  
Name of Management Representative:

\_\_\_\_\_  
Name of Chairperson of the WHS Committee:

\_\_\_\_\_  
Name of WHS Consultant delegated to the committee:

\_\_\_\_\_  
Names of Worker Representatives:

\_\_\_\_\_  
Names of PCBU Representatives/Advisors:

\_\_\_\_\_  
Agreed as above this day (name day) the (insert date) of (insert month and year) at (insert site/service represented) by the undersigned:

WHS Committee management representative: \_\_\_\_\_

WHS Committee Chairperson: \_\_\_\_\_