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Nov 2016

Version 2.3

Note: Printed versions of this document are uncontrolled and it is the responsibility of the user to check the currency of the information contained herein.
## In Our School Gympie State High School

### Workplace Health, Safety and Wellbeing (WHSW) Committee:
- **name:** Anthony Lanskey
- **telephone:** 54898333
- **email:** alans6@eq.edu.au

### Workplace Health and Safety Advisor (WHSA):
- **name:** Rebecca Creighton
- **telephone:** 0434416875
- **email:** rcrei3@eq.edu.au

### Workplace Health and Safety Representative (WHSR):
- **name:** Gay Collins
- **telephone:** 54898341
- **email:** gcoll75@eq.edu.au

### Rehabilitation and Return to Work Coordinator (RRTWC):
- **name:** Fran Scanlan
- **telephone:** 54898372
- **email:** Fscan1@eq.edu.au

### Wellness Coordinator:
- **name:** Emelie Gabbert
- **telephone:** 54898322
- **email:** egabb1@eq.edu.au

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### On the Web
Health, Safety and Wellbeing Contacts

- **Workplace Health and Safety Advisor:-**
  Rebecca Creighton  T Block Staffroom  376 rcrei3@eq.edu.au

- **Workplace Health and Safety (WH&S) Consultant:-**
  Julie.muza@dete.qld.gov.au  (Maryborough)
  Telephone: (07) 4121 1684  Facsimile: (07) 4121 1645
  Mobile: 0407 148 709

- **Workplace Health and Safety Committee/Representative/s:-**
  Gay Collins  C or S Block  341  352

- **Rehabilitation and Return to Work Coordinator/s:-**
  Frances Scanlen  Teachers  T Block Staffroom  376
  Ray Gibb  Support Staff  P Block staffroom  334

- **Injury Management Consultant :-**
  Injury Management Consultant for Gympie SHS is Anna Matthews – 5352 9229
  Kevin Nowack 4122 0811 is the Claims Management Officer.

- **Employee Advisor (EQ Schools) :-**
  At Gympie SHS - Melitta Rogers
  There is no Employee Advisor in the North Coast Region, however the Employee Assistance Program available for schools is OPTUM – 1800 604 640. Further information about the service OPTUM provides is available at the following link -

- **Employee Assistance Program (TAFE's & Central Office):-**
  Davidson Trahaire Corpsych - Telephone: 1300 360 364

- **Other Support Mechanisms at this site:- Guidance Officer**
  Lesleigh Kirkebridge 310

- **MyHR Help Desk**  Telephone: 3404 8258 or Email: MyHRHelpDesk@deta.qld.gov.au

Additional Health, Safety and Wellbeing information please visit the Creating Healthier Workplaces website: https://education.qld.gov.au/health/
2. Introduction

The Director-General of Education and Training Julie Grantham, released the Health Safety & Wellbeing Policy statement on 28 February 2011.

In part, the Director-General states:

The Department of Education and Training (DET) is committed to maintaining safe, healthy and supportive working, learning and cultural environments for our people, our students, our visitors and volunteers, our partners and contractors.

It is my expectation that we will all work together to achieve and maintain safe, healthy and supportive working and learning environments. Health, safety and wellbeing is everybody’s responsibility and must be part of everything we do at work, every day.

3. About the Induction Program

Gympie SHS

At Gympie SHS we are committed to providing and maintaining a safe working environment for all staff and others (students, volunteers, contractors and visitors to the workplace). Your induction is part of that commitment.

Your entitlements and duties in relation to health and safety are outlined in this induction booklet. It is important you recognise your responsibility for your own and others health and safety. It is your responsibility to:

- Engage in the consultative processes available
- Follow WH&S policies, procedures and directives
- Not put yourself or others at risk through your actions
- Manage hazards you identify appropriately

4. Roles and Responsibilities

Employees

While the Officer in Charge of each workplace is ultimately responsible for the health and safety at that workplace, everyone at the work site has a responsibility to support management in promoting safe and healthy work practices.

You can achieve this by:

- Complying with instructions given by your Supervisor (provided they are legal and safe);
- Using personal protective equipment as instructed;
- Not interfering or misusing WH&S equipment e.g. blocking emergency exits;
- Not putting yourself or others at risk e.g. please consider the consequences of actions, use a trolley to move a heavy item.
- Taking reasonable care of your own and others health and safety (refer to the Work Health and Safety Act 2011 for further information)
Managers and Supervisors

As Managers and Supervisors it is important to lead by example and ensure that legal duties are met at the workplace.

Manager and Supervisors achieve this by;
- Being aware and understand DET’s Health, Safety and Wellbeing Management Framework
- Actively promoting a health, safety and wellbeing culture throughout your workplace
- Reinforcing this culture by ensuring that staff understand and are complying with their responsibilities
- Implementing clear communication and consultation processes
- Actively participating and encouraging staff participation in health and safety focused activities


All staff are required to comply with departmental procedures. There are a number of DET procedures that outline how health and safety legislation applies to our workplaces and the responsibilities of DET employees. You can access these procedures through the following website: [http://prr.det.qld.gov.au/Pages/default.aspx](http://prr.det.qld.gov.au/Pages/default.aspx)

The **Work Health and Safety Act 2011** (WH&S Act) and the **Work Health and Safety Regulation 2011** (WH&S Regs) outline the legislative aims, objectives and duties that we are required to undertake to ensure a safe work environment.

Other significant documents relating to health and safety are Codes of Practice for specific areas (e.g. First Aid, Plant, and Hazardous Substances)

5. Consultation

Achieving WH&S compliance and more importantly striving for an incident free and risk aware workplace can only be achieved through **consultation**.

The appointment of a **Workplace Health and Safety Advisor** (WHSA) is one step in the process. The role of the WHSA includes:
- providing advice and information to the Supervisor/Principal on WH&S matters
- coordinating and conducting inspections
- coordinating the completion of the Annual Assessment to identify hazards and unsafe work practices
- establishing WH&S educational programs
- investigating and reporting on workplace incidents (accidents)
- being a member of the WH&S committee

**Workplace Health and Safety Representatives** (WHSR) are elected by fellow staff. Part of their role is to advocate on behalf of staff members on WH&S issues. If your workplace would like a WHSR but does not have one, then the staff group can elect a person to be a WHSR.

Training is required to undertake the role. For further information please contact your Health and Safety Consultant or refer to the Creating Healthier Workplaces website ([http://education.qld.gov.au/health/courses/short-courses.html](http://education.qld.gov.au/health/courses/short-courses.html)). WHSRs are also members of a Workplace Health and Safety committee.

All staff have a duty of care and a vested interest in working together to keep the workplace safe and to participate in the consultation process. You should raise any workplace health and safety issues or concerns with your Supervisor and your WHSO and or WHSR.DET has a framework, policies and procedures for consultation that you can access through the following websites:

6. Hazard and Risk Assessment

The Risk Management Process:

- Is a systematic, consultative approach aimed at removing or reducing harmful practices, effects and equipment involved in work systems
- Should be understood and applied by all staff
- Provides practical steps that can be used to minimise the risk to health and safety within the workplace
- Should be applied to all hazards that may cause harm to staff, volunteers, contractors and others
- Considers foreseen misuse of plant and equipment
- Recognises that some staff may be at greater risk than others through limited experience, physical limitations or behavioural issues
- Works most effectively when all relevant staff are involved throughout the process—if this does not occur the lack of ownership and understanding of the process will drastically reduce support for any risk reduction strategies.

Risk Management can be broken into five basic steps:

1. Identify the hazards
2. Assess risks that may result because of the hazards
3. Decide on control measures to prevent or minimise the risks
4. Implement control measures
5. Monitor and review the effectiveness of measures

More Information is available in Appendix 1 & 2.
7. General Health and Safety Issues

GYMPIE SHS

EVACUATION & LOCKDOWN PLAN

(2017)
### Building Identification

<table>
<thead>
<tr>
<th>Building Name:</th>
<th>(GYMPIE SHS)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Building Address:</td>
<td>(Emerson Rd)</td>
</tr>
</tbody>
</table>

### Building Owner

<table>
<thead>
<tr>
<th>Name:</th>
<th>Department of Education, Training &amp; Employment, Queensland Government Gympie SHS</th>
</tr>
</thead>
<tbody>
<tr>
<td>Address:</td>
<td>Emerson Rd Gympie</td>
</tr>
<tr>
<td>Telephone No:</td>
<td>(54898333)</td>
</tr>
<tr>
<td>Fax:</td>
<td>(54898300)</td>
</tr>
<tr>
<td>Building Fire Safety Advisor (FSA) E-mail:</td>
<td>To facilitate a prompt response on fire safety matters, please contact Rebecca Creighton <a href="mailto:rcrei3@eq.edu.au">rcrei3@eq.edu.au</a></td>
</tr>
</tbody>
</table>

### Building Occupier

<table>
<thead>
<tr>
<th>Name</th>
<th>Anthony Lanskey</th>
</tr>
</thead>
<tbody>
<tr>
<td>Building Occupier</td>
<td></td>
</tr>
<tr>
<td>Contact Details:</td>
<td>Phone: 07 54898333</td>
</tr>
<tr>
<td></td>
<td>Fax: 54898301</td>
</tr>
<tr>
<td>Building Occupier</td>
<td></td>
</tr>
<tr>
<td>E-mail Address:</td>
<td><a href="mailto:alansk6@eq.edu.au">alansk6@eq.edu.au</a></td>
</tr>
<tr>
<td>Building Use / Building Code of Australia (BCA) Classification:</td>
<td>(See Note 2)</td>
</tr>
</tbody>
</table>

### Fire Safety Advisor

<table>
<thead>
<tr>
<th>FSA Name:</th>
<th>Rebecca Creighton</th>
</tr>
</thead>
<tbody>
<tr>
<td>FSA telephone Number:</td>
<td>07 54898317</td>
</tr>
<tr>
<td>FSA E-mail Address:</td>
<td><a href="mailto:rcrei3@eq.edu.au">rcrei3@eq.edu.au</a></td>
</tr>
<tr>
<td>RTO that issued Qualification:</td>
<td>Qld Fire Dept</td>
</tr>
<tr>
<td>Date of Issue of Qualification:</td>
<td>(insert details)</td>
</tr>
<tr>
<td>FSA Network No.</td>
<td></td>
</tr>
</tbody>
</table>

### Annual Fire Evacuation Plan Review

<table>
<thead>
<tr>
<th>Reviewed By: (Print Name)</th>
<th>Date of Review:</th>
<th>Any changes: Y/N</th>
</tr>
</thead>
<tbody>
<tr>
<td>Rebecca Creighton</td>
<td>13/10/2016</td>
<td>Yes</td>
</tr>
</tbody>
</table>
Evacuation Coordinator (Chief Warden)

<table>
<thead>
<tr>
<th>Position Title</th>
<th>Contact Number</th>
<th>E-mail:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Deputy Principal</td>
<td>548983</td>
<td>Drehb3 @eq.edu.au</td>
</tr>
<tr>
<td>Damon Rehbein</td>
<td>0455 052 128</td>
<td></td>
</tr>
</tbody>
</table>

Emergency Team (Evacuation Wardens)

<table>
<thead>
<tr>
<th>Position Title</th>
<th>Location</th>
<th>Contact No:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Operations Officer</td>
<td>Multi-Purpose Courts</td>
<td>0418 973 655</td>
</tr>
<tr>
<td>Emelie Gabbert</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Public Information Officer</td>
<td>Multi-Purpose Courts</td>
<td>0427 554 746</td>
</tr>
<tr>
<td>Sondra Barry</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Communications Officer</td>
<td>Multi-Purpose Courts</td>
<td>54898320</td>
</tr>
<tr>
<td>Billie Meers</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Staff Checking Officer</td>
<td>Multi-Purpose Courts</td>
<td>54898330</td>
</tr>
<tr>
<td>Melita Rogers</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Student Checking Officer</td>
<td>Multi-Purpose Courts</td>
<td>54898363</td>
</tr>
<tr>
<td>Donna Patterson</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Building Evacuation Procedures
(also refer to building’s ‘Evacuation Signs and Diagrams’)

In the event of locating a fire, occupants should:

(a) Remove all persons from the immediate area.
(b) Alert-
   - Persons nearby by calling out in a loud voice.
   - The Fire Service by pressing a manual call point alarm and/or dialling 000.
(c) Confine the fire by closing any immediate windows and doors (if safe to do so.)
(d) Evacuate from the area when directed or if the fire cannot be extinguished.

During any evacuation, students should:

(a) Act responsibly. Don’t hide or fool around. Look after each other’s safety.
(b) Not collect personal items from bags or lockers. Getting away from the buildings is more important.
(c) Move quickly but not run.

During any evacuation, everyone should:

(d) Follow all instructions given by facility staff.
(e) If smoke is present:
   - Get down low below the smoke if possible.
   - Cover your mouth and nose to protect your breathing.
   - Move away from thick smoke even if it may take longer to get to the assembly area.
(f) Notify someone immediately if you are aware of people trapped in the building.
(g) Only attempt to extinguish the fire if:
   - It is safe to do so (fire is small enough with no excessive smoke)
   - You have been instructed in using the relevant fire fighting equipment
   - You have a means of escape to your back and can safely exit if necessary
   - Evacuation of other occupants has commenced.

Note: The location of the Assembly Area for this facility as well as the exit pathways from this area is contained in the copies of the building evacuation signs located at the rear of this Plan and on evacuation signs and diagrams located on site.
Method of Operating Fire Fighting Equipment

FIRST RESPONSE FIRE FIGHTING EQUIPMENT is for use by the occupants of the building to extinguish the fire in its initial stages, providing they have been instructed in the use of this equipment and if it is safe to do so. This equipment consists of Fire Extinguishers, Fire Blankets and Fire Hose Reels.

*When using a fire extinguisher, remember PASS:*

- **P**ull the safety pin
- **A**im at the base of the fire
- **S**queeze the handles together to activate the extinguisher
- **S**weep the base of the fire from side to side to ensure complete coverage of the area.

**Warning:** Always ensure you use an extinguisher suitable for the classification (type) of fire you want to put out. This can be confirmed by reading the information contained on the front of the extinguisher. Test the extinguisher away from the fire to ensure it is fully charged and working before proceeding.

Fire hose reels should only be used for class (A) fires (e.g. paper/wood). To operate turn on the main valve (turn tap or lift handle), this will pressurise the hose and release the nozzle. Run out hose to fire and use nozzle to regulate water flow.

**Warning:** Using a fire hose is dangerous near electricity. Using a non-conductive fire extinguisher is a safer option.

Fire blankets are used on class (F) fires (cooking oils and fats) burning in small containers (e.g. saucepans). Turn off any heat source before or immediately after applying blanket. Once applied, tuck in edges of blanket to seal off fire. Do not remove the fire blanket from a container fire until after the arrival of fire services.

**Warning:** Fire blankets are not safe to use on items that may conduct live electricity (e.g. fire in a toaster). Using a non-conductive fire extinguisher in this instance is a safer option.

Fire blankets can also be used to extinguish a fire on a person by placing the person on the ground, and covering with the blanket (**stop, drop, cover and roll**).

For fires on a person—Once extinguished, begin immediate first aid and contact the ambulance service.
# Building Evacuation Coordination Procedures

| Procedure for using the building intercommunication devices. | In the event of a fire or hazardous materials incident, occupants will be advised to commence evacuation procedures by: 
*Continual Ringing of the Bell*

Should this procedure not be able to be implemented this alternate procedure will be used: 
*Hand held bells*

| Procedures for alerting the Emergency Services and activating a manual call point. | **Activating a Manual Call Point (MCP):**

In this building, manual call point boxes have signage indicating “Local alarm only – in case of fire break glass and ring 000”. In this instance, breaking the front face will only activate the fire alarm in the building.

Ensure the fire service is also contacted by dialing 000.

**Alerting the Emergency Services:**

*In a fire or other emergency the following procedure will be undertaken: Ring the main office/Senior Services*

| Procedure for evacuating persons with special needs, the public and other persons. | **Persons with Special Needs:**

This term means persons for whom it is reasonable to make different arrangements (in an emergency) because of the characteristic of the person (e.g. person with a disability) or a matter related to the person’s presence in the building (e.g. working in an area where egress is restricted)

During an evacuation, persons identified as having special needs will be assisted by staff or other nominated occupants to respond and move to a place of safety out of the building.

**Members of the Public and Other Persons:**

Visitors and contractors on site (other than persons with special needs) will be directed to the nearest safe fire exit from the building. Staff directing the evacuation will advise these persons of the location of the nearest, safe assembly area and to remain at that location for the duration of the emergency.

| Procedures for ensuring all persons have been evacuated. | Wardens will, when leaving an area, verbally call out and visually sweep the area to decrease the likelihood that anyone is left behind. On arrival at the Assembly Area, wardens will question evacuees to determine if anyone is missing or injured.

Nominated staff will take a copy of any relevant documentation (e.g. attendance records and visitor sign-on register) to the Assembly Area to verify full evacuation.
<table>
<thead>
<tr>
<th>Procedure for informing the Evacuation Coordinator.</th>
<th>At the assembly area and as soon as practicable, a warden from each area will confirm to the evacuation co-ordinator (Chief Warden) that all persons have safely evacuated, or provide details of persons not accounted for.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Procedure for meeting the Emergency Service.</td>
<td>The Chief Warden will meet (or nominate someone to meet) the Fire Services on arrival and brief them regarding the type, scope and location of the emergency and the status of the evacuation.</td>
</tr>
</tbody>
</table>
EVACUATION PROCEDURES
(This information will be reviewed and updated each term)

PANIC MUST BE PREVENTED AT ALL TIMES

ALARM SIGNAL
- The signal for an evacuation in event of a FIRE, BOMB THREAT, GAS LEAK etc, is CONTINUOUS SOUNDING of BELLS.
- If electricity is out, a hand-held bell will be used, plus staffrooms will be notified by messenger. Be aware that Page A on Telephone will not be received in H Middle.

MAIN OFFICE
Print out supervisions sheet for absent staff and Student absentees (Donna Patterson) for each year level from HOYS then these to go to Group controllers-Emelie.

CLASSROOM TEACHERS
- Teachers should instruct students to leave all their equipment in the room and move quickly and quietly by the SAFEST ROUTE to MULTI-PURPOSE COURT for roll marking. BACK UP LOCATION-HANGER OVAL COOTHARABA ROAD.
- Turn GAS and ELECTRICITY off at main switch in classrooms.
- Seal dangerous CHEMICALS in containers and leave in rooms, which are then locked.

ALL TEACHERS
- Provide first aid assistance where needed until a first aid officer arrives.
- Direct students away from burning buildings.
- Ensure students are proceeding by the safest route.

AGRICULTURE students are to be KEPT AT THE FARM with their teachers. SPECIAL NEEDS students are to be accompanied to the multipurpose courts by their supervising Teacher Aides, unless they are attending mainstream classes.

FIRST AID
- First Aid Officers:
  * collect first aid kits from allocated points;
  * conduct sweeps of allocated areas;
  * follow procedures as outlined by First Aid Coordinator;
  * report successful evacuation of their areas to Billie Meers via walkie-talkie.
- First aid on the Multi-purpose courts is directed to Ms Creighton at the Multi-Purpose Courts
- School Receptionists leave main first aid kit outside mini school door for collection but take spare first aid kits with them to the front of the school.

Issued: January 2017 V1
Uncontrolled when printed
PERSONNEL TO CHECK BUILDINGS & TOILETS – If staff absent Sondra to send an available staff member.

<table>
<thead>
<tr>
<th>BLOCK</th>
<th>FIRST PERSON</th>
<th>BACK UP</th>
</tr>
</thead>
<tbody>
<tr>
<td>ADMIN</td>
<td>Office Staff</td>
<td></td>
</tr>
<tr>
<td>A BLOCK</td>
<td>Roxanne Roberts</td>
<td>Helen McFadzen</td>
</tr>
<tr>
<td>AG Farm</td>
<td>Bob Leitch</td>
<td>Alan Dimich</td>
</tr>
<tr>
<td>B BLOCK</td>
<td>Emma Palm</td>
<td>Sharon McFarlane</td>
</tr>
<tr>
<td>C BLOCK</td>
<td>Kelli Swan</td>
<td>Mel Betts</td>
</tr>
<tr>
<td>D BLOCK</td>
<td>Shannon Keane</td>
<td>Dan Jagganath</td>
</tr>
<tr>
<td>E BLOCK</td>
<td>Jenny Kachel</td>
<td>Melinda Jensen</td>
</tr>
<tr>
<td>F BLOCK</td>
<td>Warrick Trueman</td>
<td>Gavin Gagen</td>
</tr>
<tr>
<td>G BLOCK</td>
<td>Ken Brady</td>
<td>Glen Hills</td>
</tr>
<tr>
<td>H UPPER</td>
<td>Allison Keillor</td>
<td>Callum Roberts</td>
</tr>
<tr>
<td>H MIDDLE</td>
<td>Alicia Radecker</td>
<td>Lorelle O'Keefe</td>
</tr>
<tr>
<td>H LOWER</td>
<td>Helen Kable</td>
<td>Siobhan Lanskey</td>
</tr>
<tr>
<td>J BLOCK</td>
<td>Sally Bekker</td>
<td>Dave Tomkinson</td>
</tr>
<tr>
<td>K BLOCK</td>
<td>Chris Costa</td>
<td>Dan McGlone</td>
</tr>
<tr>
<td>CYBRARY</td>
<td>Anita Claasz</td>
<td>Robyn Cook</td>
</tr>
<tr>
<td>M BLOCK</td>
<td>Warren Lawson</td>
<td>Jason Easton</td>
</tr>
<tr>
<td>N BLOCK</td>
<td>Julie Winters</td>
<td>Natasha Rogers</td>
</tr>
<tr>
<td>O BLOCKS</td>
<td>Dominic Power</td>
<td>Tony Grudzinski</td>
</tr>
<tr>
<td>P &amp; GYM</td>
<td>Nic Banks/Ben Oliver</td>
<td>Fran Scanlan</td>
</tr>
<tr>
<td>HALL</td>
<td>Dave Kilpatrick</td>
<td>Rebecca Creighton</td>
</tr>
<tr>
<td>Q Block</td>
<td>Michael Zande</td>
<td>Shar Sadeghi</td>
</tr>
<tr>
<td>S Block</td>
<td>Anna-Rita Ovaska</td>
<td>Lisa James</td>
</tr>
<tr>
<td>Canteen</td>
<td>Cathy Turner</td>
<td>Vicky Beattie</td>
</tr>
</tbody>
</table>

BLOCK CHECKERS- Check that no one is in the building and doors are locked and Report to Sondra Barry back up Sally Bekker

REPORTING PROCEDURES-

- **ADMIN BUILDING:**
  Office Staff Jodie Forbes → reports successful evacuation to - Billie Meers who then reports to Damon Rehbein

  * Office Staff, Visitors, Computer Technician  
  * Janitor (makes keys available)
- **COOTHRABA RD**
  First Aid and Senior Schooling staff with Judy Dixon, Computer Technician, Sick Bay Students, Chaplain, Community Education Counsellor, Print Room Staff, Senior Schooling Staff, School Nurse. Judy Dixon Reports successful evacuation to **BILLIE MEERS**

- **OTHER BUILDINGS CHECK** reports successful evacuation to SONDRA BARRY who then informs the Communications Officer Billie Meers.

- **VISITORS** attempting to enter the school grounds are to be advised to wait until after the evacuation/incident is finished. Staff at Admin Block will disperse to cover entry points in Everson Road and staff on Coothyara Road will disperse to cover entry points between Dave stationed outside Hamilton Hall and Judy Dixon at the bottom of J Block.

- **MULTIPURPOSE COURTS**: GROUP CONTROLLERS (Emelie Gabbert & Nic Banks) reports successful evacuation to **COMMUNICATIONS CO-ORDINATOR**
  - Class Teachers and Students
  - Mini School Receptionists
  - Teachers without Classes
  - Year Level Coordinators
  - Students on Study Lessons
  - Ancillary Staff

- **ROLL MARKING PROCEDURES**:
  **HEADS OF YEAR** line up through the middle of the courts and teachers and students, as indicated below. Heads of Year then report Absentees to DONNA PATTERSON to cross check.

  Then STAND IN in the middle of the multi-purpose courts next to their year group.

- **Teachers** take the class they are teaching to the Multi-purpose courts and arrange them into form classes. Students are to sit down. Form teachers to mark their form roll. Write Absentees at bottom of roll and report to the HEAD OF YEAR in the middle of the Multi-Purpose courts the get marked off with Melitta Rogers A-G Emma Palm H-N, Helen Kable O-U and Rae Gibb V-Z.

---

![Diagram of the school layout](image)
- **ASSISTANT GROUP CONTROLLER** takes student absentee list, students on study lesson list, megaphone, ancillary list, teachers on spares, Head of Year lists, bibs and master timetable.

- **EXTRA TEACHERS** without classes after being marked off with Melita then report to **BILLIE MEERS** to be assigned a job if necessary.

- **STUDENTS on STUDY LESSONS** go to their form classes for roll marking.

- When all rolls are marked and absent **students are checked against absentee list by HOYS** they then report to **Donna Patterson** who informs, **GROUP CONTROLLER EMELIE GABBERT** who then reports successful evacuation to **COMMUNICATIONS CO-ORDINATOR, BILLIE MEERS** and gives the names of any students, Staff or Volunteers who are unaccounted for To the **OPERATIONS OFFICER - DAMON REHBEIN**.

- If Melita Rogers is absent the **GROUP CONTROLLER** will need to assign a teacher to mark the roll of staff on special duties.

- Students will not be released until all rolls are marked and absentees accounted for.
## 11. Lockdown Response

**Priority**
This procedure minimises access to the school environment and secures all persons in rooms.

**Reporting the emergency**
- Contact Emergency Services immediately on 000
- Notify the Regional Director

**Lockdown**

### Signal 5 extended rings of the Bell

**Procedure**
1. Administration doors are locked by office personnel.
2. Classroom doors are locked by teachers.
3. Access to any and all persons denied.
4. All outside activities and lessons stop immediately and students are taken to the nearest classroom.
5. If a class or group are not on the school site the teacher should keep the students off-site until an all clear signal is given to return.
6. Staff not in their own classroom will remain in the building and/or room they are currently in until told it is safe to move.
7. Class lists/rolls are checked.
8. Report all students/persons unaccounted for to the Principal (or delegate).
9. Students are to remain calm and silent inside classrooms out of line of sight i.e. under desks or against walls.
10. Toilet block checked by executive staff or principal (if safe to do so) to ensure all students are safely in their rooms.
11. Names of missing students should be provided to executive and front office as soon as possible.
12. Staff and students remain in their rooms until told that the school is safe.

**Special considerations** see attached

**Special responsibilities**

**Lockdown cancellation**
1. Staff and students remain in their rooms until advised by the Principal that the Lockdown procedure is cancelled.
2. One blast on the alarm is the clearance signal.

**General principles**
- These help to prevent persons from entering the school site.
- Normal school routine should re-commence as soon as possible after the event.
- Staff to be vigilant in reporting the entry of unauthorised person or persons onto the school grounds.

**Communications**
- If the lockdown goes for an extended time then the School Response Controller informs the parents and stakeholders via Communications Strategy utilising established formats.

**Pre-arrangements**
- Facilities can be locked internally.
- Visitor sign-in registers maintained in the office or Tuckshop.
- Emergency class lists kept by exit door.
- Relief staff provided with Lockdown summary.
- Staff and students will be made aware of this signal and its meaning and importance at regular times throughout the year.
LOCKDOWN  Lunch time

A lockdown is any situation that requires students to be secured safely within the classrooms.

1. CONTACT THE OFFICE to tell them what is happening and TO INFORM A MEMBER OF ADMIN. Please only one staff member to watch the person - do not run in the school!

2. A sounding of the bell 5 times will signal a Lockdown. The Phone to staffrooms will be contacted for Q Block & LPP.

3. Immediately get students to a room & close internal windows. Any students directly outside the classroom should come inside. If Lunchtime Staff & students should go to their nearest room. STAFF OPEN CLASSROOM DOORS NEAREST TO THEIR STAFFROOM- ensure a staff member is in the room & TAKE A ROLL

<table>
<thead>
<tr>
<th>STAFFROOM</th>
<th>OPEN DOORS</th>
<th>GATHER STUDENTS FROM</th>
</tr>
</thead>
<tbody>
<tr>
<td>T- BLOCK</td>
<td>O &amp; P BLOCK</td>
<td>GATHER STUDENTS IN VICINITY</td>
</tr>
<tr>
<td>GYM</td>
<td>KEEP STUDENTS IN</td>
<td>GATHER STUDENTS IN VICINITY</td>
</tr>
<tr>
<td>N BLOCK</td>
<td>KEEP STUDENTS IN</td>
<td>GATHER STUDENTS IN VICINITY</td>
</tr>
<tr>
<td>C BLOCK</td>
<td>STAFF DOWN STAIRS ASSIST BETWEEN G &amp; C</td>
<td>MOVE STUDENTS UPSTAIRS TO C OR B</td>
</tr>
<tr>
<td>D BLOCK</td>
<td>USHER UPSTAIRS</td>
<td>CANTEEN AREA</td>
</tr>
<tr>
<td>H BLOCK LOWER</td>
<td>USHER TO 2ND LEVEL</td>
<td>LOWER LEVEL</td>
</tr>
<tr>
<td>Q BLOCK</td>
<td>KEEP STUDENTS IN</td>
<td>FROM HANGER OVAL</td>
</tr>
<tr>
<td>MULTI PURPOSE COURT</td>
<td>F BLOCK OR CYBARY-ROBYN OPEN DOOR ENTER INTO LA4 LA5</td>
<td>GATHER STUDENTS IN VICINITY</td>
</tr>
<tr>
<td>S BLOCK</td>
<td>KEEP STUDENTS IN</td>
<td>GATHER STUDENTS IN VICINITY</td>
</tr>
<tr>
<td>M &amp; J BLOCK</td>
<td>KEEP STUDENTS IN</td>
<td>GATHER STUDENTS FROM OUTSIDE BETWEEN H J K</td>
</tr>
<tr>
<td>LPP</td>
<td>SEP ROOMS &amp; R block</td>
<td>GATHER STUDENTS IN QUADRANGLE</td>
</tr>
<tr>
<td>B BLOCK</td>
<td>B ROOMS</td>
<td>USHER STUDENTS FROM DOWNSTAIRS &amp; IN QUADRANGLE</td>
</tr>
<tr>
<td>AG FARM</td>
<td>AG CLASSROOMS</td>
<td>USHER STUDENTS IN</td>
</tr>
</tbody>
</table>

4. Students at Junior and Senior Services go into the nearest room. Teachers will make a list of these students.

5. Where possible, close and lock doors (including whole blocks, eg. J Block)

6. Sit on floor and use desks, walls or whatever is available as shields.

7. No one should leave or enter your classroom or other room with the exception of a member of Administration or Emergency Services personnel.

8. Lockdown The official “All Clear” concludes only with notification of 5 Rings of the Bell from Administration or Emergency Services officer. No student is allowed out of your classroom just because the bell stops sounding.

Additional information may be found at:

Creating Healthier Workplaces:  
# Specific emergencies – response procedures

The fields containing example responses below should be added to suit the location.

<table>
<thead>
<tr>
<th>Category</th>
<th>Response</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Building Fire</strong></td>
<td>- Call 000 for emergency services and follow advice.</td>
</tr>
<tr>
<td></td>
<td>- Activate the fire alarm.</td>
</tr>
<tr>
<td></td>
<td>- Report the emergency immediately to the School Response Controller</td>
</tr>
<tr>
<td></td>
<td>who will convene your SRT if necessary.</td>
</tr>
<tr>
<td></td>
<td>- Extinguish the fire (only if safe to do so).</td>
</tr>
<tr>
<td></td>
<td>- If appropriate, follow the procedure for on-site evacuation.</td>
</tr>
<tr>
<td></td>
<td>- Evacuate to the Multi Purpose Courts, closing all doors and windows.</td>
</tr>
<tr>
<td></td>
<td>- Check that all students, staff, visitors and contractors are</td>
</tr>
<tr>
<td></td>
<td>accounted for.</td>
</tr>
<tr>
<td></td>
<td>- Contact parents as required.</td>
</tr>
<tr>
<td><strong>Bushfire</strong></td>
<td>- Call 000 for emergency services and follow advice.</td>
</tr>
<tr>
<td></td>
<td>- Report the emergency immediately to the School Response Controller</td>
</tr>
<tr>
<td></td>
<td>who will convene the SRT if necessary.</td>
</tr>
<tr>
<td></td>
<td>- Determine appropriate response strategy (evacuate or lockdown) in</td>
</tr>
<tr>
<td></td>
<td>consultation with emergency services, if possible.</td>
</tr>
<tr>
<td></td>
<td>- Provide advice to Emergency services regarding any hazards within the</td>
</tr>
<tr>
<td></td>
<td>school, eg, gas cylinder location.</td>
</tr>
<tr>
<td></td>
<td>- If evacuation is required and time permits before you leave:</td>
</tr>
<tr>
<td></td>
<td>- Make sure you close all doors and windows</td>
</tr>
<tr>
<td></td>
<td>- Turn off power and gas.</td>
</tr>
<tr>
<td></td>
<td>- Check that all students, staff, visitors and contractors are</td>
</tr>
<tr>
<td></td>
<td>accounted for.</td>
</tr>
<tr>
<td></td>
<td>- Listen to TV or local radio on battery-powered sets for bushfire/weather warnings and advice.</td>
</tr>
<tr>
<td></td>
<td>- Contact parents as required.</td>
</tr>
<tr>
<td><strong>Major external emissions/spill</strong></td>
<td>- Call 000 for emergency services and follow advice.</td>
</tr>
<tr>
<td>(includes gas leaks)</td>
<td>- Report the emergency immediately to the School Response Controller</td>
</tr>
<tr>
<td></td>
<td>who will convene the SRT if necessary.</td>
</tr>
<tr>
<td></td>
<td>- Turn off gas supply.</td>
</tr>
<tr>
<td></td>
<td>- If the gas leak is onsite, notify your gas provider.</td>
</tr>
<tr>
<td></td>
<td>- If appropriate, follow the procedure for on-site evacuation.</td>
</tr>
<tr>
<td></td>
<td>- Alternatively this may need to be an off-site location.</td>
</tr>
<tr>
<td></td>
<td>- Check students, staff and visitors are accounted for.</td>
</tr>
<tr>
<td></td>
<td>- Await ‘all clear’ advice from emergency services or further advice</td>
</tr>
<tr>
<td></td>
<td>before resuming normal school activities.</td>
</tr>
<tr>
<td></td>
<td>- Contact parents as required.</td>
</tr>
<tr>
<td><strong>Intruder</strong></td>
<td>- Call 000 for emergency services and seek and follow advice.</td>
</tr>
<tr>
<td></td>
<td>- Report the emergency immediately to the School Response Controller.</td>
</tr>
<tr>
<td></td>
<td>- Do not do or say anything to the person to encourage irrational</td>
</tr>
<tr>
<td></td>
<td>behaviour.</td>
</tr>
</tbody>
</table>
- Initiate action to restrict entry to the building if possible and confine or isolate the threat from building occupants.
- Determine whether evacuation or lock-down is required. Do this in consultation with the Police where possible.
- Evacuation only should be considered if safe to do so.
- Contact parents as required.

**Bomb or substance threat**

- Call 000 for emergency services and seek and follow advice.
- Report the threat to the School Response Controller.
- Do not touch any suspicious objects found.
- If a suspicious object is found or if the threat specifically identified a given area, then evacuation may be considered:
  - If appropriate under the circumstances, clear the area immediately within the vicinity of the object of students and staff
  - Ensure students and staff are not directed past the object
  - Ensure students and staff that have been evacuated are moved to a safe, designated location
- Contact parents as required.

**If a bomb/substance threat is received by telephone:**

- Do not hang up.
- If possible fill out the bomb threat checklist while you are on the phone to the caller.
- Keep the person talking for as long as possible and obtain as much information as possible.
- Have a co-worker call 000 for emergency services on a separate phone without alerting the caller and notify the School Response Controller.

**If a bomb/substance threat is received by mail:**

- Place the letter in a clear bag or sleeve.
- Avoid any further handling of the letter or envelope or object.
- Call 000 for emergency services and seek and follow advice.
- Notify the School Response Controller.

**If a bomb/substance threat is received electronically or through the school’s website:**

- Do not delete the message
- Call 000 for emergency services and seek and follow advice
- Notify the School Response Controller.

**Internal emission or spill**

- Call 000 for emergency services and seek and follow advice.
- Report the emergency immediately to the School Response Controller who will convene your SRT if necessary.
- Move staff and students away from the spill to a safe area and isolate the affected area.
- Seek advice in regards to clean up requirements, and if safe to do so, the spill can be cleaned up by staff. Personal Protective Equipment should be worn as per the requirements of the Material Safety Data Sheet and Safety Work Procedure.
<table>
<thead>
<tr>
<th>Severe Weather event</th>
<th>Sudden event during operational hours</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Call 000 if emergency services are needed and follow advice.</td>
</tr>
<tr>
<td></td>
<td>Advise the School Response Controller who will convene the SRT if necessary.</td>
</tr>
<tr>
<td></td>
<td>Before the storm, store or secure loose items external to the building, such as outdoor furniture and rubbish bins.</td>
</tr>
<tr>
<td></td>
<td>Disconnect electrical equipment – cover and/or move this equipment away from windows.</td>
</tr>
<tr>
<td></td>
<td>Secure windows (close curtains &amp; blinds) and external doors. If necessary, tape windows and glass entrances. Utilise boards and sandbags if required.</td>
</tr>
<tr>
<td></td>
<td>Instigate a lockdown.</td>
</tr>
<tr>
<td></td>
<td>During the severe storm:</td>
</tr>
<tr>
<td></td>
<td>Remain in the building and keep away from windows</td>
</tr>
<tr>
<td></td>
<td>Restrict the use of telephone landlines to emergency calls only, particularly during a thunderstorm.</td>
</tr>
<tr>
<td></td>
<td>Report any matter concerning the safety and wellbeing of students, staff and visitors to the School Response Controller.</td>
</tr>
<tr>
<td></td>
<td>Listen to local radio or TV on battery-powered sets for weather warnings and advice.</td>
</tr>
</tbody>
</table>

**Forecast imminent event (e.g. cyclone, floods)**

- If weather warnings and advice from the State Disaster Management Group indicate that the location will be impacted by a severe weather event, the School Response Controller will follow the decision-making process to determine if the school will be temporarily closed.
- The SRT will be convened.
- If the school is to be temporarily closed, then all stakeholders will be advised including the Regional Director who will manage the School Closures advice.
- The Temporary Closure procedure needs to be implemented.
- After the event, if the school is situated in the impact zone, then Building and Asset Services (BAS) will determine if the site is safe for the School Response Controller to enter to undertake a Suitability Assessment to Re-open.

<table>
<thead>
<tr>
<th>Earthquake</th>
<th>Call 000 for emergency services and seek and follow advice.</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>The School Response Controller who will convene the SRT if necessary.</td>
</tr>
<tr>
<td></td>
<td>Evacuate to assembly area/s.</td>
</tr>
<tr>
<td></td>
<td>Check that all students, staff, visitors and contractors are accounted for.</td>
</tr>
<tr>
<td></td>
<td>Await 'all clear' advice from emergency services or further advice before resuming normal school activities.</td>
</tr>
<tr>
<td></td>
<td>Contact parents as required.</td>
</tr>
</tbody>
</table>
FLOOD EVACUATION PROCEDURES

When heavy rain is falling which may result in flooding, Administration contacts all bus companies and requests them to monitor creek levels on their run. An Admin staff member will go to each of the Service centres to assist staff and send students to inform students who may need to depart. Staff must ensure their mobiles are charged and available in class.

Admin will send out preventative texts to parents in case of excess rain.

Which bus routes need evacuating first depends on where rain has been falling and localised flooding is occurring. Potential trouble areas are:

- **SIX MILE CREEK**: (Just past the Gympie Speedway) Affecting Mothar Mountain/Woondum – Pagels, Carters, Lorenson’s buses. Subject to localised flooding from Mothar Mountain to Cooran. Students to the east of Six Mile Creek are isolated from Gympie.

- **MARY VALLEY**: Affecting Amamoor, Kandanga, Brooloo, Dagun, Imbil – Polleys, Worths, Towners and Dan’s buses. Numerous creeks exist which are fed from Amamoor, Kandanga, Calico Creek, Yabba Creek, Imbil. Flood information is usually provided by parents, to bus companies, to the school. Causeways can be rapidly cut off in moderate to heavy rainfall.

- **WIDGEE**: Affecting The Palms, Nurundah Park, Widgee. When the flood reaches 13.45 metres these areas are cut off.

- **COONDOO CREEK**: Affecting Toolara Forestry near Maryborough Road. Can flood with very heavy localised coastal rain.

- **SOUTHSIDE**: Affecting Normanby Bridge, Monkland, Pengally’s Bridge. Areas are cut off when river height reaches 15.5 metres. The bridges are generally flooding 24 hours after substantial rainfall begins.

- **WILLOWS OVAL**: Flood waters inundate Willows Oval at 20.5 metres. Hanger Oval is used for State Emergency Services helicopters in major flooding.

- **BELLS BRIDGE**: Affecting Woolooga, Kilkivan areas – Cooloola Coaches. Floods when the river reaches 14.5 metres.

Buses will not leave early. The buses will depart from their normal pick up points. **Admin will contact the Junior & Senior schools with names of departing students.**

When parents phone to collect their students, a message will go to the students’ classes. Students are to sign out through Junior or Senior Services and are to be collected from the Administration Block in Everson Road.

When there is widespread flooding affecting staff and students:

- All staff and students meet under B Block for briefings at the end of each lesson. Messages will be relayed to the group about bus departures and parent pick ups.

- A decision will be made as to how to reorganise the school when staffing levels do not allow classes to run normally. Initially, mini school classes will be combined together to undertake normal instruction. When the number of staff and students left do not make this viable, students need to be regrouped into activities in the gym, library and computer rooms. The reason for minimising holding area for students is to expedite message delivery. All students must sign out through mini schools and staff must
sign out through Admin Office on departure. Students are NOT TO LEAVE the school with their friends or any other relative unless prior approval is obtained from parents.

The Deputy Principal will coordinate the operation of the school during flooding. He/She will provide advice to the local radio station as to the level of staffing and programming which can be delivered in the school. The school will remain open; however, he/she will advise the community that normal programs of instruction will not be operating due to skeleton staff and if parents are able to keep students home, this would be advised.

When staff are unable to come to Gympie High School because they are cut off through flooding, they should contact the Admin Office. If staff can get to another school they should attend that school and perform duties as directed by the school principal. If staff cannot be meaningfully employed, it is likely that the staff member will be told to return home. If the teachers cannot get safely to another school site, it is expected that they will undertake planning and preparation at home.

- Teachers who are able to attend school may be called upon to volunteer to undertake community service in the form of assisting flood victims to evacuate, provided they are not required to supervise students

**BOMB THREAT**

*Post this checklist near your phone so it is visible and easily accessible.*

| REMAIN CLAM   | • Treat the call as genuine  
|               | • Attempt to prolong the conversation and DO NOT hang up.  
|               | • Try to attract the attention of a second person to call 000  
| BE ATTENTIVE  | • Note distinguishing background noises e.g. music, traffic  
|               | • Note voice characteristics  
|               | • Does the caller indicate a knowledge of the facility?  
| RECORD        | • Enter the details immediately on the Bomb Threat Checklist  
| NOTIFY        | • Dial 000 and state ‘Bomb Threat’  
|               | • The location Response Controller  
| PREPARE       | • To evacuate if necessary  
|               | • To follow the instructions of the Response Controller, Police and other Emergency personnel.  
| IF OBJECT FOUND | • DO NOT TOUCH IT. Report that you have found it.  
|             | • Evacuate area.
<table>
<thead>
<tr>
<th>Designation</th>
<th>Details</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Recipient of phone call</strong></td>
<td></td>
</tr>
<tr>
<td>Name</td>
<td></td>
</tr>
<tr>
<td>Position</td>
<td></td>
</tr>
<tr>
<td>School/Unit</td>
<td></td>
</tr>
<tr>
<td>Phone (work)</td>
<td></td>
</tr>
<tr>
<td>Date call received</td>
<td></td>
</tr>
<tr>
<td>Time call received</td>
<td></td>
</tr>
<tr>
<td>Length of call</td>
<td></td>
</tr>
<tr>
<td><strong>Exact wording of the threat</strong></td>
<td></td>
</tr>
<tr>
<td>What is it?</td>
<td></td>
</tr>
<tr>
<td>Is it a bomb?</td>
<td></td>
</tr>
<tr>
<td>When will it explode or the substance be released?</td>
<td></td>
</tr>
<tr>
<td>When did you put it there?</td>
<td></td>
</tr>
<tr>
<td>What will make it explode?</td>
<td></td>
</tr>
<tr>
<td>Why did you place the bomb?</td>
<td></td>
</tr>
<tr>
<td>What is your name?</td>
<td></td>
</tr>
<tr>
<td><strong>Caller's voice</strong></td>
<td></td>
</tr>
<tr>
<td>Accent</td>
<td>□ Asian □ American □ Australian □ English □ Other:</td>
</tr>
<tr>
<td>Speech</td>
<td>□ Fast □ Slow</td>
</tr>
<tr>
<td>Voice</td>
<td>□ Loud □ Soft</td>
</tr>
<tr>
<td>Gender</td>
<td>□ Female □ Male</td>
</tr>
<tr>
<td>Impediment</td>
<td>□ Lisp □ Stutter</td>
</tr>
<tr>
<td>Manner</td>
<td>□ Calm □ Emotional</td>
</tr>
<tr>
<td>Diction</td>
<td>□ Clear □ Muffled</td>
</tr>
<tr>
<td>Other</td>
<td></td>
</tr>
<tr>
<td>Did you recognise the voice?</td>
<td>□ Yes □ No</td>
</tr>
<tr>
<td>Was the caller familiar with the site/campus/building?</td>
<td>□ Yes □ No</td>
</tr>
<tr>
<td><strong>Threat language</strong></td>
<td></td>
</tr>
<tr>
<td>Well spoken</td>
<td>□ Yes □ No</td>
</tr>
<tr>
<td>Incoherent</td>
<td>□ Yes □ No</td>
</tr>
<tr>
<td>Taped</td>
<td>□ Yes □ No</td>
</tr>
<tr>
<td>Abusive</td>
<td>□ Yes □ No</td>
</tr>
<tr>
<td>Message read by caller</td>
<td>□ Yes □ No</td>
</tr>
<tr>
<td>Other</td>
<td></td>
</tr>
<tr>
<td><strong>Background noises</strong></td>
<td>□ Voices □ Street noises □ Aircraft □ House noises</td>
</tr>
<tr>
<td></td>
<td>□ Machinery □ Music □ Other:</td>
</tr>
</tbody>
</table>
• CLEANING STAFF ONLY

• FIRE DRILLS & EMERGENCY EVACUATIONS

• School Hours:
  Should a fire or fire drill occur during school hours, all cleaners should adhere to the instructions as issued in the school's Fire Drill and Emergency Evacuations directive. Cleaners should gather at the traffic lights, EMERSON Road OUTSIDE ADMIN, and a head count noted.

• Out of School Hours:
  Should a fire or alarm occur after school hours, one member of the team who discovers the fire should immediately inform the School Cleaning Coordinator (SCC) and other teams of the occurrence and location of the fire. All teams, when notified, should proceed to the designated meeting place on EMERSON Road for a head count and further instructions. On notification, the SRC will make an assessment and, if necessary, notify the appropriate responding authority (police, fire, ambulance) and the Deputy Principal.

• BOMB THREAT
  As per school procedures as outlined in Fire Drill and Emergency Evacuations.

• MINOR ACCIDENTS OR INJURIES

• School Hours:
  Should a minor accident or injury occur during school hours, assess the situation and, if possible, take the injured person to office for further attention. If not possible to move, inform office immediately.

• Out of School Hours:
  If out of school hours, stay with the person or at the scene and send a member of the team to inform the SCC who will assess the situation and, if necessary, contact the appropriate authority and the Principal.

• VIOLENT INCIDENT

• School Hours:
  Should a violent incident of any sort occur, do not interfere but retreat to a safe distance and observe the occurrence. Send a member of the team to inform the office immediately.

• Out of School Hours:
  If out of school hours, inform the SCC who will assess the situation and risk and inform appropriate responding authority and the Principal.

  The person who is observing the occurrence should take careful note of the happening as they may be required as a witness at a later date.

This should be read in conjunction with the Fire and Emergency
  • Evacuations procedures as issued by the school.
First Aid Facilities and Procedures

In compliance with the Work Health and Safety Act 2011, DET must ensure the health and safety of its employees, students and others. This duty of care requires DET to provide and maintain adequate first aid facilities and personnel for the effective emergency management of injured or ill employees, students and others at all departmental workplaces.

Those requiring medical attention should not be left alone or unmonitored, a staff member (preferably a First Aid Officer if available) should be with them at all times until no further care or assistance is required, or until the person is handed over to ambulance/medical personnel.

It is important that systems are established to ensure that appropriate first aid can be delivered in a timely manner during all work activities.

- The first aid kits are located at the first aid room
- The procedure for administering first aid at this workplace/school for Minor Injuries is to
- Arrangements for off campus activities incl. sport, excursions, camps etc. is (insert procedures here).
- If an ill or injured person is:

**Not responsive to first aid treatment or for life threatening situations:**

- Dial 0 (to get an outside line) Then 000 (Emergency Services)
- Ask the operator for the service required (Police, Ambulance or Fire)
- Wait to be connected
- Advise of the Street Address
- Advise the Location (Building, Floor Number or Site Location)
- Advise the Nature of the Emergency

The number of trained first aid staff for your workplace should be discussed with your supervisor.

**FIRST AID OFFICERS** Officer with accredited first aid training nominated to provide first aid in the workplace.

LEGGNE PATTDO MEEREL ROGME, GIBBRA DUTTP BETTME BERNAL

Nerissa Legge  Donna Patterson  Billie Meers  Melita Rogers  Ray Gibb  Peter Dutton  Mel Betts  Alison Bernadin

Those requiring medical attention, especially students, should not be left alone or unmonitored.
Other Qualified First Aid Officers for this workplace are:

<table>
<thead>
<tr>
<th>SURNAME</th>
<th>GIVEN NAME</th>
</tr>
</thead>
<tbody>
<tr>
<td>BANKS</td>
<td>Nick</td>
</tr>
<tr>
<td>BEKKER</td>
<td>Sally</td>
</tr>
<tr>
<td>BERNARDIN</td>
<td>Alison</td>
</tr>
<tr>
<td>BRENNAN</td>
<td>Dianne</td>
</tr>
<tr>
<td>BRENNAN</td>
<td>Sheree</td>
</tr>
<tr>
<td>CHAPMAN</td>
<td>Noelene</td>
</tr>
<tr>
<td>COLLINS</td>
<td>Gay</td>
</tr>
<tr>
<td>CORDWELL</td>
<td>Jessica</td>
</tr>
<tr>
<td>COSTA</td>
<td>Chris</td>
</tr>
<tr>
<td>COULL</td>
<td>Rachel</td>
</tr>
<tr>
<td>CREIGHTON</td>
<td>Rebecca</td>
</tr>
<tr>
<td>GREGORY</td>
<td>Adam</td>
</tr>
<tr>
<td>DAVIDSON</td>
<td>Anna</td>
</tr>
<tr>
<td>EASTON</td>
<td>Jason</td>
</tr>
<tr>
<td>JAGANNATH</td>
<td>Daniel</td>
</tr>
<tr>
<td>GROSSE</td>
<td>Mark</td>
</tr>
<tr>
<td>GAGAN</td>
<td>Gavin</td>
</tr>
<tr>
<td>HASS</td>
<td>Matt</td>
</tr>
<tr>
<td>JACOBSEN</td>
<td>Debra</td>
</tr>
<tr>
<td>JENSEN</td>
<td>Melinda</td>
</tr>
<tr>
<td>McGLONE</td>
<td>Dan</td>
</tr>
<tr>
<td>MORRISON</td>
<td>Holly</td>
</tr>
<tr>
<td>OLIVER</td>
<td>Ben</td>
</tr>
<tr>
<td>PATTERSON</td>
<td>Donna</td>
</tr>
<tr>
<td>POZEBON</td>
<td>Kylie</td>
</tr>
<tr>
<td>QUINN</td>
<td>Clare</td>
</tr>
<tr>
<td>RADECKER</td>
<td>Alicia</td>
</tr>
<tr>
<td>SADEGHI</td>
<td>Shar</td>
</tr>
<tr>
<td>SCANLEN</td>
<td>Fran</td>
</tr>
<tr>
<td>STILES</td>
<td>Renee</td>
</tr>
<tr>
<td>WINTERS</td>
<td>Julia</td>
</tr>
<tr>
<td>WATT</td>
<td>Sam</td>
</tr>
</tbody>
</table>

(All staff have specialist skills e.g. anaphylaxis training etc.)

Being trained could save the life of another staff member, a student or one of your own family.

**Departmental procedures and Guidelines**

Refer to DET procedure HLS-PR-003 First Aid at:

Medical Emergencies

An emergency situation is when someone requires immediate medical assistance e.g. sudden illness or trauma.

Staff are not required to disclose any medical conditions to the department. e.g. heart condition/diabetes/anaphylaxis/asthma/epilepsy etc.

However, staff who do have a medical condition that could lead to a medical emergency should consider discussing their situation with their treating medical practitioner and their supervisor to develop an emergency medical care plan.

The benefit of this disclosure is that, if needed, appropriate first aid can be rendered more effectively and emergency services can be contacted quickly. Things to discuss with your supervisor may include: the nature of your condition, signs and symptoms, emergency action plan, location of your medication, emergency contact, confidentiality and who you feel comfortable with knowing this information at the workplace.

Regardless of staff with pre-existing conditions, an emergency can happen anywhere and at any time. Therefore preparation is the key.

Things to know:
- Emergency procedures for your workspace
- First Aid Officer(s) – how to contact
- First Aid Kits – where they are
- Procedure for contacting and ambulance (First Aid Facilities and Procedures)
- The street address for your work location
- Phone number of security (if applicable)
- Contact phone numbers for local medical centres

Students who are diabetic, asthmatic, epileptic or have severe allergic reactions, should have an Individual Management Plan or an Action Plan which clearly outlines the steps to follow in a potentially life threatening emergency. It is signed off by the student’s doctor and parents.

The Individual Management Plan or Action Plan, along with the emergency medication is available where ever the person/student is within the school/workplace or when on school/workplace activities off campus.

Individual Management plans exist for:
- **STUDENTS SEE APPENDIX**

If you work with anyone who has an individual management plan you must be conversant with the plan and be trained to respond to an emergency (e.g. administering an epipen). If you find yourself working with one of the staff/students listed above and you are not trained immediately, advise (insert name)

See Appendix for students with physical risks

For further information on emergency medication and training available for EQ students refer to DET Procedure:
STUDENT MEDICAL PLAN AND RECORD

A specialised health need is where a student requires routine/daily health procedures, has a medical status which may require an emergency response to a life-threatening crisis or requires infrequent emergency needs/procedures.

If your child has a health plan for an existing health problem (i.e. diabetes, heart condition) the school requests a copy to be placed in the students’ file for 2015. Please indicate the medical condition, doctor’s management plan, medication prescribed and basic first aid treatment. Only prescribed medications will be administered at school by school staff.

The school also requires that the following permission form over be filled out and signed by your GP if medication is to be administered by school staff.

Students Name ___________________________ Date of Birth _______________________________

Medical Emergency contact Number: ____________________________

Medical Issue: ________________________________________________________________

Preventative Medication Prescribed: _________________________________________________

Stressors to the Medical Problem: eg. Running, eating, nuts. _______________________________

First Aid Treatment recommended by the Doctor. ________________________________________

Signed by Authorising Practitioner Print name: __________________________________________

Phone: ____________________________

Signature: __________________________ Date: __/__/____

☐ I agree to notify the school, in writing, if there are any changes to the above condition or medication
☐ I agree to notify the school, in writing, if I wish to withdraw my permission

IMPORTANT: Please ensure that all medication to be administered at school be sent to school in the original container with a pharmacy label stating the child’s name, dosage of the medication and route to be given.
Administration of medication at school record sheet (emergency medication)

Privacy Statement
The Department of Education and Training (DET) is collecting this personal information for the purpose of enabling school staff to administer the necessary emergency medication to your child while at school or during school-related activities. This information will only be accessed by authorised departmental employees, including school staff and State Schools Nursing Services. In accordance with section 426 of the Education (General Provisions) Act 2006 (regarding student’s personal information) and the Information Privacy Act 2009 (parent/carer’s personal information) this information will not be disclosed to any other person or body unless you have given DET permission or DET is required or authorised by law to disclose the information.

This form is a record of a parent/carer’s request for the school to administer prescribed emergency medication to their child. It is also designed to record the administration of this medication to a student during school hours or school-related activities. For students who require more than one medication, a separate form will need to be completed for each additional medication. More rows may be added to Section 2 if required. The student's Emergency Health Plan/Action Plan should be attached to the emergency medication record sheet/s for easy reference.

N.B. If the student’s dosage of medication changes (e.g. 20mg to 30mg), complete a new Administration of medication at school record sheet (emergency medication).

N.B. This form is NOT designed to record the administration of a school’s first aid emergency medication to a student with no previous diagnosis. In these instances, schools should follow the recording requirements of the First Aid procedure.

Instructions
On receipt of a student’s emergency medication from their parent/carer, confirm that:

- the parent/carer has completed Section 1 of this form.
- the parent/carer has provided the student’s Action Plan (e.g. ASCIA Anaphylaxis Action Plan, Asthma Action Plan).
- the medication container has a valid pharmacy label which includes the name of the prescribing health practitioner to confirm that it is prescription medication.
- the pharmacy label instructions match Section 1.

During administration
Follow the instructions on the student’s relevant health plan (e.g. Emergency Health Plan, Asthma Action Plan, ASCIA Anaphylaxis Action Plan).

After administration:
- Complete Section 2.
- Contact the parent/carer to advise them that emergency medication has been administered and the actions the school is taking to support the student.
Section 1 – Details of emergency medication which may be required to be administered by school staff (Parent/Carer to complete)

<table>
<thead>
<tr>
<th>Student name</th>
<th>Date of birth</th>
</tr>
</thead>
<tbody>
<tr>
<td>Parent/carer name</td>
<td>Contact phone number</td>
</tr>
</tbody>
</table>

I hereby request that school staff administer the following emergency medication to my child, if required, during school or school-related activities, as specified in this section.

<table>
<thead>
<tr>
<th>Name of medication</th>
<th>Dosage (e.g. 1 tablet)</th>
<th>Route (e.g. oral)</th>
<th>Indications for use (e.g. instructions for when and how this medication is to be administered)</th>
</tr>
</thead>
</table>

Additional information

Parent/carer signature

Section 2 – Record of administration of a student’s prescribed emergency medication (School use only)

<table>
<thead>
<tr>
<th>Date</th>
<th>Time</th>
<th>Dose given</th>
<th>Emergency services contacted</th>
<th>Outcome</th>
<th>Signature</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
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<td></td>
</tr>
</tbody>
</table>

☐ Parent/carer has collected unused medication that is no longer required to be administered at school.

Uncontrolled copy. Refer to the Department of Education and Training Policy and Procedure Register at [http://ppr.det.qld.gov.au](http://ppr.det.qld.gov.au) to ensure you have the most current version of this document.
Infection Control

The workplace is a common site for the spread of infectious diseases.

This may be because:
- There are a large number of people in close contact on a daily basis
- People come to work when they are sick (solder on!)
- Symptoms may not be present during infectious period – Asymptomatic
- There are an increased number of non-vaccinated people in the workplace e.g. conscientious objectors or vaccination has lapsed / booster required.
- There is no requirement for a staff member to disclose the nature of their illness.

Because of these factors, the Department adopts Standard Precautions – which is the assumption that all blood and body fluids are infectious.

Other issues:
A number of infectious diseases may impact on a healthy pregnancy. ALL staff should be aware of this as you may have a pregnant work colleague, family member or friend who may be impacted by an infectious disease that could have been easily prevented. Refer to DET procedure Pregnancy in the Workplace: http://ppr.det.qld.gov.au/corp/hr/management/Pages/Pregnancy-in-the-Workplace.aspx

Below are the aspects to effective infection control:

What to remember:
Stay home when unwell
Be aware of your immunity status to common infectious diseases
Prevent the spread of disease through standard precautions and immunisation and other methods of infection control. Effective hand-washing is one of the most important factors in preventing the spread of disease.

DET provides a Flu Vaccination Program each year – for further information visit the Health Promotion website: http://ppr.det.qld.gov.au/education/community/Pages/Management-of-Prescribed-Contagious-Conditions.aspx
### Time out

Some medical conditions require exclusion from school or child care to prevent the spread of infectious diseases among staff and children. This poster provides information on the recommended exclusion periods for infectious conditions and will assist medical practitioners, schools, preschools and child care centers to meet the requirements of the Public Health Act 2005.

<table>
<thead>
<tr>
<th>Condition</th>
<th>Exclusion of case (person with infection)</th>
<th>Exclusion of contacts (person exposed to the case with the infection)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Chickenpox (varicella)</td>
<td>Exclude until all blisters have dried. This is usually at least five days after the rash first appeared in non-immunised children, and less in immunised children.</td>
<td>Any child with an immune deficiency (for example, leukaemia) or receiving chemotherapy should be excluded for their own protection. Otherwise, not excluded. Exclude any pregnant woman who is, or is presumed to be susceptible.</td>
</tr>
<tr>
<td>Cold sores (herpes simplex)</td>
<td>Not excluded if the person can maintain hygiene practices to minimise the risk of transmission. If the person cannot comply with these practices (e.g. because they are too young), they should be excluded until the sores are dry. Sores should be covered with a dressing, where possible.</td>
<td>Not excluded.</td>
</tr>
<tr>
<td>Conjunctivitis</td>
<td>Exclude until discharge from eyes has ceased unless non-infectious conjunctivitis.</td>
<td>Not excluded.</td>
</tr>
<tr>
<td>Cytomegalovirus (CMV)</td>
<td>Exclusion not necessary.</td>
<td>Not excluded.</td>
</tr>
<tr>
<td>Diarrhoea and/or vomiting (including amebiasis, campylobacter, cryptosporidium, giardia, rotavirus, salmonella, viral gastroenteritis)</td>
<td>Exclude until there has not been a loose bowel motion for 24 hours. Exclude staff whose work involves food handling until they have had no diarrhea or vomiting for 48 hours. If there are more than two cases with loose bowel motions in the same centre or a single case in a food handler, notify your nearest public health unit.</td>
<td>Exclude according to public health unit requirements.</td>
</tr>
<tr>
<td>Diphtheria</td>
<td>Written medical clearance is required confirming the virus is no longer present in the child's bowel motions.</td>
<td>Not excluded.</td>
</tr>
<tr>
<td>Enteroitis 7A (EV7A)</td>
<td>Exclusion not necessary.</td>
<td>Not excluded.</td>
</tr>
<tr>
<td>Neurological disease</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Glandular fever (Epstein Barr virus (EBV), mononucleosis)</td>
<td>Exclude until the person has received appropriate antibiotic treatment for at least four days. Exclude until all blisters have dried.</td>
<td>Not excluded.</td>
</tr>
<tr>
<td>Haemophilus influenzae type B (Hib)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Head, foot and mouth disease</td>
<td>Exclusion is not necessary if effective treatment is commenced prior to the next attendance day (i.e. the child does not need to be sent home immediately if head lice are detected). Exclude until medical certificate of recovery is received and until at least seven days after the onset of jaundice.</td>
<td>Not excluded.</td>
</tr>
<tr>
<td>Hepatitis A</td>
<td>Exclusion not necessary.</td>
<td>Not excluded.</td>
</tr>
<tr>
<td>Hepatitis B</td>
<td>Exclusion not necessary.</td>
<td>Not excluded.</td>
</tr>
<tr>
<td>Hepatitis C</td>
<td>Exclusion not necessary.</td>
<td>Not excluded.</td>
</tr>
<tr>
<td>Influenza and influenza-like illness</td>
<td>Exclude until well.</td>
<td>Not excluded.</td>
</tr>
<tr>
<td>Measles</td>
<td>Exclude for four days after the onset of the rash.</td>
<td>Immune contacts are not excluded. Susceptible contacts should be excluded until 14 days after the onset of the rash in the last case occurring in the facility. Immunised young children or staff should be excluded (regardless of their vaccination status) until 14 days after the onset of the rash in the last case occurring in the facility.</td>
</tr>
<tr>
<td>Condition</td>
<td>Exclusion of case (person with infection)</td>
<td>Exclusion of contacts¹ (person exposed to the case with the infection)</td>
</tr>
<tr>
<td>-----------------------------------------------</td>
<td>------------------------------------------</td>
<td>-------------------------------------------------------------------</td>
</tr>
<tr>
<td>Meningitis (bacterial)</td>
<td>Exclude until well and has received appropriate antibiotics¹</td>
<td>Not excluded.</td>
</tr>
<tr>
<td>Meningitis (viral)</td>
<td>Exclude until well.</td>
<td>Not excluded.</td>
</tr>
<tr>
<td>Meningococcal infection¹</td>
<td>Exclude until appropriate treatment has been completed.</td>
<td>Not excluded. Contact a public health unit for specialist advice about antibiotics and/or vaccination for people who were in the same room as the case.</td>
</tr>
<tr>
<td>Molluscum contagiosum</td>
<td>Exclusion not necessary.</td>
<td>Not excluded.</td>
</tr>
<tr>
<td>Mumps</td>
<td>Exclude for nine days after onset of swelling.</td>
<td>Not excluded.</td>
</tr>
<tr>
<td>Norovirus</td>
<td>Exclude until they have not had any diarrhea of vomiting for 48 hours.</td>
<td>Not excluded.</td>
</tr>
<tr>
<td>Parvovirus (erythema infectiosum, fifth disease, slapped cheek syndrome)</td>
<td>Exclusion not necessary.</td>
<td>Not excluded (pregnant women should consult their medical practitioners).</td>
</tr>
<tr>
<td>Pertussis (whooping cough)</td>
<td>Exclude for at least 14 days from onset of symptoms and case has recovered. Written medical clearance from doctor or public health unit is required to return to child care/school, confirming child is not infectious.</td>
<td>Contact a public health unit for specialist advice about excluding unvaccinated and incompletely vaccinated contacts.</td>
</tr>
<tr>
<td>Poliomyelitis</td>
<td>Exclude not necessary.</td>
<td>Not excluded unless considered necessary</td>
</tr>
<tr>
<td>Ringworm, tinea, scabies</td>
<td>Exclude until the symptoms have disappeared and have been treated.</td>
<td>Not excluded.</td>
</tr>
<tr>
<td>Roseola</td>
<td>Exclude not necessary.</td>
<td>Not excluded.</td>
</tr>
<tr>
<td>Rubella (German measles)²</td>
<td>Exclude until fully recovered or for at least four days after the onset of rash.</td>
<td>Not excluded. (female staff of childbearing age should check their immunity to rubella with their doctor).</td>
</tr>
<tr>
<td>School sores (Impetigo)</td>
<td>Exclude case until has received appropriate antibiotics for at least 24 hours. Sores are not contagious if covered, or after the child has taken antibiotics for 24 hours. Weeping or crusted sores on exposed areas should always be covered with a waterproof dressing until at least 24 hours after antibiotics commenced and for as long as practical.</td>
<td>Not excluded.</td>
</tr>
<tr>
<td>Shigellos</td>
<td>Exclude until diarrhea has stopped and two samples taken at least 24 hours apart have tested negative.</td>
<td>Not excluded.</td>
</tr>
<tr>
<td>Streptococcal sore throat (including scarlet fever)</td>
<td>Exclude until well and has received antibiotic treatment¹ for at least 24 hours.</td>
<td>Not excluded.</td>
</tr>
<tr>
<td>Thrush (candidiasis)</td>
<td>Exclude not necessary.</td>
<td>Not excluded.</td>
</tr>
<tr>
<td>Tuberculosis (TB)³</td>
<td>Written medical clearance is required from Queensland Tuberculosis Control Program to return to child care/school, confirming child is not infectious.</td>
<td>Not excluded.</td>
</tr>
<tr>
<td>Typhoid, paratyphoid</td>
<td>Exclude until diarrhea has stopped and two consecutive samples taken at least one week apart have tested negative.</td>
<td>Not excluded unless considered necessary by public health unit.</td>
</tr>
<tr>
<td>Whooping cough – see pertussis</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Worms</td>
<td>Exclude if loose bowel motions present.</td>
<td>Not excluded.</td>
</tr>
</tbody>
</table>

Notes:
- The definition of 'contact' will vary between diseases and is sometimes complex. If concerned, contact your local public health unit.
- Diarrhoea: the definition is two or more consecutive bowel motions that are looser and more frequent than normal or escapes a child's nappy.
- Doctors should notify the local public health unit as soon as possible if children or staff are diagnosed with these conditions.
- Appropriate antibiotic treatment: the definition will vary between diseases. If concerned, contact your local public health unit.
- Observing the exclusion period meets the intent of the Public Health Act 2005 for a person to be not infectious.

For further information contact your nearest public health unit at http://www.health.qld.gov.au/cdcg/contacts.asp

b) Incident and Hazard Reporting

The recording and reporting of incidents and hazards is the responsibility of each employee. Once the incident or hazard has been recorded an investigation of workplace incidents and hazards will be conducted if required and then managed by the supervisor and/or WHSO.

As an employee you should:

For incidents:

- Immediately complete an incident report if you receive an injury at work, suffer a work caused illness or experience a ‘near miss’
- Seek advice from your WHSO or WH&S Consultant if you need to complete an incident report for yourself or another staff member.
- Report any discomfort before it becomes an injury
- Report any injury/illness not sustained at work that might effect you at work

The process for recording staff incidents is as follows:


The MyHR WH&S solution can also be accessed via the ‘Quick links’ drop down box which is located on the OnePortal home page.

A fact sheet on ‘Recording an Incident in MyHR WH&S’ is attached (See Appendix 3). Alternatively you can access informative tutorials on OneChannel - https://staff.learningplace.eq.edu.au/OneChannel/Pages/default.aspx

Training & ECEC Staff – Please complete an Aurion WH&S Work Injury/Incident Report (EVO10) form, and return to your supervisor and/or WHSA. An EVO10 form is attached for your reference (See Appendix 4) and can also be found at:


If you are having difficulties locating or filling out the form required, please consult with your supervisor for assistance.

The process for recording minor student injuries is: With Junior and Senior services

For hazards:

EQ Staff can also use the MyHR WH&S Solution to record hazards. For further information on how to access and record hazards in the MyHR WH&S Solution, please visit:

OneChannel at: https://staff.learningplace.eq.edu.au/OneChannel/Pages/default.aspx for tutorials.


If you are having difficulties locating or filling out the form required, please consult with your supervisor for assistance.

(New employees when they identify hazards should access the Maintenance log on the Gympie High home page or seek assistance from their Supervisor for forms etc)
c) Workers’ Compensation

WorkCover Queensland is an insurance organisation that determines liability for compensation claims for employees who sustain work-related injuries and illness in Queensland.

Under the Workers’ Compensation and Rehabilitation Act (2003):

- Compensation includes the payment of reasonable medical, hospital and rehabilitation expenses as well as wages and lump sum payments.
- Workers’ compensation entitlements are administered on a “no fault” basis. This means that claims for statutory entitlements can be made regardless of who or what caused the injury/illness, as long as the injury was sustained as a result of your work, and you did not wilfully cause injury to yourself.
- Being injured doing something at work outside your normal role does not necessarily preclude you from making a claim, as WorkCover will consider each claim on the evidence available.
- You may claim for the aggravation of a pre-existing injury or illness.
- ‘Journey Claims’ for injuries/illnesses sustained travelling between work and home (outside the fence line of your property) may be claimed.
- ‘Recess Claims’ for injuries/illnesses sustained during an ordinary recess break from work may be claimed.
- The legislation excludes claims for psychological/psychiatric illness that are determined as being a result of reasonable management action being taken in a reasonable way.

If you believe you are injured at work or suffer an illness caused by work, you are entitled to lodge a claim with WorkCover Queensland. Employees should lodge a claim through their work unit with an approved workers’ compensation medical certificate. A slight injury sustained today may have unforeseen effects over the long term, so if you are concerned about a potential future injury or illness, you can lodge a WorkCover claim and write ‘Notification Only Claim’ across the top of the form.

To make an application you should:

- Immediately visit your doctor to seek appropriate medical treatment
- Obtain a workers’ compensation medical certificate from your doctor
- Advise your Supervisor of your injury/illness and absences from work
- Record the Incident on the MyHR WH&S Solution
- Complete the WorkCover Claim Form as soon as practicable after injury

WorkCover Queensland will make a decision on your claim which either you or DET can appeal.

Further advice and forms are available at:


Fact sheets on workers’ compensation claim processes are available at:

d) Return to Work Program

Workplace rehabilitation is a process for assisting employees during their recovery from injury or illness to achieve an early, safe and sustained return to meaningful and productive work. The Department facilitates workplace rehabilitation for all employees with accepted WorkCover claims. Injured employees who do not have an accepted WorkCover claim may be provided rehabilitation, where operationally reasonable.

Workplace Rehabilitation may involve:

- Temporary modification of the employee’s duties, environment, hours and days.
- Early intervention – this includes the early contact with an injured employee and their treating doctor to discuss leave, insurance and rehabilitation options.
- Development of strategies to decrease lost time and reduce the possibility of further injury.

All rehabilitation programs are based on available medical advice and are developed in consultation with the employee, their treating medical practitioner, their supervisor, the insurer (WorkCover Queensland or QSuper) and the Rehabilitation and Return to Work Coordinator (RRTWC).

More information can be found at:

The Rehabilitation and Return to Work Coordinator (RRTWC) is, For Teachers Fran Scanlan and for Support Staff is Rae Gibb.

The role of a Rehabilitation and Return to Work Coordinator is to:

- Make early contact with the injured/ill employee
- Advise the injured/ill employee of their entitlements
- Coordinate the support provided to injured/ill employees during their recovery and return to work
- Consult with the injured/ill employee, treating doctor/s, health care professionals, supervisor and the relevant insurer (e.g. WorkCover Queensland or QSuper)
- Negotiate suitable duties and develop rehabilitation plans
- Maintain confidential records

An accredited RRTWC must coordinate all rehabilitation programs for employees. To become a RRTWC you must complete an accredited training course and maintain accreditation through training at least once every 3 years.

Further information is available at:

Sick Leave/QSuper

Employees with non work-related injuries can access their sick leave balance, in accordance with the:


Employees, who exhaust their sick leave balance and have a further 2 calendar weeks of sick leave with no pay, may apply to access Income Protection Benefits to receive weekly payments of 75% of their wage from QSuper, in accordance with QSuper’s eligibility criteria.

To be eligible for income protection benefits, you need to be a permanent or temporary employee who makes standard member contributions to your QSuper superannuation account. Your QSuper superannuation account type
must include an income protection insurance component. Income Protection Benefits are not available to casual employees.

Employees who have a pre-existing illness/injury and have been employed with the Department for less the 10 years may not be eligible for QSuper/Income Protection Benefits.


To find out if you have income protection insurance, check the details on your QSuper welcome letter (or latest benefit statement) or call QSuper on 1300 360 750.


e) Employee Assistance Program

The Department of Education and Training’s Employee Assistance Program (EAP) includes:

- Free of charge short-term confidential counselling for all employees with work and non-work related problems with a qualified counsellor.
- Appointments can be made outside of business hours without the need to tell anyone at your workplace.
- Employees are entitled to consult with the EAP service during normal working hours.
- Consultation with your Supervisor would be necessary if you wish to visit the EAP Service during working hours.
- The service allows for at least 3 free ½ to 1 hour sessions a year per employee.
- All conversations with the counsellor are confidential and any notes made by the professional counsellor are kept separately and securely by the EAP Service. The only exception is where access is required by law or if duty of care concerns require disclosure and ensure an individual’s safety.
- Types of issues that might necessitate counselling include:
  - Workplace change
  - Workplace discrimination, bullying and harassment
  - Conflict with fellow workers
  - Stress or depression
  - Family relationships
  - Personal tragedy or trauma
  - Drug and alcohol problems

If you are in any doubt about your needs you should arrange a consultation.

For further information contact your Supervisor/Manager, your RRTWC or the EAP. For EQ employees, please contact your regional Employee Advisor (further information be found at http://education.qld.gov.au/health/contacts/contacts-ea.html) For TAFE and Central Office Employees, please contact the external EAP service on telephone: 1300 360 364 or visit the following site: http://education.qld.gov.au/health/employee.html
Workplace Bullying

Workplace bullying or any form of harassment is unacceptable and is not tolerated by DET.

Employees should not be subject to any behaviour that could reasonably be regarded as harmful, threatening, demeaning, humiliating or intimidating within the work environment. All employees are expected to treat others with respect and consideration for their wellbeing. Principal 1.5 of the Code of Conduct for the Queensland Public Service stresses this obligation.

If you believe you have been subject to workplace bullying, contact a manager in your work area. If you wish to discuss the matter with someone outside of your immediate work team or area, you may contact:

- Ethical Standards Unit
- The Employee Assistance Program
- Organisational Health Unit, Central Office
- A union representative
- Workplace Health and Safety Queensland

Further information is available on the Workplace Health & Safety Queensland website at:


Stress

People react differently to stressors in work situations. Some people may feel pressure or anxiety, while others do not feel any stress reaction at all. Stress isn’t necessarily a “bad” thing, as a certain amount of stress is necessary for us to function well. However, too much stress may affect the performance and/or the health of some individuals.

Stressors aren’t always obvious but can be cumulative. Stress can add to any stress you are experiencing at work. You can get accustomed to living with higher and higher levels of stress. If this happens without effective methods to manage the stress you may start to experience physical and psychological symptoms that can lead to a ‘break-down’.

The effect of having “stress” reactions may occur over a long period of time. Signs may include:

Difficulty Concentrating
* Short attention span
* Memory problems

Easily Agitated
* Crying
* Easily irritated

Overly Sensitive
* Inability to accept critical Feedback

Behaviours
* Unable to respond to change

If you believe you have any of these symptoms outside of your ‘usual’ behaviour you should contact the Employee Assistance Service. Should you see changes in fellow employees that might suggest they are not managing their levels of stress you should discuss the matter with your Supervisor, Rehabilitation and Return to Work Coordinator and/or an Employee Advisor through the Employee Assistance Program.

For further information on a range of support organisations, visit the following site:
f) Manual Tasks

Manual Tasks are any activities requiring the use of “force” by a person to lift, lower, push, pull, carry or otherwise move, hold or restrain any object or person. Manual tasks, with their broad variety of associated potentials for risk, such as repetition and duration combined with awkward postures, are responsible for a large number of injuries and long-term health problems.

The risk with manual handling is unlike many other risks in the workplace. Where a knife is used incorrectly an injury (pain) will occur. Next time you are likely to use the knife correctly. With incorrect manual handling (lifting objects incorrectly or ones that are too heavy) there is usually no immediate pain so the worker continues with the practice.

It can often be years later that permanent damage becomes evident. The insidious nature of the injury (up to 70% of damage to the spine can occur without pain) makes this a challenge for everyone.

Supervision alone cannot protect you from preventable manual handling injuries; it is your responsibility to apply correct manual handling techniques. Depending on your role, you may need to know how to:

- Adopt good working postures
- Use handling/lifting techniques that can lower the risk of injury occurring
- Reduce repetition in tasks
- Use ladders correctly

If you are in any doubt about a manual handling job and/or your level of training ask your supervisor.

Control Measures

Examples include:

- A 'minimum lift' approach to all tasks
- Use of hoists and trolleys for heavy loads (must be accessible to the worker)
- Storing objects on shelves above knee and below shoulder level
- Good housekeeping to ensure proper storage and clear access can occur
- Arranging for goods to be delivered to specific sites on the workplace to avoid double handling
- Having a table available at reception for parcel delivery to minimise lifts from floor level
- Reviewing the physical work environment (e.g. ensuring that you have room to perform the lift)
- Advise your supervisor if you are feeling undue discomfort/pain/fatigue
- Utilising electronic documents to eliminate or reduce the need to move large volumes of hard copy documents.

Further information and resources may be found at:

g) Ergonomics

Repetitive and prolonged use of a computer and mouse can cause musculoskeletal injury. It is therefore important that all employees ensure their workstation is set up appropriately.

A well-designed workstation can eliminate some office health hazards. Elements of good design include appropriate:

- Chair
- Lighting
- Noise level
- Screen
- Keyboard
- Document position

It is important to recognise that even with a great workstation set up, you can still experience pain or discomfort. When seated, do all you can to maintain the posture described in the fact sheet below (unless you have other medical advice) and change posture frequently. Remember move: stand, walk and stretch!

Resources

h) Slips, Trips and Falls

Slip, trip and fall injuries are the Department's second most prevalent cause of injury (after manual handling). Slip, trips and fall injuries cause almost 25% of the Department's injuries and just over 20% of our statutory costs (WorkCover Qld).

Slip, trip and fall injuries are often caused by one or more of the following:

- Loose, irregular surfaces such as gravel, shifting floor tiles and uneven sidewalks
- Oil, grease, water and other liquids making surfaces slippery
- Stairs, especially those that are taller, shorter, have a smaller tread depth, or are otherwise irregular
- Obstructed aisles or walkways present tripping hazards or require frequent changes of direction
- Insufficient light
- Shoes with smooth soles
- Moving too fast
- Carrying items that obstruct vision
- Inattention or distractions that interfere with your awareness

The simplest way of preventing slips, trips and falls in the workplace is to have a risk management approach which identifies, assesses, controls, monitors and reviews slip, trip and fall hazards in the workplace.

Refer to Slips, Trips and Falls Checklist and Brochure at the website below.


Additional information may be found at:

i) Road Safety

Many departmental staff are required to drive as part of their role, on a regular basis, over long periods of time and in remote areas.

For most people driving is an everyday activity, we are therefore aware of the risks associated with driving. The following list outlines driver related risks that alone or in combination increase both the likelihood and the severity of an incident occurring. The risks include:

- Speed
- Drugs and Alcohol
- Fatigue
- Mobile Phone Use
- Adverse Conditions
- In-vehicle Distractions

Before undertaking work related travel it is important to identify and assess the risks related to that travel, identify and implement control measures to eliminate or reduce the identified risk. You should ensure that your manager or a colleague is aware of your travel and the route taken and that you check in with them upon arrival.

The Department has a library of toolbox talks available to be presented and discussed at team meetings. The topics available include:

- Work related road safety
- Fatigue
- Speeding
- Road Rage
- Reversing
- Close following
- Driver distraction
- Mobile phone use
- Alcohol
- Drug driving
- Low speed manoeuvring and parking
- Festive Season Travel
- Time Pressure

For more information in relation to the toolbox talks please contact your Health & Safety Consultant.

8. GENERAL WORKPLACE HEALTH AND SAFETY INFORMATION

(This space is to add any additional WH&S information that may be relevant to your work area)

Insert here any additional relevant information relating to your school or workplace. This might include specific rules, policies or procedures. For example:

- Classroom ban on ‘hot’ appliances
- High risk areas to watch on playground duty
- Sun-safe dress
- Suitable footwear
- Out-of-bounds areas for students
- Vehicle movements
- Action to take if an unidentified person is on campus
Electrical Safety

The potentially fatal consequences of electrical incidents require specific procedures be adhered to.

Common Electrical Hazards in workplaces:

- Frayed, damaged or perished electrical leads;
- Cracked electrical equipment covers;
- Broken switches and power points;

These can result from general wear and tear, misuse, faulty equipment or vandalism.

All incidents involving electricity must be reported and recorded e.g. in the MyHR WH&S Solution or your workplace recording system.


Where an electrical item is faulty immediately cease using the item, place a ‘faulty’ tag close to the plug and report to Mark Rogers.

Where a power outlet or switch is faulty it should also be reported immediately to (insert name).

Where there is any possibility of electrocution:

- Isolate the immediate area
- Turn off the power at the switchboard if feasible
- Immediately advise Mark Rogers
- Maintain supervision of the area at all times until an electrician has remedied the fault.

The following practices will assist in preventing electrical incidents:

- Good general care and maintenance of electrical equipment
- Regular visual inspections of cords, electrical items, switches and power outlets
- Reporting faults
- Reporting ‘tripping’ of safety switches or circuit breakers.

Never bring electrical equipment to school/workplace without the approval of Damien White

**Very Important:** Any staff member who receives an electrical shock must seek immediate medical attention.

FURTHER INFORMATION

- Electrical Safety Office 1300 650 662
- www.eso.qld.gov.au
- www.whs.qld.gov.au
Equipment (Plant)

The term 'plant' applies to a wide range of items:

- Mechanical ventilation systems
- Photocopyers
- Screwdrivers/Hammers
- Electric Drills
- Office Guillotine
- PPE (Safety goggles, ear muffs)
- Motor Vehicles

Health and safety issues with plant

Different pieces of plant present different risks. Very serious injuries can be sustained by:

- Cutting/Stabbing
- Electrocuton
- Fire/Explosion
- Noise/Vibration
- Entanglement
- Crushing

To avoid injury when operating plant:

- Ensure you are trained to use the plant/equipment
- Use the plant in the manner for which it was intended (the right tool for the job)
- Follow the 'standard operating procedures' and instructions in the manual
- Never use blunt or defective tools
- Never operate plant when there is a risk of entanglement from loose clothing, neck tie, jewellery or hair
- Ensure regular maintenance of plant/equipment

Look for more information at:


Chemicals

The best guide to assist you in managing chemicals is called a Safety Data Sheet (SDS). It describes:

- The product
- Properties and uses
- Health hazard information
- Precautions for use
- Safe handling information
- First aid instructions
- Methods of disposal

All substances need to be regarded as potentially hazardous to some staff at a workplace. You should make yourself familiar with the properties of any substances you use at your workplace.

This is achieved by reading the label or the SDS. A SDS for each hazardous substance will be found near where it is used and in a central register at the office. The SDS will state on the top of the first page whether or not the substance is a designated 'hazardous substance'.

It is legislated that for each hazardous substance at a workplace the employer is required to have a SDS and risk assessment completed before use. Never bring chemicals/hazardous substances to work without prior approval of your Supervisor.


**Off Site Activities**

Remember if you are visiting an off site location discuss with your manager any risks that may be involved (i.e. construction sites) and any safety measures or PPE that maybe required.

You should also consult with the location you are visiting to ensure that all safety inductions and requirements for the location have been met.

**Noise**

Noise Induced Hearing Loss is not a new problem. 37% of all hearing loss in Australia is due to excessive levels of noise.

**Loud noise affects your general health, it may cause:**

- Irritability and Headaches;
- Aggression and Stress;
- Reduced immune response;
- Gastric ulcers;
- Raised blood pressure and accelerated heart rate;
- Loss of clarity of vision, colour perception and night vision; and
- Heart disease.

**Once your hearing is damaged it will NEVER come back**

- there is no surgery
- there are no implants or transplants
- there is no repair or healing over time
- there is no medication.

**Hearing aids** magnify/increase the volume of the sounds you do hear BUT they CANNOT bring back the sounds you are missing.

Many people suffering from a degree of noise induced hearing loss suffer from tinnitus. **Tinnitus** is a permanent ringing or buzzing sound in the ears.

Communication and enjoyment of television and radio are more difficult when you have tinnitus, you are unable to understand what is said or it is distorted due to the ringing/buzzing sounds.

**Leisure Noise**

It is not just noise at work that can damage your hearing, noise you are exposed to in your leisure time can also be harmful.

To reach the maximum safe daily noise limit, it takes on average:

- using a lawnmower: 48 minutes
- using a leaf blower: 1.5 minutes
attending a rock concert 8 seconds
personal stereo at max volume 15 minutes
riding a motorbike 4.5 minutes
using a chainsaw 14 seconds

Hearing protection (earmuffs and earplugs) is not just for the workplace.

Remember to protect your hearing whenever you are around loud noise.

MP3 Players

iPods and other MP3 players produce very loud levels of noise directed straight into the ear.

Experts recommend that to protect your hearing, you should listen to iPods and other MP3 players for no more than 1 hour per day at 60% of maximum volume.

Hearing damage diminishes quality of life regardless of how it is caused, so protect your hearing ... you won't get a second chance.

Voice Care

We use and rely on our voice throughout our lives, so it is important to look after it. Minimising strain to your voice at work may simply require changing the layout of the classroom/workplace, organising a system of times when students/staff are silent, times when they may talk one-on-one and times when they may talk in a group and/or setting a routine of noisy activities separated by quiet activities. Set the rules so that you can easily attract students' attention without resorting to shouting, e.g. clapping hands.

For more information, visit the following site for the Voice Care fact sheet:

You can work on reducing the symptoms of voice strain by using strategies such as:

- Drinking water frequently throughout the day;
- Being conscious of your posture and breathing when speaking (back straight, head up and chin level with the ground);
- Sipping water, swallowing or yawning whenever you feel the urge to cough or clear the throat;
- Sucking on a sweet, but avoiding medicated lozenges, which may irritate your throat further;
- Consciously suppressing the urge to cough or clear the throat.

If you sustain a voice injury, you should consult your doctor for treatment and possible referral to a specialist ENT (Ear Nose and Throat) doctor or a speech pathologist. If these specialists identify that you need a voice amplifier to assist your recovery and/or minimise the risk of further vocal injury, you may be able to access a personal amplifier through the Central Office Organisational Health Unit.

For further information, refer to the Voice Amplifier Guidelines on the following site:
Asbestos

Asbestos is the common term used to describe a naturally-occurring fibrous mineral that was used extensively by Australian industry because of its durability, fire resistance and excellent thermal insulating properties. Asbestos was used in a wide range of products manufactured between the 1940s and the 1980s. Asbestos fibres were an additive often mixed into another base compound (such as cement) to enhance physical properties of the material.

All forms of asbestos have been nationally banned from use since 31 December 2003. However, the ban does not mean that all asbestos installed prior to this date needs to be removed. The national ban prohibits the manufacture and importation of all asbestos based products.

These prohibitions do not apply if the work involving asbestos is any of the following:

- genuine research and analysis
- sampling and identification in accordance with the WHS Regulations
- maintenance of, or service work on, non-friable asbestos or ACM, fixed or installed before 31 December 2003, in accordance with the WHS Regulations
- removal or disposal of asbestos or ACM, including demolition, in accordance with the WHS Regulations
- transport and disposal of asbestos and asbestos waste in accordance with jurisdictional legislation
- demonstrations, education or practical training in relation to asbestos or ACM
- display, or preparation or maintenance for display, of an artefact or thing that is, or includes, asbestos or ACM
- management in accordance with the WHS Regulations of in-situ asbestos that was installed or fixed before 31 December 2003
- work that disturbs asbestos during mining operations that involve the extraction of or exploration for a mineral other than asbestos
- laundering asbestos-contaminated clothing in accordance with the WHS Regulations
- where the regulator approves the method adopted for managing risk associated with asbestos.

Although the ultimate goal of this prohibition is for all workplaces to be free of asbestos, it is only when these materials are being replaced or where they present a health risk that non-asbestos alternatives must be used. Caution needs to be taken when working with buildings constructed prior to 1990 or newer buildings that may have used recycled materials and may have reinstated old plant containing ACM gaskets and/or linings.

What is asbestos-containing material (ACM)?

The term ‘asbestos-containing material’ (ACM) refers to any material, object, product or debris that contains asbestos. ACM can take several physical ‘forms’, depending on its method of manufacture and application. The most common form is asbestos-cement sheet, which was manufactured in various profiles including flat, corrugated and profiled sheets. Other forms of ACM include adhesives, vinyl sheeting and tiles, loose fill insulation, membranes, mastics, woven textiles, sprayed coatings and moulded products.

Within the construction sector, ACM typically covers building materials such as roof sheeting, guttering and downpipes, exterior wall cladding including fasciae and eaves, internal wall sheeting, ceiling panels, fire doors and fireproof coatings, and floor coverings such as sheet vinyl flooring and vinyl tiles.

ACM also refers to insulating materials incorporated into building services plant and equipment such as air conditioning heater-bank insulation, lagging on steam and generator exhaust pipes, as well as lining and gaskets in some types of machinery.
What is an Asbestos Management Plan?

The health, safety and well-being of students and staff is the highest priority of the Department of Education and Training (DET). This commitment includes ensuring that any ACM found in department-owned facilities is managed in such a way as to minimise the risk to students, staff, service providers, parents/caregivers and other visitors to the site.

In the vast majority of cases, ACM is safe. If ACM is left undisturbed and is in a sound condition, studies show that it does not pose a health risk. An effective strategy for the management of asbestos-related matters and any associated potential risks to health and safety is to minimise the risk through the development of an Asbestos Management Plan (AMP).

Every facility with assumed or confirmed ACM requires an AMP to be in place and an Asbestos Register available for reference from BEMIR.

An awareness and understanding of these issues is essential to ensure that students, staff and visitors to the site are protected from possible exposure to asbestos.

DET has developed a generic AMP for its facilities titled, Asbestos Management Plan for DET Facilities and details:

- roles and responsibilities of all departmental staff for the reporting and management of ACM in Schools and other department-owned facilities
- processes for managing asbestos-containing material to ensure DET complies with the legislative requirements while ACM remains in buildings
- processes for managing an asbestos-related incident.

This plan must be readily accessible and available for consultation by building occupants, service providers (e.g. contractors and service personnel) and any other persons whose work or activities may have the potential to disturb ACM, either accidentally or intentionally.

**RESPONSIBILITIES**

The following key personnel are responsible for the implementation of the control measures discussed in this document.

**DET staff responsibilities**

- Adhere to departmental policies and procedures for the management of ACM.
- Inform the Building Manager or the Nominated Officer of any disturbance or concerns with any building materials.
  - Not allow service providers access to carry out work unless specifically authorised to do so by the Building Manager.
  - Not to undertake any work, however minor, without explicit approval of the Building Manager, e.g. hanging pictures on walls, installing new curtains, etc.
- Not to undertake ANY work on ACM including make safe repairs.
- Inform the Building Manager, Nominated Officer or the site’s Workplace Health and Safety Officer (where applicable) of any concerns in relation to health or asbestos management processes.
- Participate in yearly asbestos awareness sessions in Schools, and Regional Offices where facilities are known to have assumed and/or confirmed ACM.
Appendix (1): Risk Management Process

Step 1 – Identify Hazards

A hazard is anything with the potential to cause harm.

Hazard examples include:

- Zip Heaters (potential to burn)
- Hazardous chemicals (potential to poison)
- Frayed carpet (potential to trip)

Hazard identification includes:

- Consultation with workers, staff or specialists.
- Walk through inspections and audit checklists.
- Testing plant and equipment (as required).
- Reviewing past accidents and incidents.
- Reviewing product information (plant manuals, hazardous substances material safety data sheets).

Step 2 – Assess Risks

Risk is a combination of the severity of the consequences and the likelihood of an injury occurring. Likelihood or probability depends on the number of people exposed to the hazard and the amount of that exposure.

Staff not trained in risk management, tend to concentrate on risks that are likely to cause injury rather than considering the risks that could cause extreme consequences. Therefore in the above examples of hazards, the assessment of risk involves the weighing up of likelihood and consequences of:

- Being burnt by hot objects
- Poisoning
- Tripping.

Step 3 – Decide on Control Measures

Control measures may reduce the likelihood of injury and/or reduce the consequences (severity).

The control measure/s selected should:

- Adequately control exposure or eliminate the hazard;
- Not create another hazard;
- Allow staff to do their work effectively without undue discomfort or distress.

The ‘hierarchy of controls’ (see next page for details) is a very important tool in the management of risk. Control options must be considered in order from the top (elimination) down.

The higher on the list, the more reliable the control.

Step 4 – Implement Control Measures

Once selected, control measures need to be put into place. Implementing control measures usually involves an implementation plan and may involve:

- Developing work procedures
- Communication with the workers
- Providing training and instruction
• Supervision/enforcement.

Step 5 – Monitor and Review

After implementation, control measures need to be monitored and reviewed to determine whether:

• Chosen measures have been implemented as planned
• Chosen measures are effectively controlling the hazard
• The control measures have introduced any new hazards
• The control measures allow staff to effectively perform their work without undue stress.

The risk assessment should be reviewed when any of the following occur:

• Changed work procedures or environment
• New staff necessitating a review of skills
• Incidents or a ‘near miss’ occur
• Every 5 years in relation to hazardous substances
• Periodically as determined in the initial risk management process.
## Appendix (2): The Hierarchy of Controls Table

<table>
<thead>
<tr>
<th>Hierarchy of Controls</th>
<th>Priority Level</th>
<th>Details and Examples</th>
</tr>
</thead>
<tbody>
<tr>
<td>Eliminate</td>
<td>1st</td>
<td>If you eliminate the hazard you eliminate the associated risk. (E.g. removing diseased tree)</td>
</tr>
<tr>
<td>Substitution</td>
<td>2nd</td>
<td>Substitute the hazard with one that has a lower risk. (E.g. replacing a toxic solvent with a detergent, adopting a lower risk activity with the same outcome)</td>
</tr>
<tr>
<td>Isolation</td>
<td></td>
<td>Isolating the hazard from the person. (E.g. fencing around the car park, installing a noise barrier)</td>
</tr>
<tr>
<td>Engineering/Redesign</td>
<td></td>
<td>Engineering (redesign) involves changing the workplace, equipment or process. (E.g. storing material closer to work location, purchasing a trolley)</td>
</tr>
<tr>
<td>Administration</td>
<td>3rd</td>
<td>Admin controls should be used either in combination with control/s from above or as a temporary measure, where risk cannot be minimised by other means. They do not control the hazard, relying on the worker to continually comply with the ‘rules’. (e.g. signs)</td>
</tr>
<tr>
<td>Personal Protective Equipment (PPE)</td>
<td></td>
<td>PPE should be used either in combination with control/s from above or as a temporary measure, where risk cannot be minimised by other means. PPE does not control the hazard, relying on the worker to continually use and maintain the equipment properly. (e.g. rubber gloves, safety goggles, ear muffs)</td>
</tr>
</tbody>
</table>

*Often a combination of control methods will be the best option*

### Record Keeping

It is necessary to maintain appropriate records of the risk management processes that you have undertaken. This information can then be provided as evidence of a structured process being implemented which clearly outlines what you have considered and the control measures that have been subsequently implemented.
Selecting the correct hazard category helps to identify the primary cause, determine the appropriate controls and ensure accurate data recording and analysis within the MyHR WHS system.

<table>
<thead>
<tr>
<th>Hazard Categories</th>
<th>Examples</th>
</tr>
</thead>
<tbody>
<tr>
<td>Biological</td>
<td>Direct contact with blood, urine, faeces, saliva</td>
</tr>
<tr>
<td>Including exposure to blood and body substances and</td>
<td>Work caused illnesses e.g. Hepatitis B, measles</td>
</tr>
<tr>
<td>infectious diseases</td>
<td></td>
</tr>
<tr>
<td>Critical Incident</td>
<td>Lockdowns or evacuation</td>
</tr>
<tr>
<td>Death, intruders, violent persons</td>
<td>Fires (deliberately lit)</td>
</tr>
<tr>
<td>Energy Systems</td>
<td>Electricity including fires caused by electrical faults</td>
</tr>
<tr>
<td>Including gas, electricity, steam, hydraulic and kinetic</td>
<td>Gas including hot water systems, ovens, bottled gases</td>
</tr>
<tr>
<td>energy</td>
<td>Compressed air</td>
</tr>
<tr>
<td>Environment</td>
<td>Storms, floods, lightning fires, bushfires and other extreme weather events</td>
</tr>
<tr>
<td>Including weather, acts of nature, sun</td>
<td>Heat/cold</td>
</tr>
<tr>
<td>Facilities / Built Environment</td>
<td>Potholes, damaged walkways</td>
</tr>
<tr>
<td>Issues related to buildings and infrastructure,</td>
<td>Poor design of structure e.g. windows protruding into walkways</td>
</tr>
<tr>
<td>including fencing and grounds</td>
<td>Playground equipment</td>
</tr>
<tr>
<td>Machinery and Equipment</td>
<td>Industrial Design and Technology (Manual Arts)</td>
</tr>
<tr>
<td>Including all machinery and equipment types</td>
<td>machinery and equipment e.g. saws, grinders</td>
</tr>
<tr>
<td></td>
<td>Grounds maintenance machinery and equipment</td>
</tr>
<tr>
<td></td>
<td>Vehicles</td>
</tr>
<tr>
<td>Manual Tasks / Ergonomics</td>
<td>Repetitive tasks e.g. typing for long durations</td>
</tr>
<tr>
<td>Physical work that includes the following risk factors:</td>
<td>Manual handling e.g. lifting a heavy object</td>
</tr>
<tr>
<td>repetition, force, awkward postures, duration or</td>
<td>Awkward postures or doing a manual task for a lengthy period of time</td>
</tr>
<tr>
<td>vibration.</td>
<td></td>
</tr>
<tr>
<td>People</td>
<td>Violent, aggressive or bullying behaviour</td>
</tr>
<tr>
<td>Including where any person/student has been the</td>
<td>Slip, trips or falls</td>
</tr>
<tr>
<td>primary cause of an incident</td>
<td>Lack of training / competencies</td>
</tr>
<tr>
<td>Substances</td>
<td>Hazardous chemicals &amp; other substances/products</td>
</tr>
<tr>
<td>Hazardous chemicals and other substances and products</td>
<td>Asbestos e.g. potential exposure to asbestos containing material</td>
</tr>
</tbody>
</table>

What if more than one hazard category applies?

Choose the category that is the primary cause of the hazard i.e. the issue that will need to be addressed to prevent recurrences, e.g.:

a) A student spits deliberately on a staff member – choose ‘People’ as the hazard because it is the deliberate behaviour that has caused the incident and the behaviour that needs to be addressed. If the student accidentally dribbled on the staff member, then choose ‘Biological’ and address how exposure to bodily substances could be reduced.

b) A staff member trips on a crack on concreted pathway and falls over – choose ‘Facilities/Built Environment’ because the crack caused the fall and needs to be repaired. If the pathway had been well maintained and the fall was due to inattention/footwear etc, then you would choose ‘People’ because the pathway was not the primary cause of the fall.
Appendix (3)

Creating Healthier Workplaces

Recording an incident in MyHR WHS

This user guide is a step by step guide to assist people in recording incidents in the MyHR Workplace Health and Safety solution.

1. Go to "Quicklinks" on the bottom right hand corner of the OnePortal homepage. Click on the down arrow and scroll down to highlight MyHR WHS and then hit the green button with the right facing arrow.

2. At the MyHR WHS home screen, find the “Add New” box and click on the ‘Add Incident’ link. This brings up the "Incident Record" form.

3. Fill in all relevant fields. Please note that a yellow asterisk (*) indicates that the corresponding field is mandatory. Some fields also have hyperlinks to fact sheets for further content information to assist with decision making and classifications (definitions etc).

4. Near the bottom of the form, you will be required to select one or more incident types. This will generate a sub-form for each incident type you select. After you have made your selection you will need to scroll back up to the top of the form and click on the relevant tab (e.g. injury/illness, electrical, near miss etc ). Complete with the relevant information all required fields within each tab/sub-form.

5. Press Save. Do this regularly after entering data. Pressing Save will also submit information into the system and ensure data is not lost. It is suggested to save at the completion of each tab.

6. When you have completed and saved all information, move to the tab “Submit Incident for Review”. If you are happy with the information, check Yes and then press “Save”. If not, the form will sit with you until you submit it and progress it to a supervisor.

7. Once you have submitted the form for review, MyHR will send your supervisor an email prompting them to review the information.

8. If you have not correctly entered the information, when you press SAVE, a red error message will appear at the top of the page. Click on the error message for further details about the error. A red exclamation mark with a circle around it will appear next to the field/s that contains an error. You will need to ensure that all errors are corrected before the system will progress.

9. If there are multiple errors, press save after correcting each error in order to reload the page back to the other error message.

Further Assistance and Information

MyHR Workplace Health and Safety Help Desk is available on (07) 3404 8258

MyHR Workplace Health and Safety Training information is available at: http://oneportal.dea.qld.gov.au/Services/HumanResources/Projects/MyHR/Trainingandsupport/Pages/WHS.aspx

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Uncontrolled when printed
Appendix 4 –

MyHR WHS - Health and Safety Incident
Data Collection Form

Privacy Statement: The Department of Education, Training and Employment (DoE) is collecting personal health and safety incident information on this form in accordance with the Work Health and Safety Act 2011, the Work Health and Safety Regulation 2011, Electrical Safety Act 2002 (Qld), and/or Electrical Safety Regulation 2005. The information collected may be disclosed to third parties, including the Government Superannuation Office, Australian Tax Office, Workplace Health and Safety Queensland, Electrical Safety Office (Qld), WorkCover Queensland, industrial organisations, or other entities in accordance with, or where requested by law or industrial instrument. The information collected on this form will be manually entered into the MyHR Workplace Health and Safety Solution for review by a supervisor.

Note:

- This form is for data collection purposes only.
- The information collected is to be recorded within MyHR WHS as soon as reasonably practicable e.g. within 3 days of becoming aware of the incident.
- The form can also be scanned and attached to the MyHR WHS Incident record within investigation screens.
- This paper form is to be retained for 12 months at the workplace.
- Use of this form is to be in accordance with departmental procedure: Health and Safety Incident Recording, Notification and Management

Instructions: Legislation requires the reporting of a 'notifiable' workplace incident to Workplace Health and Safety Queensland (WHSQ) immediately after becoming aware that it has occurred. If you fail to report a notifiable incident, you may face penalties. It is not specified in legislation to report 'non-notifiable' incidents; however, WHSQ recommends that you record and investigate them so that you can prevent something similar from happening again. It also demonstrates that you are identifying hazards to manage risk.

NOTIFIABLE INCIDENTS -
- death,
- serious injury or illness (e.g. amputation, head injury, spinal injury, hospital admission), or
- a dangerous incident (e.g. electric shock, explosion, fire, release of hazardous substance)

HOW TO REPORT?
1. Immediately contact Workplace Health and Safety (WHSQ) by phone: 1300 362 128 to notify them of the incident.
2. WHSQ should provide a reference number for your case. Note that you contacted WHSQ and record the reference number in the 'Immediate actions taken' section of this form.
3. Complete all relevant information within this form and ensure the data is entered into MyHR WHS as soon as possible.

Not sure? – Check the full definitions within the procedure or phone 1300 362 128
WHEN TO USE THIS FORM:

This is not an official form but can be used to gather information for later entry into the MyHR WHS system. It can be used for:

- Operational convenience
- When an incident occurs away from the workplace (e.g. camps, fetes, sport etc.) or during out-of-hours work.
- For staff with limited access to MyHR WHS (e.g. cleaners, grounds maintenance staff).
- For visitors if necessary.
- System outage.

HOW TO USE THIS FORM?

1. This cover page is for information and advice.
2. Pages 1 - 3 must be completed as they record the details of the incident and the injured person.
3. If relevant, complete a subform (from page 4) for each ‘incident type’; electrical, security threat, motor vehicle, fire, environmental or near miss. Each incident type has its own ‘subform’.
   - e.g. for an injury sustained while driving a motor vehicle - complete pages 1-3 (which includes the ‘injury/illness’ details) and the ‘motor vehicle’ subform.
   - If more than one person sustained an ‘injury/illness’ as a result of the same incident, fill in a separate injury/illness form (pages 2-3) for each person. You do not need to complete separate forms for the incident (pages 1).
4. Record all available information.
5. Check that all mandatory fields (i.e. those marked with *) are completed.
6. Give the completed form to your location administration to complete data entry into MyHR WHS – (if you are not doing this yourself).

NEED HELP? – CONTACT REBECCA CREIGHTON THE MyHR HELPDESK on 3404 8258.
INCIDENT DETAILS

*Incident date: ___________________________ Incident Time: (24 hour HH:MM)
If the incident occurred at your school or base location you need ONLY complete the School/Base Location field.
If the incident did not occur at your school/base location then you need to complete the School/ Base Location field AND the Other Incident Location field.

*School/Base Location

Other Incident Location (address details):

*Summary of incident (approx. 20 words):

Detailed Description of Incident:

*Immediate Action Taken: (Including any Lockdown or Evacuation, Parents Contacted, First Aid Administered, Ambulance Called, Doctor/Out Patients or Hospitalisation, Workplace Health and Safety Queensland Notified & reference number, what was done to prevent this or something similar from happening again)

INCIDENT TYPES

INSTRUCTIONS: Select one or more incident types.

<table>
<thead>
<tr>
<th>Incident types</th>
</tr>
</thead>
<tbody>
<tr>
<td>☐ Injury/Illness</td>
</tr>
<tr>
<td>☐ Motor vehicle</td>
</tr>
<tr>
<td>☐ Electrical</td>
</tr>
<tr>
<td>☐ Fire</td>
</tr>
<tr>
<td>☐ Security threat</td>
</tr>
<tr>
<td>☐ Environmental</td>
</tr>
<tr>
<td>☐ Near miss</td>
</tr>
</tbody>
</table>

If ‘Electrical’ or ‘Environmental’ or ‘Fire’ or ‘Property/Plant/Equipment’ or ‘Fire’ or ‘Environmental’ or is selected as incident type, the question ‘Was this a Dangerous Incident as defined under Legislation?’ Must be answered.

Was this a dangerous incident as defined under Legislation? ☐ YES ☐ NO (Not sure? – refer to the ‘Definitions of Dangerous Incidents and Electrical Incidents’ fact sheet.

REPORTING DETAILS

*Reported Date: …/…/……

*Reported by: – (NOTE: at least one ‘reported by’ field must be populated)
☐ Staff member (Name) ___________________________ (Base Location)
☐ Student: (Name) ___________________________ (Base Location)
☐ Other person: (Name) ___________________________ (Base Location)

Other person’s contact details if known:

Name of Reviewer:

Name of person completing this form: ___________________________
INJURY / ILLNESS DETAILS

Injured person's details:

☐ Staff member (Name) ____________________________ (Base Location)

☐ Student: (Name) ____________________________ (Base Location)

☐ Other person: (Name) ____________________________ (Base Location)

Type of other person: ☐ Client ☐ Contractor ☐ Parent ☐ Visitor ☐ Volunteer ☐ Other: ________________

Other person's contact details if known: ____________________________

Injury details:

Injury/Illness classification – select one of the following

☐ Serious Injury - Fatality ☐ Work Caused Illness ☐ Bodily Injury

☐ Serious Injury - Non Fatality ☐ Psychological Illness ☐ Minor Injury or Incident

Use the reference lists below to complete the body location details and the Nature of Injury/Illness details

<table>
<thead>
<tr>
<th>Body Location (reference list)</th>
<th>Nature of Injury / Illness (reference list)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Face</td>
<td>Facial Pain</td>
</tr>
<tr>
<td>Head</td>
<td>Head Trauma</td>
</tr>
<tr>
<td>Eyes</td>
<td>Eyes Trauma</td>
</tr>
<tr>
<td>Ears</td>
<td>Ears Trauma</td>
</tr>
<tr>
<td>Nose</td>
<td>Nasal Trauma</td>
</tr>
<tr>
<td>Tooth/Teeth</td>
<td>Dental Trauma</td>
</tr>
<tr>
<td>Neck</td>
<td>Neck Trauma</td>
</tr>
<tr>
<td>Arms</td>
<td>Arm Trauma</td>
</tr>
<tr>
<td>Elbows</td>
<td>Elbow Trauma</td>
</tr>
<tr>
<td>Shoulders</td>
<td>Shoulder Trauma</td>
</tr>
<tr>
<td>Hands</td>
<td>Hand Trauma</td>
</tr>
<tr>
<td>Wrists</td>
<td>Wrist Trauma</td>
</tr>
<tr>
<td>Back</td>
<td>Back Trauma</td>
</tr>
<tr>
<td>Mouth</td>
<td>Mouth Trauma</td>
</tr>
<tr>
<td>Ankle</td>
<td>Ankle Trauma</td>
</tr>
<tr>
<td>Skin</td>
<td>Skin Trauma</td>
</tr>
<tr>
<td>Respiratory System</td>
<td>Respiratory System Trauma</td>
</tr>
<tr>
<td>Abdomen/Stomach</td>
<td>Abdominal Trauma</td>
</tr>
<tr>
<td>Internal Organs</td>
<td>Internal Organ Trauma</td>
</tr>
<tr>
<td>Spine</td>
<td>Spinal Trauma</td>
</tr>
<tr>
<td>Psychological Condition</td>
<td>Psychological Condition Trauma</td>
</tr>
<tr>
<td>Other e.g. fainting</td>
<td>Other e.g. fainting</td>
</tr>
<tr>
<td>Ache/Pain</td>
<td>Ache/Pain</td>
</tr>
<tr>
<td>Cut/Laceration</td>
<td>Cut/Laceration</td>
</tr>
<tr>
<td>Amputation</td>
<td>Amputation</td>
</tr>
<tr>
<td>Bite/Sting</td>
<td>Bite/Sting</td>
</tr>
<tr>
<td>Bruising/Crushing</td>
<td>Bruising/Crushing</td>
</tr>
<tr>
<td>Dislocation</td>
<td>Dislocation</td>
</tr>
<tr>
<td>Sprain/Strain</td>
<td>Sprain/Strain</td>
</tr>
<tr>
<td>Burn/Scald</td>
<td>Burn/Scald</td>
</tr>
<tr>
<td>Fracture</td>
<td>Fracture</td>
</tr>
<tr>
<td>Infection/Disease</td>
<td>Infection/Disease</td>
</tr>
<tr>
<td>Hearing Loss/Deafness</td>
<td>Hearing Loss/Deafness</td>
</tr>
<tr>
<td>Psychological Stress</td>
<td>Psychological Stress</td>
</tr>
<tr>
<td>Allergy</td>
<td>Allergy</td>
</tr>
<tr>
<td>Skin Infection/Dermalitis</td>
<td>Skin Infection/Dermalitis</td>
</tr>
<tr>
<td>Heat/Cold Stress</td>
<td>Heat/Cold Stress</td>
</tr>
<tr>
<td>Poisoning</td>
<td>Poisoning</td>
</tr>
<tr>
<td>Respiratory</td>
<td>Respiratory</td>
</tr>
<tr>
<td>Puncture / Needle stick</td>
<td>Puncture / Needle stick</td>
</tr>
<tr>
<td>Weld Flash</td>
<td>Weld Flash</td>
</tr>
<tr>
<td>Eye Disorder</td>
<td>Eye Disorder</td>
</tr>
<tr>
<td>Foreign Body</td>
<td>Foreign Body</td>
</tr>
<tr>
<td>Head Injury</td>
<td>Head Injury</td>
</tr>
<tr>
<td>Internal Injury</td>
<td>Internal Injury</td>
</tr>
<tr>
<td>Heart or Circulatory Condition</td>
<td>Heart or Circulatory Condition</td>
</tr>
</tbody>
</table>

Injury 1.
Body Location: ____________________________ Nature of Injury/Illness: ____________________________

If more than one injury or body location, complete below:

Injury 2.
Body Location: ____________________________ Nature of Injury/Illness: ____________________________

Injury 3.
Body Location: ____________________________ Nature of Injury/Illness: ____________________________
*Cause of injury/illness – select one of the following*

- Slip, Trip or Fall
- Contact with, or striking against object
- Vibration
- Struck by falling or moving object
- Noise
- Explosion or implosion (pressure variation)
- Repetitive movement
- Muscular effort - single event
- Electricity
- Thermal (heat/cold)
- Radiation
- Chemical or substance
- Animal or insect
- Biological
- Psychological
- Vehicle
- Other: ____________

*Contributing factor/agency – select one of the following*

- Machinery and fixed plant
- Mobile plant/machinery
- Vehicle (Government)
- Vehicle (Private)
- Powered equipment, tools and appliances
- Non-powered tools
- Non-powered equipment (e.g. playground)
- Chemicals
- Foreign Objects (e.g. projectiles, splinters)
- Outdoor environment
- Indoor environment
- Animals
- Human agencies
- Biological agent
- Needle stick
- Fire/explosion
- Electricity
- Radiation/Arc Flash
- Stress/Trauma
- Temperature
- Other: ____________

*Activity – select one of the following*

- Admin general
- Chemical use
- Computer work
- Curriculum prac
- Curriculum theory
- Playground duty
- Equipment usage
- First aid
- Lifting/Manual handling
- Movement around the worksite
- Grounds Care
- Play (supervised/unsupervised)
- Restraining a student
- Sport
- Travel to/from workplace
- Excursions/Field trip
- Work General
- Other: ____________

*Medical Response including First Aid Details*

**Most serious response:**

- Nil – returned to work/class
- First Aid
- Ambulance
- Doctor/Out Patient
- Hospitalisation

Name of hospital (if known):

**Related Student First Aid:**

For students that have been injured there may already be a first aid record for this incident in the MyHR Student First Aid Module. During data entry, this can be linked to this record.

Is there a Student First Aid Record: □ No □ Yes. Record number (if known)

**First Aid Information:**

Name of person who administered first aid:

Short description of First Aid Types (e.g. rest, ice, immobilised)

Detailed description of first aid or any other medical response if necessary.

3
**ELECTRICAL DETAILS**

* Mandatory fields that must be completed.

**Voltage:**  
- [ ] High  
- [ ] Low  

* Safety switch tripped?  
- [ ] Yes  
- [ ] No  
- [ ] Not installed

---

**Equipment asset number:**

---

**Date of last test – safety switch:**

---

**Date of last test and tag – equipment:**

---

* Source of electrical event: *(select one of the following statements)*

- [ ] Serious incident resulting in shock or injury requiring medical treatment or death.
- [ ] Shock or injury involving high voltage electrical equipment.
- [ ] Electrical work performed by an unlicensed person.
- [ ] Work performed with faulty electrical equipment.

---

**Comments:**

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SECURITY THREAT

*Mandatory fields that must be completed.

* Type of security incident: (select one or more of the following and provide details)
  □ Bomb threat □ Aggressive act □ Terrorism
  □ Verbal threat □ Biological/chemical threat □ Intruder on premises

* Details of security incident:

________________________________________________________________________

[Note: Please record at least one 'person threatened' or one 'aggressor' if applicable]

Name of person/s threatened:
Staff member: __________________________
Student: __________________________
Other person: __________________________
Address and contact details of other person (if known):
________________________________________________________________________

Employer of other person threatened (if known): __________________________

Name of aggressor/s:
Staff member: ________________
Student: __________________________
Other person: __________________________
Address and contact details of other person (if known):
________________________________________________________________________

Employer of other person threatened (if known): __________________________

Immediate response: (select one or more of the following)
□ Contact emergency services □ Contact supervising officer □ Contact Counsellor (EAS) (Employee Assistance Service)
□ Contact next of kin □ Other: __________________________

Resolution/Outcome
Reported to Police? □ YES □ NO
Police report number: __________________________
Police contact details: __________________________
Further details: __________________________
MOTOR VEHICLE

* Mandatory fields that must be completed.

This form can be used to record the details of incidents involving a motor vehicle, however if incident involves more than one vehicle, a separate page should be completed for each driver.

Staff driver name: ____________________________

Student driver name: ____________________________

(if the driver is other than a staff member or a student, fill in the details below, if known)

Other person driver: ____________________________

Type of other person: [ ] Client [ ] Contractor [ ] Parent [ ] Volunteer [ ] Visitor [ ] Other

Other person's address: ____________________________ State: _______ Post code: _______

Other person's phone number: ____________________________ Other person's employer: ____________________________

Select one or more to accurately describe the weather conditions at the time of incident

- [ ] Clear
- [ ] Foggy
- [ ] Cloudy/Overcast
- [ ] Hot
- [ ] Cold
- [ ] Humid
- [ ] Dry
- [ ] Raining
- [ ] Dusty
- [ ] Flooding
- [ ] Sunny
- [ ] Wet
- [ ] Windy
- [ ] Icy
- [ ] Snowy

Time of day (select one): [ ] Dawn [ ] Dusk [ ] Daylight [ ] Night

Road type (select one): [ ] Bend [ ] Intersection [ ] Parking Area [ ] School/Institute Grounds [ ] Straight

Road surface conditions (select one):  
- [ ] Sealed
- [ ] Unsealed - good
- [ ] Unsealed - muddy
- [ ] Unsealed - loose or potholed

VEHICLE DETAILS:

Vehicle type: ____________________________

Vehicle make: ____________________________

Vehicle model: ____________________________

Vehicle year: ____________________________

Registration plate number: ____________________________

Government Vehicle? [ ] YES [ ] NO

Driver licence number: ____________________________

Number of passengers: ____________________________

Number of hours worked prior to incident: ____________________________

Police report number: ____________________________
Description of fire:

Source of fuel – select one of the following:

- Flammable Gas - Acetylene
- Flammable Gas - LPG
- Flammable Gas - Nitrogen
- Flammable Gas - Oxygen
- Flammable Gas - Propane
- Flammable Liquid – Aviation Fuel
- Flammable Liquid - Diesel
- Flammable Liquid - Kerosene
- Flammable Liquid - Paints
- Flammable Liquid - Petrol
- Flammable Liquid - Solvents
- Flammable Material
- Paper
- Plastic
- Rubber
- Vegetation
- Wood
- Other: ____________________

Source of ignition – select one of the following:

- Auto-ignition
- Cutting
- Electrical
- Exothermic Reaction
- Friction
- Hot Surface
- Lightning
- Static Electricity
- Welding
- Other: ____________________

Method of extinguishment – select one of the following:

- Extinguisher
- Fire Blanket
- Fire Hose Reel
- Hydrant
- Sprinkler
- Fire Brigade

Was the Fire brigade called?  [ ] YES  [ ] NO

Comments:

__________________________

__________________________

__________________________
**ENVIRONMENTAL**

*Impact initiating event – select one of the following*

- [ ] Fire
- [ ] Maritime incident
- [ ] Land contamination
- [ ] Spill and release
- [ ] Theft
- [ ] Other: 

*Contaminant type – select one or more of the following*

- [ ] Dust and Particulates
- [ ] Asbestos incident
- [ ] Light
- [ ] Noise
- [ ] Chemical
- [ ] Pesticides
- [ ] Other: 

Volume released (number): _____________
Volume recovered (number): _____________
Unit (select either kg or litres): _____________
Unit (select either kg or litres): _____________

Comments:

_________________________________________________________________________
_________________________________________________________________________
_________________________________________________________________________
_________________________________________________________________________

**NEAR MISS**

*Type of near miss – (select one of the following)*

- [ ] Injury/Illness
- [ ] Electrical
- [ ] Other: _____________

*Details of near miss (detail consequences that could have occurred):*

_________________________________________________________________________
_________________________________________________________________________
_________________________________________________________________________
_________________________________________________________________________
_________________________________________________________________________
HEALTH, SAFETY AND WELLBEING STAFF INDUCTION CHECKLIST

GYMPIE SHS

The following is a list of possible training options that may be available. Work out what you believe you need. Advise [Your Supervisor] of what you need by giving them a copy.

Remember, training need not necessarily be a large course – it may be a face to face talk with a qualified colleague or an email containing specific information. Some things do have formal training processes depending on your position or area. Staff Member’s Name: __________________________

<table>
<thead>
<tr>
<th>Area for Training</th>
<th>Is it for you?</th>
<th>Date Completed</th>
<th>Facilitator to sign</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Basic Induction for the Commencement of the Year. (According to your particular position.)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2. Back Care, Manual Handling and Safe Lifting Practices</td>
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</tr>
<tr>
<td>3. Infection Control</td>
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</tr>
<tr>
<td>4. Senior First Aid Certification CPR Certification</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>5. Asbestos</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>6. Medication register and Procedures</td>
<td></td>
<td></td>
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</tr>
<tr>
<td>7. Site specific Health, Safety and Wellbeing Information.</td>
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<tr>
<td>8. Purchasing Controls</td>
<td></td>
<td></td>
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</tr>
<tr>
<td>9. Anaphylaxis, Diabetes and Asthma</td>
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<tr>
<td>10. Risk Management</td>
<td></td>
<td></td>
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</tr>
<tr>
<td>11. Hazardous Substances</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>12. Accident Reporting and Investigation</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>13. Workplace Work Cover RRTWC and Rehabilitation</td>
<td></td>
<td></td>
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<tr>
<td>14. Workplace Stress</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>15. School's Behaviour Management Policy</td>
<td></td>
<td></td>
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<tr>
<td>16. Protective Behaviours Training e.g. Non-V. Crisis Intervention.</td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>17. Electrical Safety</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>18. Solar UV Radiation (Sun Safe Policy)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>19. Minimising Voice Strain</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>20. Emergency Procedures</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>21. Construction Industry (White card)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>22. Noise and Hearing Conservation</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>23. Slips, Trips and Falls</td>
<td></td>
<td></td>
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</tr>
<tr>
<td>24. Food Handling Training for fundraising BBQ'S &amp; Tuckshops etc.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Insert other areas for Training at your school/workplace e.g.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>* Chainsaw Competency</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
NCR Annual Safety Assessment (ASA) Questions - Staff

Workplace:  
Due Date:  
Name:  
Position:  
Date: 

Introduction

This questionnaire is designed to review safety processes and identify health and safety issues at your workplace. It forms part of the Annual Safety Assessment process.

These questions have been designed for staff in your workplace and could include Teachers, Administration Officers, Teacher Aides, Cleaners, Schools Officers and regional staff.

You have been selected to complete this questionnaire to assist in gathering information for the Annual Safety Assessment. Your responses will help to identify those things that need improving, and to develop a safety action plan to address them. There are no right or wrong answers, your honest responses are important to allow an accurate review of your workplaces current performance. There is also a section at the end of the document where you can add comments regarding strengths/things we do well and issues of concern/recommendations for improvement.

Please complete and return by the due date above. If you need any support or assistance to complete this please contact your ASA Coordinator/Team. Further information regarding the ASA is available on the Creating Healthier Workplaces Website – Annual Safety Assessment page.

What is the scope of the ASA?

For DETE workplaces the ASA covers 13 criteria, which are the safety aspects of the workplace to be assessed. Each criterion is assessed against specific indicators which have been provided. For each of the indicators there will be question/s to be answered using the scoring system below.

<table>
<thead>
<tr>
<th>Score</th>
<th>SCORE DESCRIPTORS FOR SPECIFIC INDICATORS</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>No or Indicator is not being met to any real degree</td>
</tr>
<tr>
<td>2</td>
<td>Indicator is met only to a limited degree</td>
</tr>
<tr>
<td>3</td>
<td>Indicator is met to some degree</td>
</tr>
<tr>
<td>4</td>
<td>Indicator is mostly met</td>
</tr>
<tr>
<td>5</td>
<td>Yes or Indicator is fully met</td>
</tr>
</tbody>
</table>
## Criterion 1: WORK HEALTH AND SAFETY POLICY

<table>
<thead>
<tr>
<th>1.1</th>
<th>Do you access HSW policies and procedures relevant to your position/role?</th>
<th>Not met or no</th>
<th>Limited degree</th>
<th>To some degree</th>
<th>Mostly</th>
<th>Fully met or yes</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Do you know how to access the Creating Healthier Workplace (CHW) website?</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Are you provided with adequate facilities and equipment to access HSW policies and procedures?</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1.2</td>
<td>Do you know and understand the responsibilities (relevant to your position/role) outlined in each of the HSW procedures and/or guidelines?</td>
<td></td>
<td></td>
<td></td>
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</tr>
<tr>
<td></td>
<td>Are you aware of which HSW procedures impact on your work procedures and activities?</td>
<td></td>
<td></td>
<td></td>
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<td></td>
</tr>
<tr>
<td></td>
<td>Do you receive information and updates in relation to your health and safety responsibilities?</td>
<td></td>
<td></td>
<td></td>
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<td></td>
</tr>
<tr>
<td>1.3</td>
<td>Do you receive information about DETE and site specific WHS procedures/guidelines in your local WHS induction/refresher documents (e.g. staff handbook or HSW induction guide)?</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1.4</td>
<td>Are you aware of your responsibilities in regard to H&amp;S incidents?</td>
<td></td>
<td></td>
<td></td>
<td></td>
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</tr>
<tr>
<td></td>
<td>Do your receive information regarding H&amp;S procedures that relate to your work practices/activities (risk assessment, manual tasks, ergonomics, first aid, infection control, electrical safety, hazardous substances, noise, voice care)?</td>
<td></td>
<td></td>
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</tr>
<tr>
<td></td>
<td>Are you able to implement DETE WHS policy and procedural requirements in your work practices?</td>
<td></td>
<td></td>
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<td></td>
</tr>
</tbody>
</table>

## Criterion 2: MANAGEMENT RESPONSIBILITY

| 2.1 | n/a | Not met or no | Limited degree | To some degree | Mostly | Fully met or yes |
| 2.2 | Have you received training that enables you to understand and comply with H&S responsibilities that relate to your position/role? |               |                |               |        |                 |
| 2.3 | Do you receive information regarding WHS activities at your workplace (e.g. committee meeting minutes)? |               |                |               |        |                 |
| 2.4 | H&S issues are taken seriously by management, and are dealt with in a professional manner in accordance with legislative, policy and procedural requirements? |               |                |               |        |                 |

## Criterion 3: PLANNING PROCESSES

| 3.1 | Do you regularly review your work activities to manage identified hazards? | Not met or no | Limited degree | To some degree | Mostly | Fully met or yes |
| 3.2 | n/a |               |                |               |        |                 |
| 3.3 | Are you aware of your responsibilities in the event of an emergency e.g. in an evacuation or lockdown? |               |                |               |        |                 |
### Criterion 4: CONSULTATION

<table>
<thead>
<tr>
<th>Question</th>
<th>1 Not met or no</th>
<th>2 Limited degree</th>
<th>3 To some degree</th>
<th>4 Mostly</th>
<th>5 Fully met or yes</th>
</tr>
</thead>
<tbody>
<tr>
<td>Have you been consulted and informed of your entitlements in regard to</td>
<td></td>
<td></td>
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</tr>
<tr>
<td>the election of a Health and Safety Representative(s) (HSR) at your</td>
<td></td>
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<tr>
<td>workplace?</td>
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<tr>
<td>Do you know how to formally advise/raise a health and safety issue?</td>
<td></td>
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<tr>
<td>Are you advised of upcoming health and safety committee meetings?</td>
<td></td>
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<tr>
<td>Are you consulted to see if you have any items you would like addressed</td>
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<tr>
<td>by the health and safety committee?</td>
<td></td>
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<tr>
<td>Are you provided with access to the H&amp;S Committee meeting minutes?</td>
<td></td>
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<tr>
<td>Are you consulted about H&amp;S issues relevant to your position/role?</td>
<td></td>
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<tr>
<td>Are you advised about H&amp;S decisions and processes?</td>
<td></td>
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</tbody>
</table>

### Criterion 5: RISK MANAGEMENT

<table>
<thead>
<tr>
<th>Question</th>
<th>1 Not met or no</th>
<th>2 Limited degree</th>
<th>3 To some degree</th>
<th>4 Mostly</th>
<th>5 Fully met or yes</th>
</tr>
</thead>
<tbody>
<tr>
<td>Are you aware of when you should undertake a risk assessment?</td>
<td></td>
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<tr>
<td>Do you know how to undertake a risk assessment?</td>
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<tr>
<td>Do you know where to access risk assessment information?</td>
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<tr>
<td>Do you understand risk management processes as they relate to your work</td>
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<tr>
<td>activities?</td>
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<tr>
<td>Have you been provided with information to assist you to identify hazards</td>
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<tr>
<td>and determine the level of risk of your work activities?</td>
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<tr>
<td>Do you participate in risk management processes as they relate to your</td>
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<tr>
<td>work activities?</td>
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<tr>
<td>Have you received training in risk management that is relevant to your</td>
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<tr>
<td>role?</td>
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<tr>
<td>Do you understand risk management concepts and what we use risk</td>
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<tr>
<td>management processes for?</td>
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<tr>
<td>Do you know how to report a hazard?</td>
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<tr>
<td>Do you report hazards?</td>
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</tbody>
</table>

### Criterion 6: HEALTHY LIFESTYLE PROGRAM

<table>
<thead>
<tr>
<th>Question</th>
<th>1 Not met or no</th>
<th>2 Limited degree</th>
<th>3 To some degree</th>
<th>4 Mostly</th>
<th>5 Fully met or yes</th>
</tr>
</thead>
<tbody>
<tr>
<td>Have you had the opportunity to offer ideas or suggestions about suitable</td>
<td></td>
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<tr>
<td>activities for your workplaces healthy lifestyle program?</td>
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<tr>
<td>Does your workplace offer any healthy lifestyle programs/activities?</td>
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<tr>
<td>Are you given the opportunity to participate in a variety of healthy</td>
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<tr>
<td>lifestyle initiatives/activities?</td>
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<tr>
<td>Have you been given the opportunity to provide feedback regarding your</td>
<td></td>
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<tr>
<td>workplaces healthy lifestyle program?</td>
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<tr>
<td>n/a</td>
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<tr>
<td>Criterion 7: INFORMATION INSTRUCTION AND TRAINING</td>
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<td>-------------------------------------------------</td>
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</tr>
<tr>
<td>7.1 Have you been provided with DETE induction training?</td>
<td>1 2 3 4 5</td>
<td></td>
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<td></td>
</tr>
<tr>
<td>Have you been provided with site specific induction training for your workplace?</td>
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</tr>
<tr>
<td>7.2 Have you received health and safety training relevant to your role and duties?</td>
<td></td>
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<tr>
<td>Are you aware of your workplace emergency procedures?</td>
<td></td>
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<tr>
<td>7.3 n/a</td>
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</tr>
<tr>
<td>7.4 Are you given the opportunity to provide input into the health and safety training requirements of your role?</td>
<td></td>
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</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Criterion 8: INJURY TREATMENT AND MANAGEMENT</th>
</tr>
</thead>
<tbody>
<tr>
<td>8.1 First aid facilities are adequate?</td>
</tr>
<tr>
<td>There are enough staff trained to provide first aid?</td>
</tr>
<tr>
<td>Do you know where first aid facilities/staff are located?</td>
</tr>
<tr>
<td>8.2 Are you aware of rehabilitation rights and responsibilities?</td>
</tr>
<tr>
<td>Are you able to access information or services relating to rehabilitation?</td>
</tr>
<tr>
<td>8.3 Do you know who your Rehab &amp; Return to Work Coordinator (RRTWC) is?</td>
</tr>
<tr>
<td>Are you able to access your Rehab &amp; Return to Work Coordinator (RRTWC) when required?</td>
</tr>
<tr>
<td>Are you able to access information or services relating to rehabilitation?</td>
</tr>
<tr>
<td>8.4 n/a</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Criterion 9: CLAIMS MANAGEMENT</th>
</tr>
</thead>
<tbody>
<tr>
<td>9.1 I understand my rights and responsibilities in relation to the lodgement of claims and leave.</td>
</tr>
<tr>
<td>9.2 My claim (if applicable) was managed effectively.</td>
</tr>
<tr>
<td>9.3 n/a</td>
</tr>
<tr>
<td>9.4 Do you have access to information about claims and leave options?</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Criterion 10: INCIDENT RECORDING, INVESTIGATION, ANALYSIS AND REVIEW</th>
</tr>
</thead>
<tbody>
<tr>
<td>10.1 Do you know why, how and when to report H&amp;S Incidents?</td>
</tr>
<tr>
<td>10.2 Do you know the procedures for recording a H&amp;S incident at your workplace?</td>
</tr>
<tr>
<td>10.3 Health and safety incidents are investigated and control measures put in place to prevent incidents recurring.</td>
</tr>
<tr>
<td>10.4 n/a</td>
</tr>
</tbody>
</table>
### Criterion 11: MEASURING AND EVALUATING WHS PERFORMANCE

<table>
<thead>
<tr>
<th>Question</th>
<th>1 - Not met or no</th>
<th>2 - Limited degree</th>
<th>3 - To some degree</th>
<th>4 - Mostly</th>
<th>5 - Fully met or yes</th>
</tr>
</thead>
<tbody>
<tr>
<td>11.1 Do you participate in the Annual Safety Assessment?</td>
<td>□</td>
<td>□</td>
<td>□</td>
<td>□</td>
<td>□</td>
</tr>
<tr>
<td>11.2 n/a</td>
<td>□</td>
<td>□</td>
<td>□</td>
<td>□</td>
<td>□</td>
</tr>
<tr>
<td>11.3 n/a</td>
<td>□</td>
<td>□</td>
<td>□</td>
<td>□</td>
<td>□</td>
</tr>
<tr>
<td>11.4 Are high risk areas in your workplace regularly reviewed for hazards and compliance e.g. playground equipment and areas?</td>
<td>□</td>
<td>□</td>
<td>□</td>
<td>□</td>
<td>□</td>
</tr>
</tbody>
</table>

### Criterion 12: REVIEWING WHS PERFORMANCE

<table>
<thead>
<tr>
<th>Question</th>
<th>1 - Not met or no</th>
<th>2 - Limited degree</th>
<th>3 - To some degree</th>
<th>4 - Mostly</th>
<th>5 - Fully met or yes</th>
</tr>
</thead>
<tbody>
<tr>
<td>12.1 Are you aware of and do you have access to your workplaces WHS policies and procedures?</td>
<td>□</td>
<td>□</td>
<td>□</td>
<td>□</td>
<td>□</td>
</tr>
<tr>
<td>12.2 I am advised of newly developed and updated WHS policies and procedures.</td>
<td>□</td>
<td>□</td>
<td>□</td>
<td>□</td>
<td>□</td>
</tr>
<tr>
<td>12.3 I am advised of changes to WHS policies and procedures.</td>
<td>□</td>
<td>□</td>
<td>□</td>
<td>□</td>
<td>□</td>
</tr>
<tr>
<td>12.4 I consider current WHS policies and procedures when planning all work related processes and activities.</td>
<td>□</td>
<td>□</td>
<td>□</td>
<td>□</td>
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</tbody>
</table>

### Criterion 13: REPORTING OF WHS

<table>
<thead>
<tr>
<th>Question</th>
<th>1 - Not met or no</th>
<th>2 - Limited degree</th>
<th>3 - To some degree</th>
<th>4 - Mostly</th>
<th>5 - Fully met or yes</th>
</tr>
</thead>
<tbody>
<tr>
<td>13.1 n/a</td>
<td>□</td>
<td>□</td>
<td>□</td>
<td>□</td>
<td>□</td>
</tr>
<tr>
<td>13.2 Any hazards or incidents that I report are recorded in the relevant register.</td>
<td>□</td>
<td>□</td>
<td>□</td>
<td>□</td>
<td>□</td>
</tr>
<tr>
<td>13.3 I have been required to sign off on all WHS training I have received, as evidence that I undertook and understood the training I received.</td>
<td>□</td>
<td>□</td>
<td>□</td>
<td>□</td>
<td>□</td>
</tr>
<tr>
<td>13.4 I am aware of what H&amp;S records (relevant to my role) I need to retain for audit purposes. I maintain H&amp;S records relevant to my position/role within the workplace.</td>
<td>□</td>
<td>□</td>
<td>□</td>
<td>□</td>
<td>□</td>
</tr>
</tbody>
</table>

### OTHER COMMENTS

Current strengths and things we do well:

Issues of concern and recommendations for future improvement: