



WHS

Review and Planning Report

2016 - 2017



Your Safety Your Future

Table of Contents

1.	Executive Summary	3
1.1	Purpose	3
1.2	Scope.....	3
1.3	Year in Review.....	3
1.4	Major Focus for 2017	4
	Report in Full	6
2	Review of Planned Arrangements	6
3	Review of Statistics.....	6
3.1	Management KPIs for 2016	6
	Officers WHS KPIs as at October 2016	8
3.2	Lost Time Injury (LTI) Injury Statistics	8
	Table 1 - LTI by Mechanism.....	9
	Table 2 - LTI Comparisons Showing Major Injury Types	10
3.3	Medical Treatment Only (MTO) Injuries.....	11
	Table 3 – NSW Self Insuring Councils Comparison - Self-Insured Councils 12 months to June 2016	12
4.0	Safety Initiatives and KPIs Identified for 2016	13
4.1	WHS Corporate Safety Initiatives 2016.....	13
4.2	Risk Management Objectives for 2015.....	14
4.3	Workplace Inspections (KPI = 95%) to October 2016	15
5.0	Legislative Requirements.....	16
6.0	System Review	17
7.0	Review of Incident Reports	18
7.1	Incident Reporting.....	19
8.0	Review of Audit Results	21
9.0	WHS Consultation.....	24
9.1	Review of Registers and Databases.....	24
10.0	Training	24
10.1	Training Statistics	25
11.0	Proposed Safety Initiatives for 2017	26
12	Conclusion	28

1. Executive Summary

1.1 Purpose

To apprise MANEX of Council's WHS performance for 2016 and assist in setting meaningful WHS targets and objectives for 2017.

1.2 Scope

To ensure the WHS&IM System (hereon called the Safety System) is effective in meeting Council's Work, Health and Safety duties as expressed within the WHS Policy Statement, WHS Legislation, NAT Tool v3 and the stated objectives and targets identified in previous WHS reports.

It should be noted that this report has been drafted prior to the completion of the 2016 calendar year due to changes to Self-Insurers (SI) licensing requirements. Information contained within this report is therefore current only to the end of October however, where possible current trends have been extrapolated.

1.3 Year in Review

1.3.1 SIRA Report on proposed changes to SI licensing requirements.

- PWC report raised 16 recommendations for change.
- SIRA has accepted 14 recommendations outright with two listed for further consideration.
- Essentially, the emphasis on SI licensing requirements is shifting from WHS to Workers Compensation (WC).
- Three yearly SI WHS audit requirement to be removed.
- Management Plan and more auditing for WC side of operations to be implemented.
- WHS issues will now be the sole responsibility of SafeWork NSW however poor performance here will impact on maintaining our SI license.

1.3.2 WHS Corporate Safety Initiatives for 2016 – Outcomes

Position	Objective	Outcome
General Manager	Incident Reports completed as required	74% - KPI \geq 95% requires substantive push to achieve KPI by end of year.
Director IS	Control ACM in the Workplace	75% completed, based on external audit with corrective actions scheduled for completion by the end of the year. This will complete this safety initiative (carryover).
Director CP	WHS&IM documentation review	25% completed, no further progress anticipated.
Director SS	IT&M database	75% completed, data collection will be completed and information entered into database by the end of the year which will complete this safety initiative (carryover).

Manager Risk Management – Safety Initiatives 2016 Outcome:

Number	Safety Initiative	Result
1	Identify and Control WHS Joint Responsibilities	5% completed, will not be completed by end of year (carryover).
2	Internal Auditing (System and compliance)	11% completed, no further progress anticipated (carryover) .
3	Monthly WHS Reporting	80% completed, KPI will not be achieved by end of year but will be close (carryover).

Managers WHS KPIs

- Mostly achieved, should be fully completed by end of year.

1.3.3 Achievements

- Transition to Globalised Chemical Management (GHS) (well advanced).
- ACM Control in the Workplace (well advanced and on target).
- Development of structured Volunteer Management Program.



1.3.4 Issues

- Overdue Incident Reports (KPI of $\geq 95\%$ currently 74%), see section 7 of this report.
- Internal Audit Schedule (11% of schedule), see section 8 of this report.
- WHS&IM System declining compliance from 92% to 80% see section 8 of this report.

1.4 Major Focus for 2017

1.4.1 Proposed Corporate Safety Initiatives for 2017

Safety Initiative	Responsibility	Description
Health Surveillance	GM	Risk assessments completed and health surveillance programs implemented.
WHS&IM Document Review	Director CP	WHS&IM System documents updated reviewed (Carryover)
Develop SOPs for identified plant and equipment.	Director IS	SOPs are developed for plant and equipment identified in risk assessment. SOPs to include risk and competency assessments as required.
IT&M Database	Director SS	Stage two – inspection frequencies and review standards established and implemented.
Management KPIs	All Officers	100% of established KPIs
Joint WHS duties	Manager RM	Identify those with which we share joint WHS responsibilities and implement suitable controls (Carryover)
Internal Auditing	Manager RM	System and Compliance Audits completed as per schedule. (Carryover)
Review of WHS Operations	Manager RM	Establish minimum acceptable compliance levels for WHS and associated mechanisms for assessment.
Improve Compliance of WHS&IM System.	Manager RM	Arrest negative trend and return WHS&IM System to 90% or better. This includes delivery of associated training.

1.4.2 Maintaining Councils Self Insurance license?

It seems very clear from the language used in *Report Recommendation 8* (PWC Final Report on SI Licensing Conditions) that SIRA will no longer be directly involved in WHS issues and instead will focus entirely on Risk based Workers Compensation. These predicted changes to the Workers Compensation Self-Insurer License condition will have an impact on both the WHS and WC areas of operation.

A focus for the coming year will be to review resource issues relating to these areas of operation to ensure fitness for purpose and set and achieve acceptable standards of compliance.

1.4.3 WHS External Audit Results at a Glance

i. Asbestos Containing Material (ACM) Audit Results July 2016.

Compliances	Partial Compliances	Non Compliances	Not Applicables	Not Able to be Verified
56 = 74%	20 = 26%	0	1	7

ii. WHS&IM System Gap Analysis July 2016

Conformances	Partial Conformances	Non Conformances	Total Applicable/ Verified	Not Applicable	Not Able to be Verified
86 = 80%	14 = 13%	7 = 7%	107	1	0

iii. Globally Harmonised System (GHS Chemical Management Audit) September 2016

Compliances	Partial Compliances	Non Compliances	Not Applicables	Not Able to be Verified
43 = 48%	22 = 24%	25 = 28%	6	0

1.4.4 Internal Audit Results at a Glance

2016 Audit Results - KPI 75%						
Directorate	Branch	Location	Date	Element	Result	Comments
Support Services	Cultural Services		January	007.5 Hazardous Manual Tasks	88%	Unsuccessful audit with two non-conformances raised # 872 #877
Infrastructure Services	Building Services		January	007.27 Contractor Management		
Executive Services	Human Resources		February	007.23 Tool Box Talks / Team Meetings	NA	This audit was conducted as an information/training session. See audit report for full details
Support Services	Financial Services		February	005 Purchasing of Goods and Services		
Infrastructure Services	Director Infrastructure Services		February	007.15 Asbestos		
Executive Services	Risk Management		March	009 Corrective Actions	60%	Unsuccessful audit with two non-conformances raised # 905 # 906
Infrastructure Services	Waste Management		March	008.2 Environmental Monitoring and Health Surveillance		
Infrastructure Services	Parks and Recreation		March	006.1 Hazard Identification		
City Planning	Development Services		April	007.21 Certification and Licencing		
Support Services	Corporate Services and Governance		April	009.2 Incident Reporting, Review and Investigation		Carol to audit
Infrastructure Services	Design and Mapping		May	007.3 Traffic and Pedestrian Management		
Infrastructure Services	Parks and Recreation		May	007.9A Transporting Plant Equipment and Materials		

Support Services	Director Support Services		June	007.25 Facilities and Workplace Amenities		Carol and Steve to Audit
Minerva Executive Services	Minerva		June	002 WHS Management System		
City Planning	Strategic Activities		July	010 Records		
City Planning	Director City Planning		August	007.24 Workplace Signage		Carol and Steve to Audit
Infrastructure Services	Building Services		August	003 Design Control		
City Planning	Environment and Reg Services		August	007.10 Noise		Carol to Audit
Support Services	Cultural Services		September	007.4 Sharps Management		Carol to Audit
City Planning	Director City Planning		September	009 Corrective Actions		Carol and Steve to Audit
Infrastructure Services	Building Services		October	007.11 Hot Work		
Support Services	Director Support Services		October	013 WHS Reporting		Carol and Steve to Audit
Executive Services	Risk Management		November	002.1 WHS Management Planning		Carol and Steve to Audit
Infrastructure Services	Construction and Maintenance		November	006 Risk Management		
City Planning	Strategic Planning		November	007.18 Hot and Cold Environments		Carol to audit
Infrastructure Services	Construction and Maintenance		November	007.7 Isolation		
Executive Services	Corporate Communications		December	007.20 Electricity		Carol to audit



Comment:

This review of Councils WHS&IM System identifies that in some areas progress has stalled and is in decline.

Report in Full


2 Review of Planned Arrangements

This report measures Council's Work Health Safety and Injury Management (WHS&IM) performance (here after called the "Safety System") for the calendar year 2016 against the criteria defined in **001.7 WHS Management Review**. It establishes overall performance levels, identifies emergent trends and areas for System improvement. In essence, this report is a snapshot of the functionality of Council's Safety System measuring our progress against set objectives/targets and highlighting areas for continuous improvement in 2017.

Complimentary to the above, **002.1 WHS Management Planning** details how we use this information to further improve based upon learning's from past experience and a desire to improve our health and safety performance.

Planning processes require the setting of expectations, the monitoring and review of performance and where necessary, management intervention to prevent or correct performance that is inconsistent with the achievement of expectations.

Council recognises that a planned approach to work health and safety ensures resources are allocated effectively to achieve defined and measurable outcomes. WHS planning processes are designed to align with, and be integrated into, the Council Corporate Planning and Reporting processes.

 While all aspects of this report are important, there are some areas that have been identified as critical (KEY) issues and as such these should be reviewed in detail. These areas are highlighted with a yellow key in the left hand margin to signify their importance and assist the review process.

3 Review of Statistics

Statistical review of Council's Safety System provides a quantitative assessment of performance and includes measurement of safety initiatives against established targets and objectives. The analysis of statistics provides a barometer as to the effectiveness of our Safety System. The most significant aspect of the statistical review process is identifying emergent, potentially negative trends and instigating measures to address these before they have an adverse impact on safety.

Statistical information is provided to Workers, the HS Committee, MANEX and other interested parties on a regular basis. Safety information is available to all employees via the WHS section of Hawkeye and is also included on WHS notice boards.

3.1 Management KPIs for 2016

WHS Legislation requires not only the development and implementation of an adequate Safety System but Due Diligence by Officers to ensure it is being suitably applied in the workplace. Officers at Council are defined as being Manager level and above.

MANEX KPIs

The GM and Directors each champion an individual WHS issue across the organisation annually. Issues identified for attention are derived from the process of this report and in full consultation. Referred to as *WHS Corporate Safety Initiatives* these individual initiatives have a broad organisational focus and require significant interdepartmental involvement. Once identified, these safety initiatives have Resource and Delivery Plans developed to ensure sufficient resources are available to complete the task and milestones are established to assess compliance.

Progress towards achieving these safety initiatives is then reported on by the responsible MANEX member to MANEX on a monthly basis. The GM and Directors must also complete the Officer KPIs.

Results of MANEX KPIs for 2016

Position	Objective	Outcome
General Manager	Incident Reports completed as required	74% - KPI \geq 95% requires substantive push to achieve KPI by end of year.
Director IS	Control ACM in the workplace	75% completed, based on external audit with corrective actions scheduled for completion by the end of the year. This will complete this safety initiative.
Director CP	WHS&IM documentation review	25% completed, no further progress anticipated due to reduction in resources.
Director SS	IT&M database	75% completed, data collection will be completed and information entered into database by the end of the year which will complete this safety initiative.

Officer KPIs

To assist Officers (Managers and above) towards implementing their due diligence requirements, minimum WHS KPIs have been established for their level of operation.

Listed below are the results of KPI compliance by Officers for the 2016 calendar year however it should be remembered that figures supplied below are relevant only to the end October.

Officer Safety KPIs	Target
1 – Corrective Actions completed within allocated time frames	95%
2 – Attend Legislative Training	100%
3 – Scheduled Workplace Inspections registered by 10 th of the month.	95%
4 – Participates in a minimum of one Workplace Inspection	100%
5 – Minimum four safety related Toolbox Talks held annually.	100%
6 – Participate in at least one HS Committee meeting annually	100%
7 – Undertake at least one onsite SWMS audit annually	100%

Officers WHS KPIs as at October 2016

Name	Position	HS Committee	Workplace Inspection	Legislative Training	SWMS Task Audit	Tool Box Talk 1	Tool Box Talk 2	Tool Box Talk 3	Tool Box Talk 4	Total No. of KPIs	Completed	Safety Award
Laurie Mifsud	Acting General Manager	8/06/2016	08-06-2016 5442246	21/06/2016	22/07/2016 5779970	3/2/2016 5351559	24/2/2016 5 351561	24/2/2016 5 351562	24/2/2016 5351564	8	100%	
Sonia Porter	Manager Corporate Communications	12/10/2016	08-06-2016 5833388 09-2016	21/06/2016		5736653 15-03-2016	5754068 14-06-2016			4	50%	
Jane Nolan	Manager Human Resources		5532264 05-09-2016	21/06/2016	22/07/2016 5779970	05-03-2016 5441318	04-05-2016 5441329	14-10-2016 5611010	14-10-2016 5609779	7	88%	
Greg Finnie	Manager Risk Management	10/02/2016	08-06-2016 5442241	21/06/2016		27/05/2016 5430975	5568679 01/09/2016	5600173 29/09/2016	5600177 30/09/2016	7	88%	
Jeff Organ	Director	13/04/2016	08-06-2016 5442246	21/06/2016	07-04-2016 5384630	3/02/2016 5318990	13/04/2016 5388243	11-05-2016 5412331	01-06-2016 5432474	8	100%	
Chris Amit	Manager Design and Mapping	10/02/2016	05-07-2016 5468025	21/06/2016	01-03-2016 5347642	11/03/2016 5297303	11/03/2016 5297304	02-02-2016 5318862	02-02-2016 5318863	8	100%	
Richard Vaby	Manager Construction and Maintenance	8/06/2016	08-06-2016 5442246	21/06/2016	16-05-2016 5416972	12-04-2016 5386331	16-05-2016 5416971			6	75%	
Lachlan McClure	Manager Building Services	10/08/2016	17/03/2016 5362105	21/06/2016		17/03/2016 5362111	17/3/2016 5362121	17/3/2016 5362109	17/3/2016 5362115	7	88%	
Ramiz Younan	Manager Waste Management	8/06/2016	4-03-2016 5365185	21/06/2016	05-05-2016 5405884	9/02/2016 5330768	19-02-2016 5327063	23-03-2016 5371832	20-04-2016 5395454	8	100%	
Sean Perry	Manager Parks and Recreation	13/04/2016	11-04-2016 5384630	21/06/2016	11/02/2016 5329365	21-03-2016 5365889	09-05-2016 5410739	5544968 07-09-2016		7	88%	
Emma Galea	Acting Director	8/06/2016	08-06-2016 5442246	21/06/2016	N/A	19-04-2016 5399020	11-05-16 5442306	01-06-2016 5441632	29-06-2016 5477946	7	100%	
Ian Roberts	Manager Corporate Services and Gov.	10/08/2016	01-06-2016 5439521	21/06/2016		2/02/2016 5317901	16/03/2016 5362157	16/06/2016 5447553		6	75%	
Vanessa Browning	Acting Chief Financial Officer	N/A	5528991 05-09-2016	21/06/2016	5530253 06-09-2016	09-06-2016 5440921	5629370 27-10-2016	5632396 26-10-2016		7	88%	
Donna McCue	Manager Information Services	10/08/2016	5533438 06-09-2016	21/06/2016	22/07/2016 5779970	11/02/2016 5326331	17-03-2016 5368105	17-03-2016 5656470	24-05-2016 5716089	8	100%	
Keri Whiteley	Manager Cultural Services	10/02/2016	7/03/2016 5350861	21/06/2016	8/01/2016 5310395	12/01/2016 5583502	08-03-2016 5352898	12-04-2016 5386189	10-05-2016 5412938	8	100%	March
Kaylene Kelland	Manager Customer Services	10/08/2016	01-03-2016 5345029	21/06/2016		10/03/2016 5355122	26/05/2016 5427266	5595731 14-10-2016		6	75%	
Joseph Litwin	Executive Manager - Community Partnerships	10/08/2016	14/06/2016 5445492	21/06/2016	N/A	19-04-2016 5391985				4	50%	

Manager Risk Management KPIs

The Manager Risk Management annually champions safety related issues that have a significant organisational focus but tend to be more system based in their application. These KPIs are developed as a result of this report and in consultation with MANEX and the HS Committee.

The Manager Risk Management reports on progress towards achieving these safety outcomes to MANEX on a monthly basis and the HS Committee on a bi-monthly basis.

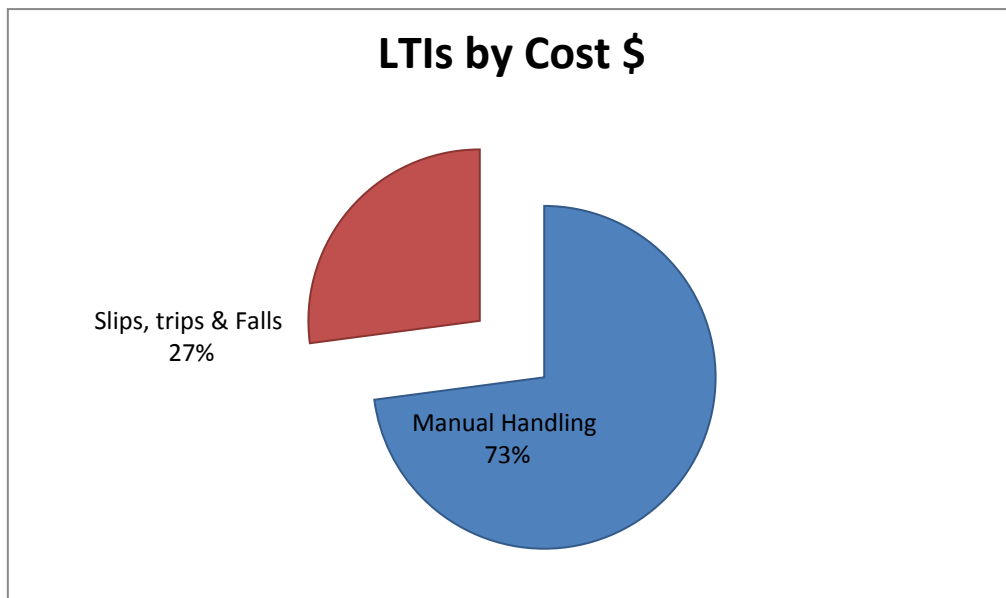
Number	Safety Initiative	Result
1	Identify and Control WHS Joint Responsibilities	5% completed, will not be completed by end of year.
2	Internal Auditing (System and compliance)	11% completed, no further progress anticipated.
3	Monthly WHS Reporting	80% completed, KPI will not be achieved by end of year but will be close.

3.2 Lost Time Injury (LTI) Injury Statistics

LTIs are defined as being an injury that has resulted in an employee being off work for more than one shift i.e. eight hours.

Table 1 - LTI by Mechanism

Description	2012	2013	2014	2015	2016	Increase/decrease from previous year
Total LTIs	11	10	9	8	4 (5)	➔ 37%
Cost of Claims	\$35,655	\$28,710	\$14,391	\$57,341	30,010 (36,012)	➔ 48%
Manual Handling/ergonomics	6	6	2	4	2 (2.4)	➔ 40%
Cuts / Puncture	1	1	1	0	0	
Biological / Enviro'	0	1	2	0	0	
Slips / Falls	2	1	3	3	2 (2.4)	➔ 20%
Vehicle Accident	2	1	1	1	0	
Violence / Assault	0	1	0	0	0	



Comment:

Figures from the above table for the 2016 column have two values, the first being the value for the first 10 months of the year and the second number (in brackets) being the extrapolation for a full 12 months. The column on the right hand side (increase / decrease) uses the extrapolated values to define the anticipated value for the full year to allow for an effective comparison.

While section 7.1 of this report identifies that of the 191 Incident Reports raised for 2016, 43 were for personal injury however only four have proceeded to being LTIs. This would suggest that injury reporting is greatly increased which is pleasing. Even more pleasing is that fact that LTIs continue to fall.

Manual handling in terms of cost is the significant contributor to LTIs (73%) however this figure must be viewed within the context of having such low LTI numbers. One of the two incidents recorded accounts for 80% of this dollar value and work practices have been altered in this instance to prevent any reoccurrence of injury.

Table 2 - LTI Comparisons Showing Major Injury Types

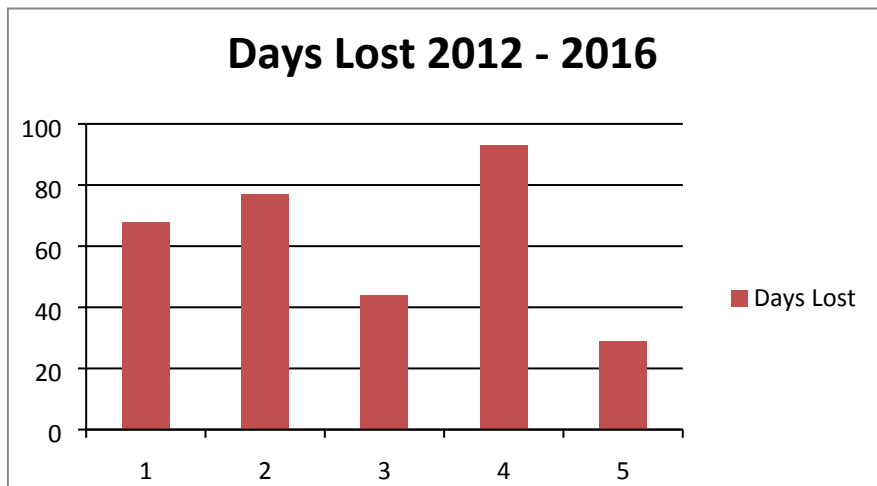
Category	2012		2013		2014		2015		2016	
	Days	\$	Days	\$	Days	\$			Days	\$
MH / Ergonomics	27	13,960	35.5	11,002	4.75	1,788	42	24,935	20	21,881
Cuts - Puncture	1	241			1	771				
Biological - Environ					7.75	1,933				
Slip, Trip, Fall	39	21,528	26.2	7,881	24.88	8,413	42	28,816	4	8,129
Vehicle Accident	1	266	11.7	6,686	5.38	1,486	9	3,590		
Violence / Assault										
TOTALS	68	\$35,655	77	\$28,710	44	14,391	93	57,341	24 (29)	30,010 (36,012)

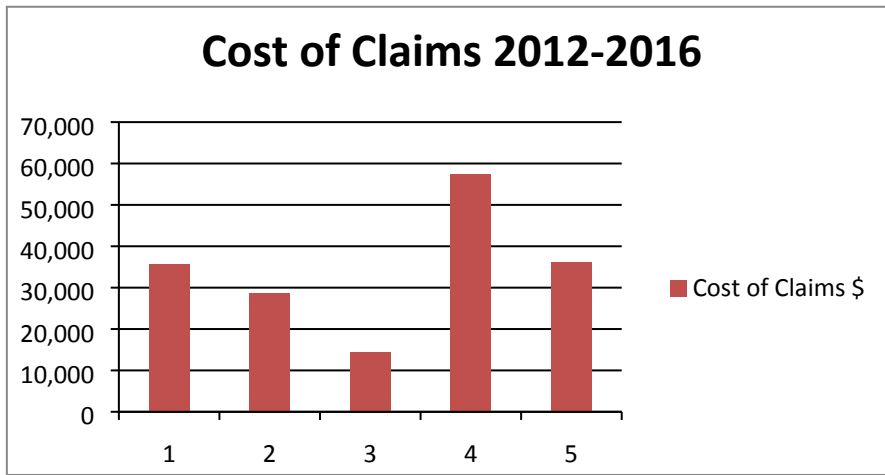
Comment:

Figures from the above table for the 2016 Totals column have two values, the first being the value for the first 10 months of the year and the second number (in brackets) being the extrapolation for a full 12 months.

Again it is pleasing to see that both in terms of days lost and total cost, there has been a significant reduction from the spike in 2015 returning to more consistent and expected values over the longer term.

Five Year LTI Comparisons





3.3 Medical Treatment Only (MTO) Injuries

MTOs are defined as being an injury that has **not** resulted in an employee being off work for more than one shift i.e. eight hours. There were five MTOs for the year to October which can be broken down into the following broad categories;

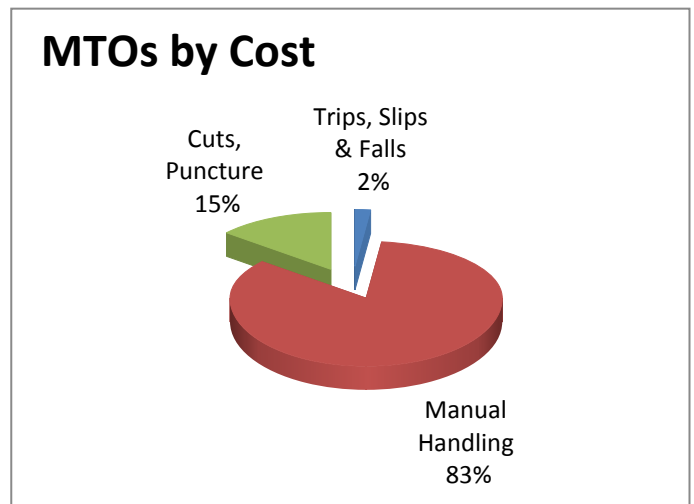
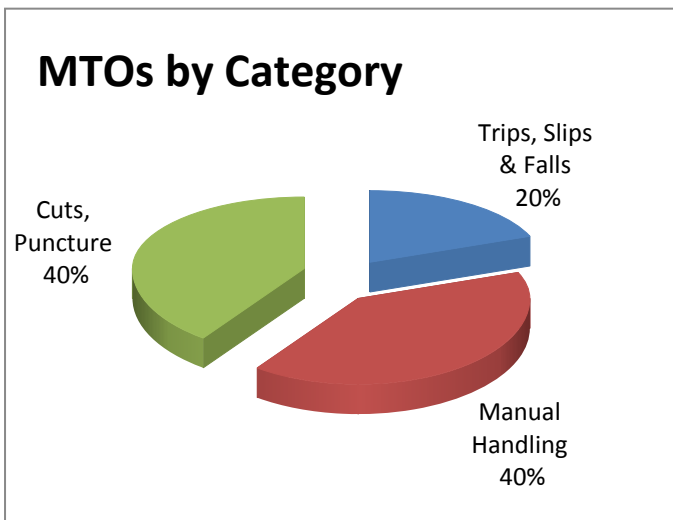


Table 3 – NSW Self Insuring Councils Comparison - Self-Insured Councils 12 months to June 2016

Council	WC Claims	All Incidents	LTI's	LT Days	Hrs. Worked	LT Duration Rate	LTFR	Incidence Rate	No. of Employees
Shoalhaven	50	135	16	112	1804636	7	8.86	1.88	849
Wyong	61	238	25	592	1472647	23.68	19.98	2.38	1051
Fairfield	Not available								
Campbelltown	20	340	20	-	-	-	18.52	3.86	906
Lake Macquarie	Not available								
Canterbury/Bankstown	66	152	8	62	1045282	7.8	7.7	1	802
Sutherland	Not available								
Gosford	74	127	46	666	2087881	14.48	22.03	3.45	1333
Newcastle	Not available								
Blacktown	Not available								
Bankstown	Not available								
Wollongong	82	123	37	706	1696784	19.07	21.81	2.72	1359
Sydney	151	386	34	438	2906225	12.88	11.7	1.46	2334
Average (excluding Campbelltown)	81	194	28	429	1835576	32	15	2.15	1288
Hawkesbury	13	107	6	79	456298	13.16	13.15	1.78	338

Comment:

It is pleasing to see that Hawkesbury continues to reside at the lower levels of injury rates when benchmarked against other SI Councils. The most important indicators from the table above are:

1. LTDR (Lost Time Duration Rate = the number of days lost / no of lost time injuries)
2. LTFR (Lost Time Frequency Rate = the number of lost time injuries / no of hours worked X 1000000)
3. IR (Incidence Rate = the number of lost time injuries / no of workers X 100)

What these results indicate is that while working for Hawkesbury, employees are less likely to be injured and if they are then the time taken to get back to work is also less than the average which would tend to suggest less server injuries sustained.

4.0 Safety Initiatives and KPIs Identified for 2016

Council recognises that a planned approach to work health and safety ensures resources are allocated effectively to achieve defined and measurable outcomes. Planning processes require the setting of expectations, the effective monitoring and review of performance and where necessary, management intervention to prevent or correct performance that is inconsistent with the achievement of expectations.

4.1 WHS Corporate Safety Initiatives 2016

Safety Initiative	Responsibility	Target	Outcome %	Comment
Timely completion of Incident Reports	General Manager	To ensure Branches complete Incident Reports within prescribed timeframes achieving a minimum standard of 95%.	74%	KPI ≥ 95% requires substantive push to achieve KPI by end of year

Comment: This WHS Safety Initiative may be achieved by the end of the year however current trends would suggest that this unlikely.

WHS Document Review	Director City Planning	To review WHS System documents to ensure compliance with WHS Legislation, NAT' Tool (V3) and Corporate Style Guides.	25%	Resource issues attributing to lack of completion. Proposal to carry over this safety initiative.
---------------------	-------------------------------	--	-----	---

Comment: Vacancy of WHS Administration Officer due to Branch resource review has resulted in this safety initiative not being completed.

Inspection, Testing and Monitoring Database is established	Director Support Services	IT&M database developed and populated with relevant information	75%	This safety initiative is well on track for completion this year.
--	----------------------------------	---	-----	---

Comment: It is pleasing to see this safety initiative finally nearing completion. This initiative will be enhanced in the coming year to ensure that inspection schedules and competency requirements are listed and inspections undertaken.

Safety Initiative	Responsibility	Target	Outcome %	Comment
04 – Asbestos	Director Infrastructure Services	Identify all Council buildings containing asbestos and develop plans for identification and appropriate management	75%	Currently 74% completed, based on external audit with corrective actions scheduled for completion by the end of the year.
Comment: Significant progress has been made with outstanding issues listed for attention.				

4.2 Risk Management Objectives for 2015

Safety Initiative	Responsibility	Target	Outcome	Comment
Joint WHS Responsibilities	Manager Risk Management	All parties identified and RAAs developed and communicated	5%	<ul style="list-style-type: none"> Requires identification and formalised process to inform all parties of their individual RAAs.
Internal Auditing	Manager Risk Management	System and compliance audits completed as per schedule.	11%	<ul style="list-style-type: none"> Requires resources to complete scheduled audits
Monthly WHS Reporting	Manager Risk Management	Monthly reports on System implementation and results reported personally to MANEX.	80%	<ul style="list-style-type: none"> Substantive improvement from previous years.

4.3 Workplace Inspections (KPI = 95%) to October 2016

2016		Number per year	Jan	Feb	March	April	May	June	July	Aug	Sep	Oct
Directorate	Department											
City Planning	Garbage Truck Depot	4			1			1			1	
	Windrar Admin Ground Floor and Basement	4			1			1			1	
	Dight Street Officer	4			1			1				
	Companion Animal Shelter	4			1			1			1	
Support Services	Windrar Admin Top Floor	4			1			1			1	
	Richmond Library	4			1			1			1	
	Windrar Library	4			1			1			1	
	Gallery	4			1			1			1	
	Museum / House House	4			1			1			1	
	Visitor Information Centre	4			1			1			1	
	Depot Store	4			1			1			1	
Infrastructure Services	Richmond Lawn Cemetery	4			1			1			1	
	Windrar Mall	4			1			1			1	
	Richmond Park	4			1			1			1	
	Chambers - McQueen and Memorial Park	4			1			1			1	
	Hanna Park / North Richmond	4			1			1			1	
	Community Nursery	4			1			1			1	
	East Kurrajong Construction Depot	12										
	Richmond Pool	7	1	1	1	1						1
	Depot - Parker Shed	12		1	1	1	1	1	1		1	1
	Depot - Carpenters Store	12	1	1	1	1	1	1	1	1	1	
	Depot - Workshop and Workshop	12		1				1			1	1
	Depot - Yard, Office and Lunch Room	12	1	1	1	1	1	1	1	1	1	1
	SWSTP	12	1	1	1	1	1	1	1	1	1	
	McGHSTP	12	1	1	1	1	1	1	1	1	1	
HCCWMF - Landfill	12		1	1	1	1	1			1	1	
HCCWMF - Gatehouse	12			1			1			1		

Comment:

A final review of documents registered into ECM will be undertaken with any outstanding inspections generating an Incident Report..

5.0 Legislative Requirements

The transition to GHS (chemical management) is required by the end of 2016 with a recent third party audit demonstrating Council has work to do and that it is unlikely to be achieved in terms of System non-conformances due to resource issues.

Legal Compliance training was provided as per System requirements ensuring all Officers (Managers and above) are trained and competent in understanding and applying their responsibilities, accountabilities and authorities (RAAs) in relation to safety.

This year's training took the form of a Mock Court with the litigated scenario very pertinent to Council operations. This training was universally well received and a sobering reminder of what happens when Safety Systems fail. The Risk Management Branch would like to extend their appreciation to those members of staff that took on the necessary role-plays.



This training builds on previous years and ensures Officers have the knowledge and competence to ensure they are meeting their duty of care provisions through the application of due diligence to a level that is reasonably practicable. This training was also rolled out to Supervisors who, on occasion, fill in for managers when they are leave.

Results of the external gap analysis audit quantifying compliance with the Nat' Tool (V3) is outlined in section 8 of this report.



While Council has now developed a comprehensive volunteer induction and supervision process and representatives from several groups have been trained, it appears that this process has stalled with no final completion of the process.

It is recommended that those Managers responsible for the care and control of volunteers in their workplace be encouraged to implement System requirements.

Given that a volunteer procedure, associated training and induction packages have been written, this issue is not identified as a Corporate Safety Initiative as the precursor work is completed but requires Managers to identify those volunteer groups and individuals under their control that require this training and certification and to organise and formalise the process.

6.0 System Review

6.1 Gap Analysis

A recent audit (gap analysis) of the WHS&IM System has identified a negative trend with compliance falling by 12% since January.

October 2015 Gap Analysis of the WHS&IM System against the Nat Tool V3.

Conformances	Partial Conformances	Non Conformances	Total Applicable/ Verified	Not Applicable	Not Able to be Verified
93 = 87%	6 = 6%	8 = 7%	107	1	0

July 2016 Gap Analysis of the WHS&IM System against the Nat Tool V3.

Conformances	Partial Conformances	Non Conformances	Total Applicable/ Verified	Not Applicable	Not Able to be Verified
86 = 80%	14 = 13%	7 = 7%	107	1	0

6.2 Proposed Changes To SI Licensing Requirements

It seems very clear from the language used in *Report Recommendation 8* (PWC final report) that SIRA will no longer be directly involved in WHS issues and instead will focus entirely on the business approach to the Workers Compensation license and the risk, culture and financial management of the Self-Insurer license holder.

WHS issues will be the sole responsibility of SafeWork NSW as it is for the other 93% of workers (wages) not covered by SI. This will simply bring SI in line with the rest of the state and enforce WHS Legislative compliance as the minimum standard.

The brief provided to PWC for the review of SI licensing conditions was, in part, to comply with and implement the scope and intent of the IPART Legislation.

Given this framework it is reasonable to expect that SafeWork NSW will deal with any SI WHS issues as it does for the rest of the state, as it seems apparent that there is no appetite to again duplicate government services and enforce artificial standards for selective groups. Ultimately, SI is nothing special and just another means to an end. In litigated matters relating to WHS we are all measured against our compliance with the legislation and the artificial construct of the Model holds no sway.

There is concern in some areas that existing WHS standards may slip given this proposal, however we believe that the application of smart and nuanced KPIs embedded into existing corporate planning arrangements should go a long way to alleviating these concerns.

Minimum safety standards are very clearly defined and established by case law, particularly as the WHS Legislation is now intrinsically linked to the Corporations Act. This merging greatly assists us in interpreting and extrapolating the requirements of section 27 of the WHS Act – Duty of Officers particularly the Due Diligence requirements. There is no doubt as to what is required under law to meet our minimum WHS standards.

Our suggested approach at Hawkesbury to address these potential changes will be to undertake a gap analysis between our current System and Legislative requirements. Once this is completed it is intended to have a detailed discussion with management as to what we should retain/enhance and what we feel can be wound back.

It is important that these discussions are held within the context of section 27 Duty of Officers of the WHS Act. In this regard it is very important to have a clearly defined and agreed purpose as to what we want out of this review. It cannot be “one dimensional” i.e. to save money. Management need to understand that WHS compliance can be leveraged to be a very effective, composite management tool and is their best and only defense should the proverbial happen.

Once the level of compliance is agreed, nuanced KPIs can be established against an agreed measure (4801, 45001, Model etc.) with these built into existing Corporate Management and Strategic Planning arrangements. It is anticipated that an annual independent audit will compliment internal auditing schedules to verify compliance levels.

The WHS team is excited by the opportunity to be able to assist in application of resources and plan strategies that we believe (cost – benefit) will deliver the greatest returns in safety to our organisation rather than plan and implement processes that are more designed to meet accentuated audit criteria and auditor preference. In this way our Safety System can actually now be based on fundamental Risk Management methodologies.

SIRA need to understand that, in the case of Local Councils, the WHS Act is not the only Legislation we need to comply with and indeed the Local Government Act, particularly section 402, imposes considerable additional consultative, reporting and planning arrangements. It is inevitable that SI Councils will maintain a high level of compliance by simply complying with the various overarching Legislation.

The above will ensure we are not adding additional burden or cost to maintaining high levels of WHS compliance and reporting but simply meeting the requirements of the Legislation which is completely in line with the focus of IPART. Additionally it provides for greater flexibility at the local level to leverage the best safety outcomes.

Considerable consultation and review will however be necessary to ensure we get the balance right so that we are not over servicing but still maintaining a Safety System that is fit for purpose.

7.0 Review of Incident Reports

The Incident Reporting System has considerably reduced the amount of paperwork needed to be completed when reporting an accident, injury, near miss, insurance issue, System improvement or contractor improvement notice. This transition has been well received and has streamlined the reporting process.

Council’s Safety Officers monitor progress towards completion of corrective actions associated with the incident reports on a daily basis and assist management with subject matter expertise. The responsibility for the logging and timely and effective completion of incidents remains with the manager and it is their responsibility to monitor this System to ensure adequate and timely responses to identified safety issues.

Once notified by the responsible manager that the incident can be closed, the Safety Officer reviews the implemented safety controls to ensure no other hazards have been introduced and that the established controls are effective and reasonably practicable.

All incidents are now centrally handled by the WHS team and distributed in real time to affected workers, management, Return to Work (RTW) and Insurance Officers and others as required.

Officers (Managers and above) are responsible for the review and acceptance of proposed control measures and ensuring issues are completed on time. Comments by Managers along with photos, reports and other relevant attachments recorded on a regular basis helps demonstrate due diligence towards their safety RAAs.

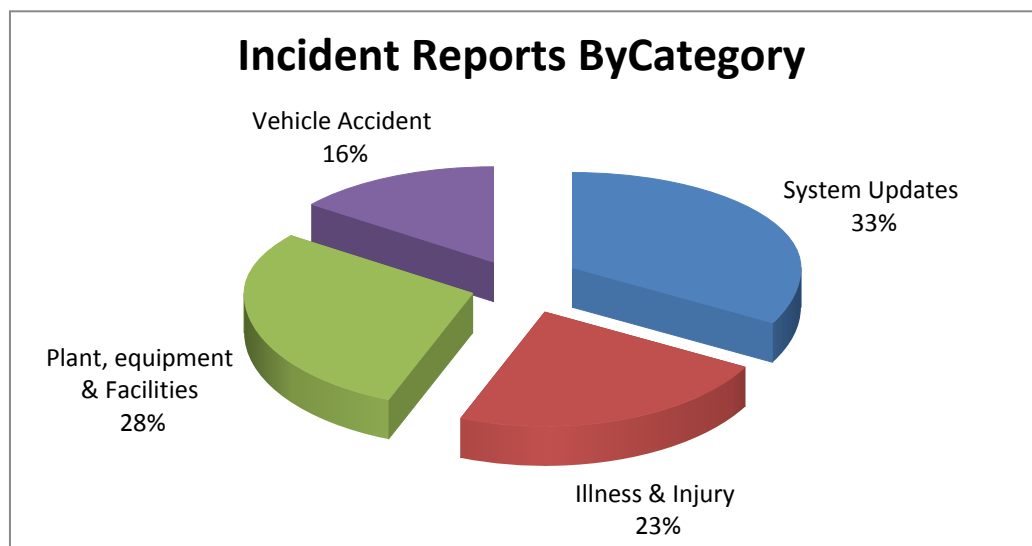
Officers and Supervisors are able to access their Incident Reports at any time via Hawkeye to check progress and add comments.

7.1 Incident Reporting

191 incident reports were raised between January and October 2016.

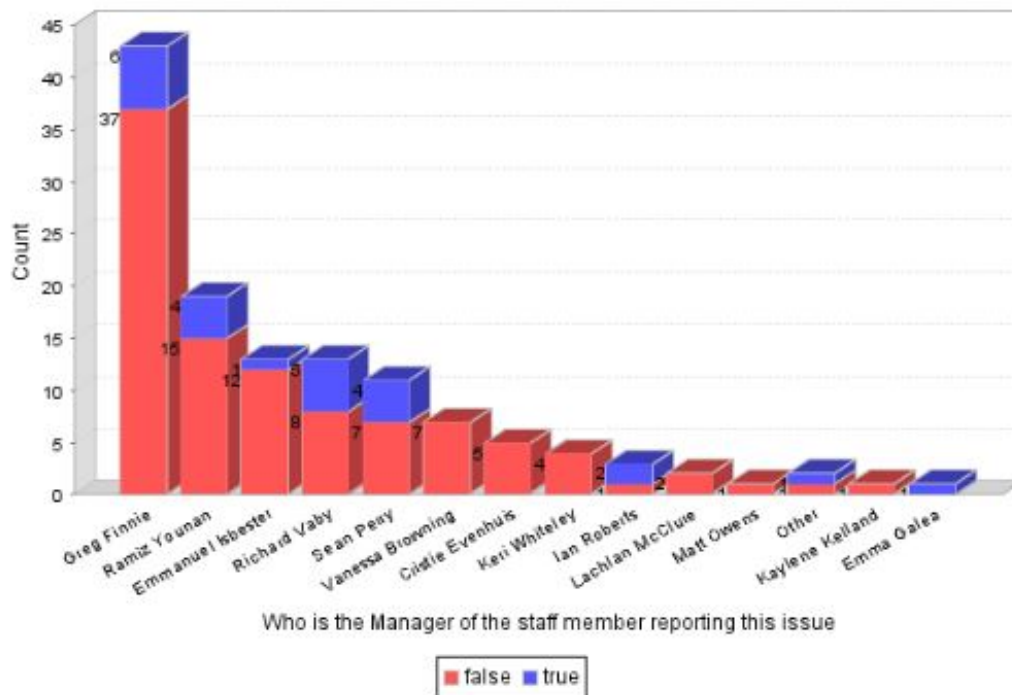
A review of the general categories the Incident Reports reveals;

- The majority were for System updates (63) necessitated by changes to Legislation or from internal and external audits as well as hazards identified by workplace inspections or other observations.
- While the number of personal injuries recorded is high (43) the number that then go on to be recorded as LTIs or MTOs is relatively low. This would indicate that injury reporting is now more reflective of actual incidence rather than just reporting the major issues. This is an improvement on previous years.
- Issues relating to Plant, Equipment and Facilities (49) tend to be minor in nature but again demonstrates that there is a vibrant culture of reporting which is encouraging.
- The trend for vehicle accidents continues to rise (32) and it recommended that a review of all vehicle accidents be undertaken to determine route causes and training be provided to address this trend.



Incident Reports Status as at end October 2016

All Open Incident Reports by Branch Including Overdue (Blue)



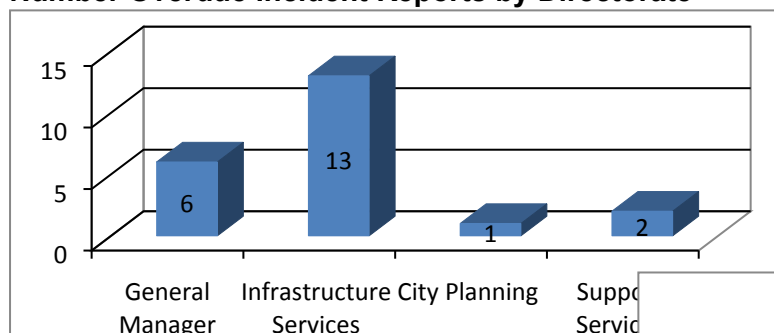
Overdue Incident Reports

The identification, recording and subsequent control of hazards in the workplace is critical to ensuring a safe place of work and safe systems of work. It also nurtures our safety culture with workers seeing safety improvements happening in real time in the workplace as a result of their reporting and involvement.

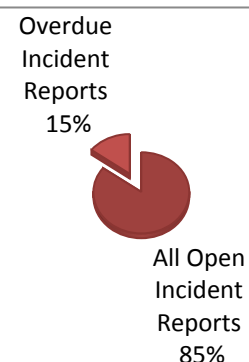
One of the Officer KPIs is the requirement for Incident Reports to be closed out within prescribed timeframes $\geq 95\%$.

There has been a trend for this requirement to slip to the point that last year's WHS Report identified this as an issue of significance and a subsequent Corporate Safety Initiative to arrest this decline was developed and championed by the General Manager. Since this time, percentages for completion have reversed and started to rise however we are still below the KPI requirement and it will take a considerable effort of will to achieve this target by December.

Number Overdue Incident Reports by Directorate




Total Number Overdue for Council



Percentage Overdue by Directorate KPI ≥ 95%.

Position	Overdue Incident Reports	% Incident Reports Overdue
General Manager	6	14%
Director Infrastructure Services	13	28%
Director City Planning	2	13%
Director Support Services	1	5%

 **Comment:** Of the 191 incidents reported, 15% are currently overdue with our KPI for this being 95% completed within the prescribe timeframe. Primary reasons for this outcome include:

- Failure of some Managers to keep up to date with the process.
- Failure of some managers to sign off at completion and inform the Safety Officer so they can be closed.
- While the percentage completed has improved there is a significant number of Incident Reports that will fall due at the end of January 2017. Unless addressed this will have a significant, negative impact on this KPI.

8.0 Review of Audit Results

8.1 Internal Auditing

The purpose of the Internal Audit Program is to assess the level of implementation and resilience of the Work Health, Safety and Injury Management (WHS&IM) System against NSW SafeWork Authority Self-Insurer and Legislative requirements. Results of Council's ambitious audit process are used to identify opportunities for continuous improvement of Council's Safety System. Auditing identifies System gaps, contributes to planning arrangements and assesses the adequacy of implementation and the effectiveness of the strategies put in place to prevent injury and illness in the workplace.

Audit schedule 11% achieved.

2016 Audit Results - KPI 75%						
Directorate	Branch	Location	Date	Element	Result	Comments
Support Services	Cultural Services		January	007.5 Hazardous Manual Tasks	88%	Unsuccessful audit with two non-conformances raised # 872 #877
Infrastructure Services	Building Services		January	007.27 Contractor Management		
Executive Services	Human Resources		February	007.23 Tool Box Talks / Team Meetings	N/A	This audit was conducted as an information/training session. See audit report for full details
Support Services	Financial Services		February	005 Purchasing of Goods and Services		
Infrastructure Services	Director Infrastructure Services		February	007.15 Asbestos		
Executive Services	Risk Management		March	009 Corrective Actions	60%	Unsuccessful audit with two non-conformances raised # 905 # 906
Infrastructure Services	Waste Management		March	008.2 Environmental Monitoring and Health Surveillance		
Infrastructure Services	Parks and Recreation		March	006.1 Hazard Identification		
City Planning	Development Services		April	007.21 Certification and Licencing		
Support Services	Corporate Services and Governance		April	009.2 Incident Reporting, Review and Investigation		Carol to audit
Infrastructure Services	Design and Mapping		May	007.3 Traffic and Pedestrian Management		
Infrastructure Services	Parks and Recreation		May	007.9A Transporting Plant Equipment and Materials		

Support Services	Director Support Services		June	007.25 Facilities and Workplace Amenities		Carol and Steve to Audit
Minerva	Minerva		June	002 WHS Management System		
Executive Services	Strategic Activities		July	010 Records		
City Planning	Director City Planning		August	007.24 Workplace Signage		Carol and Steve to Audit
Infrastructure Services	Building Services		August	003 Design Control		
City Planning	Environment and Reg Services		August	007.10 Noise		Carol to Audit
Support Services	Cultural Services		September	007.4 Sharps Management		Carol to Audit
City Planning	Director City Planning		September	009 Corrective Actions		Carol and Steve to Audit
Infrastructure Services	Building Services		October	007.11 Hot Work		
Support Services	Director Support Services		October	013 WHS Reporting		Carol and Steve to Audit
Executive Services	Risk Management		November	002.1 WHS Management Planning		Carol and Steve to Audit
Infrastructure Services	Construction and Maintenance		November	006 Risk Management		
City Planning	Strategic Planning		November	007.18 Hot and Cold Environments		Carol to audit
Infrastructure Services	Construction and Maintenance		November	007.7 Isolation		
Executive Services	Corporate Communications		December	007.20 Electricity		Carol to audit

8.2 External Audits

Three external audits we undertaken during the course of this calendar year being:

- I. WHS&IM System gap analysis against the Nat Tool V3.
- II. ACM audit against WHS legislation, Nat Tool, How to Manage and Control Asbestos in the Workplace COP and How to safety remove Asbestos COP.
- III. Hazardous Chemicals GHS audit against WHS Legislation, Globally Harmonized System of Classification and Labeling of Chemicals, How to Manage and Control Asbestos in the Workplace COP, How to Manage WHS Risks COP, How to Safely Remove Asbestos COP, Labeling of Workplace Hazardous Chemicals COP, Managing Risks of Hazardous Chemicals in the Workplace COP, Preparation of SDS for Hazardous Chemicals COP, Safe Handling of Timber Preservatives and Treated Timber COP, Safe Use and Storage of Chemicals (including Pesticides and Herbicides) in Agriculture COP, Safe use of Bulk Solid Containers and Flatbed Storage including Silos and Bins COP, Safe use of Pesticides in Non-Agricultural Workplaces COP, AS 1940 the storage and handling of flammable and combustible liquids and AS 1596 the storage and handling of LP gas Nat Tool V3.

I. WHS&IM System Gap Analysis

It is a requirement of SI licensing that a third party audit is undertaken annually to demonstrate the actual level of System compliance.

It is disappointing to see that the currency of our WHS&IM System which achieved 92% compliance at the start of this calendar year has now dropped to 80%. A concerted effort will be required to arrest this decline.

Additional to the above is the concern that while this audit is designed to highlight how our System documentation stands up against the requirements of Legislation, it is not an indication in any regard as to the degree of System implementation in the field. As a general rule, implementation will be below compliance levels. Determining the level of actual implementation of the Safety System in the field is identified through the internal auditing program however this aspect is not functioning at present.

There are a substantial number of Incident Reports listed for attention to address these System non-conformances which are due for completion in early 2017. Resource issues make it unlikely they will be addressed by this time in which case this will impact on the current 15% of overdue Incident Reports raising the level of non-conformance significantly.

Conformances	Partial Conformances	Non Conformances	Total Applicable/ Verified	Not Applicable	Not Able to be Verified
86 = 80%	14 = 13%	7 = 7%	107	1	0

II. Asbestos Containing Materials (ACM) Audit

The ACM audit was organised to check progress against the Director Infrastructure Services Corporate Safety Initiative of “Controlling ACM in the Workplace”. This is a mammoth task across two years and the 74% compliance was a very pleasing result and a credit to Jeff and his team.

Incident Reports have been raised to address non-conformances which fall into operational aspects which will be completed by the Building Services Branch and Risk Management in terms of System enhancement. It is unlikely the System updates will be completed by the end of the year due to resource issues.

Compliances	Partial Compliances	Non Compliances	Not Applicables	Not Able to be Verified
56 = 74%	20 = 26%	0	1	7

III. Hazardous Chemicals - Globally Harmonized System (GHS) Audit

SafeWork NSW have allowed five years for PCBUs to transition to meet this change in Legislation. It is likely that early in the New Year licensed sites relating to GHS will be visited by SafeWork NSW inspectors to verify compliance.

Council has two licensed sites being the Wilberforce Depot and SWSTP due to the quantities of hazardous chemicals they store.

It was pleasing to see that all “big ticket” issues have been addressed, however the score of 48% compliant was disappointing. A review of partial and non-compliances identifies that these are mostly System and training related and Incident Reports have been raised to address these. Local issues such as the inappropriate labeling or storage of isolated and small quantities of hazardous chemicals also contribute.

It is unlikely that System documents and especially training issue will be addressed in the near future due to resource issues.

Compliances	Partial Compliances	Non Compliances	Not Applicables	Not Able to be Verified
43 = 48%	22 = 24%	25 = 28%	6	0



Comment

Auditing is a fundamental cornerstone of any quality Management System. Without ongoing review of the Safety System it is difficult to identify lead indicators and be proactive in safety.

It is recommended that management closely review the critical indicators as outlined in this report and summarised in section 12 – Conclusion.

9.0 WHS Consultation

Overall our consultation processes continue to function well. The HS Committee members are actively involved in the safety process and are moving towards a more strategic approach to managing safety at Hawkesbury.

The addition of monthly generic Toolbox Talks listed on Hawkeye assist managers and supervisors with discussing corporate safety issues with their staff.

No incident report recorded for the 2016 year involved consultation as an identified issue.

9.1 Review of Registers and Databases

With the assistance of some site specialist staff the WHS Unit has developed and maintains a range of Registers and Databases. All databases listed below have been reviewed, are current and are linked directly to the WHS section of Council's Intranet, Hawkeye, to assist staff and be immediately available in support of a safer work place.

1. **Legal Compliance Database:** has been updated and expanded to assist staff with quickly and easy reference to relevant Legislative and Best Practice requirements when developing safety controls. It is easily and universally accessible to all staff via the WHS section of Hawkeye.
2. **Training Database:** has been reviewed and updated to be a much more effective training and management tool. It is linked to Hawkeye to enable management to immediately check the currency of licences, certificates etc. in real time. It also assists with the induction and annual staff appraisal processes. Statistics on compliance are supplied on a monthly basis to MANEX and on a bi-monthly basis to the HS Committee and all staff.
3. **IT&M Database:** has been developed with data now mostly collected and database populated. It is anticipated that this process will be completed by the end of this year as scheduled. The completion of this process will be to set minimum inspection schedules and competencies attached to the operations aspects of this process.
4. **Incident Reporting Database:** is working well however Officers need to be constantly vigilant to ensure completion times and proposed controls are adequate and in accordance with System requirements.

Statistics on compliance are provided on a monthly basis to MANEX and Officers. Bi-monthly the Manager Risk Management provides statistics to the HS Committee which are available to all staff via attachment to WHS Noticeboards and on the WHS Section of Hawkeye.
5. **Risk Register Database:** has been enhanced and is the foundation stone of our risk identification and control process. It includes all manual handling risk assessments, occupational noise survey, site and activity based hazards and implemented controls.
6. **Chemical Management Database:** the online MSDS Chemical Management Database is a single repository of all chemicals used at Council. It contains site registers, risk assessments; quantities etc. and are an extremely effective tool for managing hazardous chemicals in the workplace. A review of this database is scheduled early in the new year to ensure Safety Data Sheets are GHS compliant.

10.0 Training

All WHS training is competency based and delivered by appropriately qualified and experienced trainers.

10.1 Training Statistics

- Number of courses = 64
- Number of staff invited to attend WHS training = 699
- Number of staff attending WHS training = 551
- Overall attendance rate = 79% (KPI = 85%)

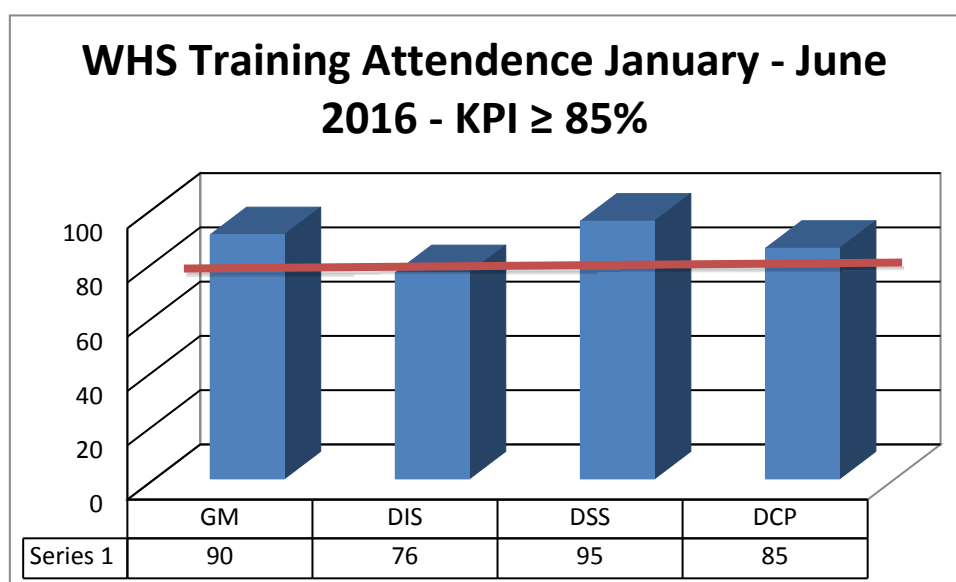
Date	Training	No Invited	No Attended	No Excuse	Excuse
4/1/16	WHS Induction New Staff	1	1		
18/1/16	WHS Induction New Staff	1	1		
1/2/16	WHS Induction New Staff	2	2		
8/2/16	WHS Induction New Staff	17	12		
15/2/16	WHS Induction New Staff	1	1		
15- 23/2/16	WHS Induction New Staff	1	1		
17/2/16	WHS Induction Management	18	14	1	3
22/2/16	WHS Induction New Staff	9	6		
23-24/2/16	Confined Space	2	2		
7/3/16	WHS Induction New Staff	10	10		
15/3/16	First Aid Training	24	19	4	1
16/3/16	First Aid Training	24	16	5	3
17/3/16	WHS Risk Management	16	14		2
21/3/16	WHS Induction New Staff	9	7		
23/3/16	WHS Risk Management	19	14	5	
30/3/16	WHS Chainsaw Op & Fell	6	6		
4/4/16	WHS Induction New Staff	6	6		
7/4/16	WHS First Aid	1	1		
18/4/16	WHS Induction New Staff	4	2		
26/4/16	Mental Health	22	21	1	
27/4/16	Mental Health	20	17	3	
28/4/16	WHS Chainsaw Operation	7	6	1	
2/5/16	WHS Induction New Staff	8	7	1	
4/5/16	Confined Space Emerg. Rescue	16	13	3	
5/5/16	WHS Emergency Warden Info Sess	11	8	3	
10/5/16	WHS Emergency Warden (Admin)	22	19		3
10/5/16	WHS Emergency Warden-Deerubbin Centre	18	18		
12/5/16	WHS Emergency Warden Companion Animal Shelter	6	6		
12/5/16	WHS Emergency Warden – MHSTP	2	2		
12/5/16	WHS Inductions Management	14	9	5	
16/5/16	WHS Induction New Staff	12	8		
26/6/16	WHS Bonded Asbestos	20	18	2	
30/5/16	WHS Induction New Staff	7	7		
1/6/16	WHS Induction New Staff	1	1		
6/6/16	WHS Induction New Staff	1	1		
9/6/16	WHS Dangerous Goods/Haz Sub	13	10	2	1
15/6/16	WHS Induction Management	15	9	6	
21/6/16	WHS Legislative Training	51	46	2	3
23/6/16	WHS Safe Work Near Powerlines	20	19	1	
27/6/16	WHS Induction New Staff	7	5		
11/7/16	WHS Induction New Staff	9	5		
18-19/7/16	WHS Safe Work near Powerlines	1	1		
20/7/16	WHS HSR Representative	5	3		2
25/7/16	WHS Induction New Staff	19	15		
27/7/16	WHS Volunteer – Supervisor	4	4		
8/8/16	WHS Induction New Staff	12	9		

17/8/16	WHS Work Place Inspectors	17	15	1	1
17/8/16	WHS Confined Space Training	5	5		
22/8/16	WHS Induction New Staff	11	7		
24-25/8/16	WHS Safe Work Near Powerlines	2	2		
31/9/16	WHS Asbestos Awareness	24	17	3	4
1/9/16	WHS Safe Work near Powerlines	1	1		
5/9/16	WHS Induction New Staff	5	3		
7/9/16	WHS Confined Space Training	3	3		
13-14/9/16	WHS Safe Work near Powerlines	1	1		
21/9/16	WHS First Aid Training	1	1		
21/9/16	WHS First Aid CPR Training	23	14	4	5
6/10/16	WHS First Aid Training	1	1		
12/10/16	WHS Working at Heights	19	13	3	3
17/10/16	WHS Induction New Staff	12	7		
19/10/16	WHS Induction New Staff	3	3		
19/10/16	WHS PPE Training	18	14	3	1
26-27/10/16	WHS Safe Work Near Powerlines	1	1		
27/10/16	WHS First Aid CPR Training	23	15	3	5
31/10/16	WHS Induction New Staff	10	8		

Estimated cost of non-attendance (based on \$250/person/session x 62) = **\$ 15,500** or approx. 18% of training budget.

Cumulative figures for overall training attendance for each Branch and Division are not available post June this year due to resource issues. January to June 2016 training attendance figures are included below;

Overall Average % for each Division to Date -- KPI is 85%	
Executive Division	90%
Infrastructure Services	76%
Support Services	95%
City Planning	85%



11.0 Proposed Safety Initiatives for 2017

The following items have been identified and are proposed for attention by management as a product of this report. They have been identified by:

1. Carryover of non-completed safety initiatives from 2016.
2. Issues identified for attention from Council's WHS 10 year plan.
3. Issues identified as a result of this review.

After review by relevant Safety personnel, the HS Committee and review and acceptance by MANEX, resource strategies and implementation plans will be developed.

Corporate Safety Initiative	Responsibility	Target	Measures
Health Surveillance	GM	Implement Health Surveillance program	Risk assessments completed Health surveillance programs implemented.
WHS&IM Document Review	Director CP	WHS&IM System documents reviewed and updated (carryover)	Need System documents updated to reflect Legislative compliance and Corporate Style Guide.
Develop SOPs	Director IS	SOPs are developed for plant and equipment	SOP to include risk and competency assessments as required.
IT&M Database	Director SS	Stage two – inspection frequencies and review standards established and implemented.	Minimum inspection standards established. Minimum qualifications of inspectors established.
Joint WHS duties	Manager RM	Identify those with which we share joint WHS responsibilities and implement suitable controls (Carryover)	<ul style="list-style-type: none"> • Identify all organisations for which we hold default joint WHS responsibilities. • Establish individual responsibilities. • Determine minimum reporting standards, qualifications and Management Systems to be implemented. • Establish controls to ensure safety in all aspects of operations. • Develop procedures incorporate RAAs into agreements and instigate.
Internal Auditing	Manager RM	System and compliance audits completed as per schedule. (Carryover)	<ul style="list-style-type: none"> • Enable resources for internal auditing program. • Report personally on a monthly basis results to HS Committee, Managers and MANEX.
Review of WHS Operations	Manager RM	Review WHS&IM System and associated resources	<ul style="list-style-type: none"> • Establish minimum acceptable compliance levels for WHS • Develop associated mechanisms for assessment.
Improve Compliance of WHS&IM System	Manager RM	Arrest negative trend	<ul style="list-style-type: none"> • Return WHS&IM System to achieve 90% or better against Legislative requirements. This includes delivery of associated training.

Corporate Safety Initiative	Responsibility	Target	Measures
05 – Achieve Management KPIs	All Officers	100% of stated values	<ul style="list-style-type: none"> • Minimum four safety related Toolbox Talks held annually. • One HS Committee meeting attended annually. • PSAPs are completed by end August and forwarded to Risk Management. • One SWMS observation review. • 85% training attendance. • 95% Completion of corrective actions within allocated time frames as determined by the initial risk assessment. • Annually attend Legislative training. • 95% scheduled Workplace Inspections completed and registered on ECM by the 10th of the month. • One Workplace Inspection – Management required participate in at least one inspection (WPI) annually.



12 Conclusion

This report is focused on quantifying the effectiveness of health and safety processes at Hawkesbury.

While it is pleasing to see that we continue to retain low levels of LTDR, LTFR and IRs it is evident that our Safety System is tracking in a negative direction.

Key indicators identifying this decline are:

- The number of incident reports not being completed within prescribed timeframes.
- The lack of internal auditing.
- The decline of Legislative compliance of our Safety System.
- The degree of implementation of the System at the local level.
- The struggle to achieve identified targets and objectives.

If there is a correlation between low injury rates and an effective and proactive Safety System, then these results could potentially jeopardise such outcomes in the future. This trend also has the potential to negatively impact on other areas of enterprise risk management.

Proposed safety initiatives identified in 11 above seek to address identified shortfalls and reverse negative, emergent trends.