**NAME OF DOCUMENT** | Guideline to Work Health and Safety Consultation for:  
| - Workers  
| - Health and Safety Representatives (HSRs)  
| - Health and Safety Committees (HSCs)  
| - Managers  

**TYPE OF DOCUMENT** | GUIDELINE  

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**KEY TERMS** | Consultation, Worker, Work Group, Health and Safety Representative, Health and Safety Committees, Manager and Person Conducting a Business or Undertaking.  

**SUMMARY** | 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.
**Guideline to Work Health and Safety Consultation for:**

- Health and Safety Representatives (HSRs)
- Health and Safety Committees (HSCs)
- Managers

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Section 1 - Background

Consultation is a key component of the SESLHD WHS management system (WHMS) and is defined in Part 5 of the WHS Act. Consultation aims to achieve agreement between SESLHD and workers on the procedures that should be followed to eliminate or minimise worker-related injury and illness and to promote health, safety and well-being.

SESLHD has defined consultation mechanisms as outlined in the WHS Act 2011 which provide appropriate consultative arrangements for all parties to follow when seeking resolution to health and safety matters in the most appropriate forum commensurate with the level of risk and organisational impact.

This guideline has been developed to assist Workers, Health and Safety Representatives (HSRs), Health and Safety Committees (HSCs) and Managers to consult, in a reasonably practicable way by understanding each party’s roles and responsibilities in consultation and by providing an outline of the procedures for all to follow and resources to assist the consultation process.

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

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

Consultation requires that the PCBU - SESLHD:
- shares relevant work health and safety information with workers
- gives workers a reasonable opportunity to express their views and to raise health or safety concerns and issues
- gives workers a reasonable opportunity to contribute to the decision-making process relating to the health and safety matter
- takes the views of workers into account, and
- advises workers of the outcome of any consultation in a timely manner
Section 2 - Principles

The principles of consultation are based on the recognition that worker input and participation improves decision-making about health and safety matters and assists in reducing work-related injuries and disease.

SESLHD relies on detailed reporting that takes account of the full breadth of information available, and informed decision-making as the main imperatives of its consultation framework.

While the actual decisions may or may not be made in a particular consultation forum, all the comments are to be faithfully recorded or represented and reported back. In this way decisions made take account of the full range of views expressed by participants in our consultation process. While individually we may not agree with the final outcome we all still have significant influence over the outcomes of the process.

The broad definition of a ‘worker’ under the WHS Act means that SESLHD must include in its consultation not only our employees but also contractors and sub-contractors and their workers, agency staff, volunteers, students, work experience and any other people who are working for or with us and who are directly affected by a health and safety matter in our services.

Workers are also entitled to take part in consultation arrangements either directly or through a representative of choice. In SESLHD workers can be represented in relation to a work health and safety matter by an elected Health and Safety Representative (HSR), or a nominated Health and Safety Committee Member. If workers are represented by a HSR, the HSR must attend the relevant Health and Safety Committee (HSC) and represent their work group at that forum.

The flow of health and safety information from the workers to management and back to the workers again relies on each person in the chain of consultation undertaking their roles with diligence and respect for the process and those they represent.
Section 3 - Definitions

Worker – includes any person who carries out work for SESLHD. This can include any person who works as a:
- employee
- trainee/apprentice
- volunteer
- outworker
- clinical or work experience student
- contractor or sub-contractor
- 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

Health and Safety Committee (HSC) – Health and safety committees bring together workers and management to assist in instigating, developing and carrying out measures designed to ensure the health and safety of workers.

Health and Safety Representative (HSR) – person elected to represent the workers in a work group on Workplace Health and Safety issues.

Health, Safety and Wellbeing Service (HSW) – District Health Safety and Wellbeing Service (formerly Workforce Safety & Injury Management Service).

Officer - persons who can make decisions that significantly affect the organisation. Officers must exercise due diligence to fulfil their health and safety obligations.

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, pre-shift 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.

Person conducting a business or undertaking (PCBU) - includes organisations and individuals conducting a business or undertaking. A PCBU has a primary duty of care to ensure workers and others are not exposed to risks to their health and safety while at work in the business or undertaking.
Section 4 - Responsibilities

4.1 **Workers:** will comply with work health and safety procedures including agreed consultation procedures; and any measures put in place to protect their own, patients, visitor and others legally on our premises health and safety. Workers are required to participate in the SESLHD Work Health and Safety Consultation process to ensure they meet their obligations under the WHS Act and Regulation 2011.

4.2 **Line Managers:** are required to follow SESLHD procedures for consultation. Managers are to consult with their department’s workers, HSR/s or HSC member on work health and safety matters at the workplace by:

- Meeting with their team to regularly discuss health and safety matters as outlined in the SESLHD Team/HSR Consultation Meeting Agenda as a minimum.
- Taking all workers health and safety concerns into consideration, and responding with written feedback outlining the course of action proposed or the reason for action not being required.
- Meeting with their departments HSR (where nominated), whenever reasonably requested by the representative, to discuss health and safety matters
- Allowing their 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)
- Allowing the HSR to attend interviews concerning work health and safety between one or more consenting workers and WorkCover inspector or another department or contractor at the workplace (or their representative).
- Providing their HSRs with resources, facilities and assistance that are reasonably necessary to enable the HSR to exercise their powers and perform their functions under SESLHD policy and the WHS Act
- Allowing HSR to seek assistance from the SESLHD Health Safety and Wellbeing unit and Sector Workforce Health Safety and Injury Management services.
- Permitting the HSRs to accompany a WorkCover inspector during an inspection of department.
- Providing any assistance to the HSR required by the WHS Regulation
- Allowing the HSR as much time that is reasonably necessary to perform their powers and functions for SESLHD, under the WHS Act, and

**Managers and Work Health and Safety Committee Members**

- The manager must allow their member of a Health and Safety Committee time to attend meetings of the committee and to carry out functions as a member of the committee.
- The manager must allow their member of the Health and Safety Committee to have access to information relating to:
  - hazards (including associated risks) at the workplace, and
  - the health and safety of the workers

**Please Note:** The PCBU must not allow the HSR or Health and Safety Committee 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.
4.3 **Health Safety and Wellbeing Service:** will establish and maintain work health and safety consultation procedures to meet SESLHD legislative requirements and achieve SESLHD work health and safety objectives.

4.4 **Officers:** will ensure work health and safety consultation procedures are in place to meet SESLHD legislative requirements and achieve SESLHD work health and safety objectives. Officers are also required to exercise their **due diligence** to understand health and safety matters arising from the nature of SESLHD business affecting their workers and engage in the consultation process where matters are escalated to them.
Section 5 – Consultation Process

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

<table>
<thead>
<tr>
<th>Purpose of Consultation Mechanism.</th>
<th>Department</th>
<th>Service/Program</th>
<th>Facility</th>
<th>Sector</th>
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<tr>
<td>Resolve department work related health and safety issues.</td>
<td>Regular team meetings with the manager on WHS matters.</td>
<td>Health and Safety Committee made up of HSRs, HSC members and management representatives.</td>
<td>Health and Safety Committee made up of HSRs, HSC members and management representatives.</td>
<td>A peak consultative Committee made up of HSC committee chairpersons, HSRs, and/or other staff representatives (as determined by the Sector) and management representatives.</td>
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<tr>
<td></td>
<td>HSR representing department workers on WHS matters meets with the manager on an agreed basis.</td>
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<tr>
<td></td>
<td>HSC member represents workers and meets with the manager to consult on WHS matters.</td>
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</table>

When to consult

In 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 those risks,
- Making decisions about the adequacy of facilities for the welfare of workers,
- Proposing changes that may affect the health or safety of workers,
- Making decisions about procedures for consulting with workers,
- Resolving health or safety issues,
- Monitoring health of workers,
- Monitoring the conditions at the workplace,
- Providing information and training for workers,
- Conducting investigations into incidents or ‘near misses’.
# How consultation works in SESLHD

Health and Safety Reporting and Consultation Management Flowchart

<table>
<thead>
<tr>
<th>Stage</th>
<th>Reporting responsibility</th>
<th>Consultation</th>
<th>Escalation</th>
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<tbody>
<tr>
<td>1</td>
<td>Worker identifies hazard, problem, fault or poor outcome and reports to their manager/HSR/HSC member.</td>
<td>In consultation the decision is made to implement a code of practice or do a risk assessment and implement internally developed controls.</td>
<td>In consultation it is identified that the matter is beyond the delegation of the manager or resources of the department. Issue reported up via normal systems.</td>
</tr>
<tr>
<td>2</td>
<td>The manager/supervisor reports the matter to: • Their line manager through ERMS for service issues; • The site maintenance department via Maximo/service request or for maintenance and repair issues; • The line manager of another department via direct email for interdepartmental issues.</td>
<td>The senior manager of the service in consultation with the Manager/HSR/HSC member identifies if the issue is within their delegation and resolves the problem. Maintenance undertakes service, repair or other remedial works.</td>
<td>In consultation it is identified that the matter is beyond the delegation of the senior manager or resources of the service. Issue is escalated.</td>
</tr>
<tr>
<td>3</td>
<td>The senior manager</td>
<td>Escalates the service related issue to their Director through ERMS to notify them and seek consultation on how it can be resolved.</td>
<td>Unresolved issues are tabled at a peak consultative committee and the Executive Team meeting for mention and resolution where possible and/or: • Interim control directive. • Pending resources allocation. • Escalation to Ministry of Health and WorkCover</td>
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<tr>
<td></td>
<td>The maintenance department</td>
<td>Escalates the maintenance or repair issues to the Site Manager to notify them and seek consultation on how it can be resolved.</td>
<td>The other department line manager in consultation with the Manager/HSR/HSC member identifies if the issue is within their delegation and resolves the problem.</td>
</tr>
<tr>
<td></td>
<td>The other department line manager</td>
<td></td>
<td>In consultation it is identified that the matter is beyond the delegation of the other line manager or the resources of their department. Issue is escalated.</td>
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If assistance is required at any stage of this process or if anyone has any concerns about outcomes, decisions or the process used to reach an outcome please contact your local Sector Workforce Safety and Injury Management Service (Northern PH 93826542, Southern PH 9113 4020) or the District Health, Safety and Wellbeing Service - PH 8545 4612.
Section 6 - Role and functions of Health and Safety Committees (HSCs) in SESLHD

Role of HSC
The SESLHD HSC will focus on the health and safety issues across the entire Service or Facility. HSCs will facilitate cooperation between management and workers. Some of the activities they undertake to fulfil their role are:

- Consultation in the workplace
- Workplace inspections
- Involvement in investigations if required or agreed
- Analysis of statistics
- Conducting meetings
- Review of policies and procedures

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.
- In the case of Services, the HSC will address health and safety matters which involve Service-related practices, procedures, equipment and safety rules/policies.
- For Facility HSCs the forum is to consult on infrastructure, fixtures, fittings, maintenance, cleaning, security and other Facility-managed safety matters.
- Provide a venue for ‘horizontal’ consultation between Departments, Services, Facilities and other organisations who may work for or in SESLHD from time to time.

Note in the absence of a HSR or HSRs, the Committee may take the role of the HSR in addressing specific issues regarding the health and safety of the workers from within a specific department/workgroup.

Meetings and the Health and Safety Committee (see SESLHD Health and Safety Committee Terms of Reference in the appendices)
A health and safety committee must meet:

- At least once every 3 months, and
- At any reasonable time at the request of at least half of the members of the committee
Section 7 – 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.

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

Role of a HSR

In order to represent the workgroup effectively, HSR should be:

- Actively participating in workplace consultation arrangements
- Able to provide information to employees regarding management decisions on health and safety, SESLHD Health and safety policies and procedures
- Able to source required information
- Able to show commitment and passion to the improvement of health and safety
- A leader and a safety role model
- An effective communicator
- An active member of the local HSC

The HSR may also be involved in:

- Reviewing de-identified incident reports.
- Inspecting work areas.
- Discussions with other HSRs and HSC members.
- Discuss with workers to gather information on the issue and then discuss with the PCBU.
- Checking that the consultation procedures are being appropriately followed by workers

The powers and functions of HSRs include:

- Representing the workers in their work group for work health and safety matters;
- Monitoring their departments compliance with the WHS Act/SESLHD safety-related policies and procedures in relation to their work group members;
- Investigating complaints from work group members about work health and safety matters;
- Inquiring into anything that appears to be a risk to the health or safety of work group members, arising from the conduct of the department’s work;
- After giving reasonable notice to the PCBU, inspecting the workplace of their work group;
- Inspecting the workplace (of their work group) in the event of an incident or any situation involving a serious risk to the health or safety
- Accompanying a WorkCover Inspector during a workplace inspection of their work group;
- Attending interviews with one or more work group workers and an inspector or the organisation. For example, interviews may be required after an incident has occurred, for return-to-work purposes or as part of issue resolution processes. (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 work health and safety of workers in the work group;
- Whenever necessary, requesting the assistance of SESLHD WHS Consultants;
- In some circumstances, directing a work group member to cease unsafe work and issuing a Provisional Improvement Notice (PIN). (Specific training is required for this function to be available to a HSR).
• Discussion with the manager of their understanding of the issue and attempting to resolve the situation.
• Providing feedback to workers with the assistance of the manager.
• If the issue remains unresolved, utilising the organisation’s resolution procedures to seek an agreed resolve to the matter.

**Circumstances that would result in a HSR no longer being able to represent their 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 WorkCover. (Any person adversely affected by a decision or action of a HSR can apply to WorkCover to have them disqualified);
- They resign as a HSR. (The HSR must advise the SESLHD in writing if they resign);
- The majority of members of the group agree the person should no longer represent them.

**Process for removal of the HSR**

The HSR is removed from the position of representation when:
- The majority of work group members sign a written declaration that the HSR should no longer represent them, and;
- A representative of that workgroup informs the HSR, relevant manager and the SESLHD Health, Safety and Wellbeing Service of the decision.
Section 8 – Training Requirements in SESLHD

HSR/HSC Training Requirements in SESLHD
The Chief Executive has determined that in the interests of an appropriate, transparent and clearly defined consultation system in SESLHD that all HSRs and HSC members are required to attend training.

HSRs and deputy HSRs are required to attend the WorkCover accredited 5 day Health and Safety Representative Training Course. (1 day bridging course for current OHS Representatives and OHS Committee Members available until 1/1/2013)

HSC committee members are required to attend the internal SESLHD course on Effective Consultation in SESLHD.

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

For further information on these courses, contact the Organisational Learning Unit
Section 9

Documentation:

SESLHD District Form F189 Record of Health & Safety Issue
SESLHD WHS Committee TOR
SESLHD WHS Committee Minute Template
SESLHD WHS Committee Agenda Template
SESLHD HSR Consultation Meeting Minutes Template
SESLHD HSR Nomination and Election Guideline
SESLHD Team HSR Consultation Meeting Agenda

References:

Work Health and Safety Act 2011

Work Health and Safety Regulation 2011

Work health and safety consultation, coordination and cooperation: Code of Practice 2011

Revision and Approval History

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<td>1</td>
<td>Dieter Schultejohann, WHS Officer, Health, Safety and Wellbeing Service Approval: Director of Workforce Services</td>
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<tr>
<td>December 2012</td>
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<td>Approved by SESLHD DET</td>
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ROLE GUIDE
Health and Safety Committee Member

OBJECTIVES OF ROLE:

- Keep under review measures to ensure the health, safety and welfare of persons at the place of work.
- Investigate any matter that may be a risk to health and safety at the place of work.
- Attempt to resolve any health and safety matter brought by a worker.
- Communicate Health and Safety related information that is relevant to the representative workgroup/department.
- Assist workers in the department in following SESLHD, Service and Department safety policy and procedure in their work.

ESTIMATED TIME REQUIREMENT:
2 hours per week (guide only)

SKILLS AND ATTRIBUTES:

IMPORTANT:
- Demonstrated ability to work as a member of multidisciplinary team.
- WHS Consultation training (organisational) or willingness to attend.

DESIRABLE:
- Knowledge of WH&S and EEO principles
- Understanding of the principles of cultural diversity
- Access to a computer
- Knowledge and skills necessary to apply the principles of workplace OHS consultation as an integral part of an effective OHS management system
- Appropriate attitudes to enable the WHS committee and its members to effectively carry out their functions under WHS legislation.

SPECIFIC ACTIVITIES
- Promote work health and safety
- Provide leadership in WHS consultation in the workplace
- Ensure effective WHS consultation in the workplace
- Ensure systematic management of health and safety
- Action all issues brought before the Health and Safety Committee in a timely manner
- Provide for and monitor continuous improvement of WHS systems
- Ensure all staff in the workgroup/department receive/attend all safety training required under SESLHD policy and procedures relevant to their position.

OTHER ACTIVITIES
- Undertake other activities in accordance with the role or as directed by the WHS Act 2011 and Regulation 2011 or NSW WorkCover Authority inspector.
- Attend relevant forums and meetings across the District.
ROLE GUIDE

Health and Safety Representative

OBJECTIVES OF ROLE:

- Responsible to the work group for appropriate representation of work health and safety matters.
- Monitoring of work health and safety system implementation within the work group.
- Monitoring of the implementation of agreed WHS controls by the workgroup.
- Keep under review measures to ensure the health and safety of all persons in the workgroup.
- Investigate any matter that may be a risk to health and safety at the place of work.
- Attempt to resolve any health and safety matter brought by a worker.
- Communicate health and safety related information that is relevant to the workgroup.
- Assist workers in the workgroup in following SESLHD, Service and Department safety policy and procedure in their work.
- Attend the Health and Safety Committee/s to represent the workgroup.

ESTIMATED TIME REQUIREMENT:

4 hours per week (guide only)

SKILLS AND ATTRIBUTES:

IMPORTANT:

- Demonstrated ability to work as a member of multidisciplinary team.
- WHS Consultation training (WorkCover Accredited) or willingness to attend.

DESIRABLE:

- Knowledge of WH&S and EEO principles
- Understanding of the principles of cultural diversity
- Access to a computer
- Knowledge and skills necessary to apply the principles of workplace WHS consultation as an integral part of the SESLHD WHS management system
- Appropriate attitudes to enable the effective representation of the workgroup
- Good communication and time management skills
- Commitment to a 3-year term.

SPECIFIC ACTIVITIES

- Promote workplace health and safety
- Provide leadership in WHS consultation in the workplace
- Ensure effective WHS consultation in the workplace
- Action all issues in a timely manner
- Monitor and in consultation with the manager seek to continuously improve the department’s WHS systems
- Confirm that all workers in the work group receive all safety related training required under SESLHD Policy and WHS legislation
- Conduct WHS meetings in an effective and efficient manner
• Post minutes from meetings to the work groups members to allow for consultation in the workplace to occur
• Make all reasonable efforts to communicate any SESLHD WHS and IM policy and procedure changes to staff and management
• Keep up to date with and communicate any WHS information that may be relevant to the workgroup
• Monitor and support actions agreed to by the manager and workers are undertaken and completed
• Make decisions as to when external assistance on an WHS matter is required
• Accompany NSW WorkCover Authority inspectors during site visits

OTHER ACTIVITIES
• Undertake other tasks in accordance with the position or as directed by the WHS ACT 2011 and Regulation 2011 or NSW WorkCover Authority inspector.
• Attend relevant forums and meetings across the District
WHS Committee 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 the Health Service (management). Worker representatives are elected for a period of 24 months, and individuals can be re-elected for consecutive terms.

Management’s representative will be appointed by the Health Service and have delegated authority to act and make decisions on the employer’s behalf during the course of any WHS committee meetings.

The Chairperson shall be elected by the committee from the Committee’s membership for a period of 24 months.

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, though have no voting rights.

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. **OFFICERS IN 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 into the decision making process of the committee. This may be achieved through agreed mechanism which provides for participation in the committee’s decision making process.

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 WHS consultation training as prescribed by the organisation. Members are to notify the Chairperson on completion of the training, the Chairperson will retain records of members’ completion of this training. Committee members WHS Consultation 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 Employer. 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 WHS Committee is to:

1. share relevant information about work health, safety and welfare with workers within the organisation including workers, contractors, students and volunteers
2. give workers the opportunity to express their safety views and to contribute in a timely fashion to the resolution of work health, safety and welfare issues at their place of work
3. ensure that the safety views of workers are valued and taken into account by the Health Service
4. keep under review the measures taken to ensure the health, safety and welfare of persons at the organisations workplaces
5. perform such other functions as prescribed by the regulations

6. provide a consultative forum that can effectively address the Health and Safety matters arising in [insert name of Site/Department] with particular reference to the requirements of the Work Health and Safety Act, 2011 and Work Health and Safety Regulation 2011.

The Chairpersons role and responsibilities include:

- Scheduling meetings and notifying committee members
- Inviting specialists to attend meetings when required by the committee
- Guiding the meeting according to the agenda and time available
- 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 Work Health and Safety Committee are:

a) To provide leadership in WHS and facilitate:
   - co-operation between the organisation and the employees
   - initiation, development, carriage and monitoring of measures designed to ensure the health, safety and welfare at work of the workers, clients, visitors, contractors students and volunteers, and others in the workplace.

b) To assist in the development, review and distribution of work health, safety and welfare practices, procedures and policies to workers within the workplace

c) To consult with the health service representative on any proposed changes to work health, safety or injury management practices, procedures or policies

d) To keep site 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 staff and management WHS training on the site and in services that are represented by the committee members;

e) To develop an annual WHS Promotional Plan using the template provided as part of the organisations WHS Promotional Calendar [http://seslhnweb/hsw/Resources.asp];

f) To develop a committee plan which is reviewed at least annually (containing business objectives, actions, measurable targets, assigned responsibilities, timeframes and status);

g) Monitor and assist with the implementation of the facility/service WHS Plan.

h) To assist:
   - in the promotion of activities focused on reducing work-related injuries and improving staff health and welfare
   - in identifying threats to the health, safety and welfare of all persons legally on organisations premises
   - the organisation to improve its WHS and IM performance by reporting on site WHS performance in line with the Organisation’s WHS performance measurement procedure
iv) in identifying any additional training for workers which would improve WHS practises and outcomes in the workplace.

i) Where a workgroup is not represented by a HSR, the WHS Committee may investigate issues normally managed by the HSR.

j) Such other functions as are prescribed or agreed upon by the health service and the WHS committee.

5.2 A health and safety committee may establish sub-committees to provide advice or to assist it in the performance of its functions.

5.3 A health and safety committee may delegate any of its functions to a subcommittee established under subsection (2) NSW WHS Act 2011.

5.4 A health and safety committee will assist in the formulation and dissemination (in appropriate languages) of policies, practices and procedures.

5.5 A health and safety committee will provide the site staff, management and Sector Workforce Safety and Injury Management unit with reports on WHS activities undertaken by the committee across all site departments/units.

5.6 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) Responsible 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; or
- the Health Service

7. EXECUTIVE SPONSOR

Relevant Site, Service or Stream Manager

8. SECRETARIAT

The secretariat must be provided by the site/division/service/group management to which the committee belongs.

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 attachments one week prior to the next meeting
- Take notes of proceedings and prepare the minutes of the meeting.
- Distribute the minutes to all committee members one week after the meeting and make them available to all staff.
- 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.

- Arrange for the minutes and related information to be distributed to the workgroups and other PCBU’s engaged in work at the facility/site.

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 [SESLHD Committee Performance Evaluation Form](form F156). Performance should be reviewed against the Committee’s Terms of Reference. Chairpersons are asked to circulate the anonymous evaluation proforma to committee members annually (it is recommended that the committee should indicate what month of the year they will do this), to evaluate the responses and make appropriate changes based on the outcome of the review. The Terms of Reference 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.

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

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Name of Responsible Management Representative: ____________________________

Name of Chairperson of the WHS Committee: ____________________________

Name of Network 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: ____________________________