

Purpose/comments: For endorsement

Action Minutes Justice Health Services Meeting: Work Health & Safety Committee

Meeting Date:	23 August 2018	Agenda Item No:	2.1
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	And the Control of th		
Subject:	Action Minutes of Justice Health S	ervices Work Health & Safe	ty Committee
	Meeting of 23 August 2018		****
Source:	Renee Wilesmith		
	Executive Assistant – Justice Healt	h Services	
111	Justice Health Services		

Justice Health Services Work Health & Safety Committee Meeting 23 August 2018

ACTION MINUTES

1. Attendance and Apologies

In Attendance:

Name	Role	1	Ap,
Dannielle Nagle	Operational Director, Justice Health Services (Chair)	1	
Deborah Plant	Operational Director, Dhulwa Mental Health Unit	1	
Jaime Bingham	Senior Manager, Forensic Mental Health Services	1	
Cheryl Cuthbertson	A/g Assistant Director of Nursing, Primary Health	1	-
Tasha Lutz	A/g Assistant Director of Nursing, Dhulwa Mental Health Unit	1	
Tegan Murray	HSR, Forensic Mental Health, 1 Moore St		AP
Gwynne Thomas	HSR, AMC, Primary Health		AP
Jacqueline Monaghan	HSR, AMC, Primary Health		AP
Yolanda Robertson	HSR, Bimberi, Primary Health		AP
Sue Tremble	HSR, DMHU		AP
Myette Leversage	HSR, DMHU		AP
Goodwell Mhlanga	HSR, DMHU	1	1
Denise Meyboom	Workplace Safety Representative	1	
Jacqui Raby	Administration & Information Manager, JHS		AP
Liza Marando	Administration & Information Manager, DMHU		AP

Minutes: Renee Wilesmith

2. Minutes and Action Arising from Previous Meetings

2.1 Action Minutes of Meeting

The Minutes from the previous meeting were endorsed.

2.2 <u>Outstanding Action Arising Running Sheet from previous meetings</u>

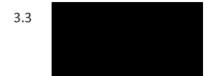
The outstanding actions arising were reviewed and updated.

NOTE: a quorum was not achieved and as such, no decisions were made this meeting

3. Reports

3.1

3.2 Page 2 to



3.4 <u>Dhulwa Mental Health Unit</u>

- Noted Tash and Deb are going to meet with HSR's and discuss reporting to ensure that the WHS issues are remaining on the corrective actions list.
- Noted that a WHS Report for ECU will need to be added/created.

3.5 Staff Accident/Incident Reporting

Noted there were 49 incidents recorded for the month.



20 x incidents at DMHU

- Noted that for the purpose of the WHS meeting, only absolute SAIRS will be discussed as a number of the incidents recorded are non-individual incidents.
- 4. Report from Workplace Safety



5. Divisional Workplace Goals & Objectives



6. Items to be included on the Program Risk Register



- 7. Items to be raised to the Divisional Work, Health & Safety Meeting
 - Nil.

8. Other Business

 Noted that DMHU have received formal advice regarding ASCOM duress alarms. There is a 6 second delay on the duress alarm going out to all other handsets.



Next Meeting:

The next Work Health & Safety meeting will be held 17 September 2018.



Mental Healtn, Justice Health and Alcohol & Drug Services Justice Health Services: Work Health & Safety Meeting



Sovernment Health

CANBERRA HOSPITAL AND HEALTH SERVICES

Meeting: August 2018

Outstanding Action Arising Running Sheet

Item	Action Item	Person(s)	From Meeting		Remarks
No		Responsible			
1.	Annual Checks	All Managers	August 2018	•	Annual Reports need to be provided to Denise Meyboom
					before the end of August 2018.
2.	Divisional	Dannielle Nagle	August 2018	•	Dannielle to send out an email to all HSR's as HSR's are to
	Workplace Goals and Objectives				review the Divisional Workplace Goals and Objectives.
3.	RISKMAN	Jaime Bingham	August 2018	9	Jaime to enter a RISKMAN regarding Duress alarms at AMC
H				_	not working.
4.					
.5.					

STEP 1: COMPLETE THE PLANNED INSPECTION FORM, TICK "Yes" OR "No" (No" Requires details in the Issue Identified column	A' ('No' Requires details in the Issue Identified column)	DATE:04/08/2018	INSPECTED BY (HSR/ Worker's name): Sue Tremble	Yes No N/A Issue Identified (add detail to Corrective Action Plan – page 5)			X	×	×	Ongoing policy development	×				×	×	X	X	×	×	×			×	×	×			×	×	×
	I: COMPLETE THE PLANNED INSPECTION FORM, TICK 'Yes' OR 'No' OR 'N/		CTED BY (Manager's name):Liza Marando	l ftem	ral Work Safety Issues	Are all Corrective Action(s) from last inspection complete?	Are policies, flow charts & reporting forms accessible in work area?	Have all workers received induction/orientation program?	Have all workers completed or programmed to attend mandatory training (incl. ACT Health Orientation, Child protection, Fire & Emergency, Manual Handling Awareness & Workplace Induction Pathway)?	Are Standard Operating Procedures (SOPS) in place and available?	Do all workers know where the nearest emergency exit/emergency assembly point is located?	Is the HSR posted on the WHS notice board?	Comments:	ekeeping	Are all walkways, floors, stairs (incl. Fire Stairs), and exits clear of obstruction?	Are all stock/ supplies safely stored and stacked?	Are floor surfaces clear of rubbish, liquid, debris, trip hazards, etc?	Are hazard/safety signs visible and posted correctly?	Is the workplace layout functional & safe?	Is there good access & egress to the work areas?	Is the work area free from any fumes, vapours or dust?	Other housekeeping issues:	Bu	Are light levels appropriate?	Are all lights working?	Are light diffusers clean free from debris?	Comments:	rical Safety	Has electrical equipment been tested & tagged, and within date?	Are leads managed safely to prevent damage or trip hazards?	Are there sufficient power outlets to operate electrical equipment in the area?

OR 'N/A' ('No' Requires details in the Issue Identified column) DATE:04/08/2018	INSPECTED BY (HSR/ Worker's name): Sue Tremble	Yes No N/A Issue Identified (add detail to Corrective Action Plan – page 5.)	×	×	×			×	×			×		×	×	×	×	× >		×			96 ×	×
N FORM, TICK 'Yes' OR 'No' OR 'N/A' (Init	INSPECTED BY (Manager's name):Liza Marando		5.4 Are all extension cords & fittings protected from damage & moisture?	5.5 Are all leads/plugs/outlets in good condition? (no exposed wires/crimps/tears/rips in the outer cable, or bent prongs)	ody Protected (RCD) area is tested and tagged? (6 monthly in clinical	5.7 Comments:	6. First Aid	6.1 Is the first aid kit fully stocked & current?	Are First Aider's names & location posted on the WHS notice board?	6.3 Comments:	7. Fire/ Emergency/ Security	 equipment been serviced according to the required schedule (check yellow hly tinguishers 	Hose reels Fire blankets # the punch mark on the yellow tags is the date last inspected.	pment that is missing, or s, Hose Reels, Fire/Smixit Signs, Smoke & Ther FIP Panels.)	slear of obstruction, easily opened?	Are fire stairs clear of obstruction and in working order? (e.g. lights/doors/handrails)	Is all Emergency Exit lighting (running person) in working order?	7.7 Are emergency evacuation diagrams/pians/procedures current & posted? 7.7 Are emergency contacts current & posted on the WHS notice hoard i.e. Fire Warden?	Are duress alarms working & frequently tested?	Are there procedures/ processes in place for issues of violence/aggression?	7.10 Comments:	8. Personal Protective Equipment (PPE)	Is eye protection available & being used when required?	8.2 Is face protection available & being used when required?

, TICK 'Yes' OR 'No' OR 'N/A' ('No' Requires details in the Issue Identified column)	DATE:04/08/2018	INSPECTED BY (HSR/ Worker's name): Sue Tremble	Yes No N/A Issue Identified (add detail to Corrective Action Plan - page 5)	×	><	×	Pe		×	ble? x	good condition?			×	edures being used?	×		to as Dangerous Substances below *NB Highly volatile Dangerous Substances are to be reviewed more frequently	×	and easily accessible?	sily accessible for the safe handling x		gerous oubstances? Is this training x	drums labeled correctly? (incl. x		intact? (incl. separation and		ey are not out of date?	X		X	19 x	7
STEP 1: COMPLETE THE PLANNED INSPECTION FORM, TICK 'Yes' OR 'No' O	WORK GROUP: Dhulwa Mental Health Unit	INSPECTED BY (Manager's name):Liza Marando	Item	Is hearing protection available & being used when required?	Is appropriate PPE being used correctly?	Is PPE stored, maintained appropriately?	Comments: New PPE (elastic strap mask) have been ordered	9. Machinery & Equipment	Is equipment maintained & serviced accordingly?	Are records of equipment maintenance within date & available?	On visible appearance, does all equipment appear to be in good condition?	Comments:	10. Work Practices	Is there evidence that all equipment is being used correctly?	From observation, are correct hazardous manual task procedures being used?	If gas cylinders are being used, are they secured/stable?	Comments:	 Hazardous Substances/ Dangerous Goods/ chemicals – referred to as Dangerous Substan 	Is the Dangerous Substance Register current and easily accessible?	Are all Safety Data Sheets (SDS, formerly MSDS) current and easily accessible?	Are risk assessments and SOPs completed, current and easily accessible for the safe h	or all darigerous substances:	Are all workers properly dailifed in the safe figuraling of Dailigerous Substances? Is this in included in the Local Orientation program?	Are Dangerous Substances including those stored in tanks/ drums labeled correctly? (incl.	items that have been decanted or awaiting disposal)	Are Dangerous Substances stored correctly? Is packaging intact? (incl. separation and	segregation of incompatible chemicals)	Are stocks of Dangerous Substances checked to ensure they are not out of date?	Are Dangerous Substances disposed of correctly?	Are spill kits available for dangerous substances? Are workers trained in using a spill kit?	Is waste disposed of in correct the containers/ bins? (e.g. Clinical waste only in bins provided)	Are medication/ drugs securely maintained and accounted for?	Comments:
STEP 1.	WORK	INSPEC	Item No	8.3	8.4	8.5	8.6	9. Machir	9.1	9.2	9.3	9.4	10. Work	10.1	10.2	10.3	10.4	11. Hazaı	11:1	11.2	11.3	7	-	11.5		11.6		11.7	11.8	11.9	11.10	11.11	11.12

STEP 2. COMPLETE PLAN FOR ALL IDENTIFIED ISSUES THAT CAN BE RESOLVED IMMEDIATELY (Sign-off when completed)

describing the first transfer of the	OR N/A (No Requires details in the issue identified column)	INSPECTED BY (HSR/ Worker's name): Sue Tremble	N/A Issue identified (add detail to Corrective Action Plan - page 5.)								Issue has been raised with ASCOM and SS ICT for follow up. Facility manager has raised this issue in the Issues register.								
2	Redi	PECT	Yes No																
6,107 FT V 12-65	ON O	INS	Yes	THE STATE	×	×	×	×			×								
STED 4. COMBLETE THE BLANNED INSPECTION FORM TICK (V. 100 M.) OF (N.)	WORK GROUP: Dhulwa Mental Health Unit	(Manage	Item No Item	12. Workstations	Are the workstations in the area set up ergonomically? (refer to section 7.7.14.1, 7.7.15 & WHSF.31 Workstation checklist or ergonomist/OT formal workstation assessment)	Do chairs have the correct castors for the floor type (e.g. soft tyre for hard surfaces, hard plastic for carpeted surfaces)?	Are desks/worktops/benches clutter-free?	Is there sufficient legroom under desks/worktops/benches?	Comments:	13. Other Issues (specific to your work area) i.e. PC2 requirements for laboratories	Delayed Code Black response on the Duress system and annunciator								
0	WOR	INSP	Item N	12. Wo	12.1	12.2	12.3	12.4	12.5	13. Oth	13.1	13.2	13.3	13.4	13.5	13.6	13.7	13.8	13.12

**Note: Corrective Actions shall be established by referring to the Hierarchy of Control, section 7.1.11 or WHSF.21 in the Health Directorate's Work, Health and Safety Management System (WHSMS). The Hierarchy of *Use the Risk Matrix located in Section 4, WHSF.20 in the WHSMS - all High and Extreme risks must be reported in Riskman (Non-Individual form) and the relevant Tier 2 Health and Safety Committee (HSC) Control is, in descending order of effectiveness: Elimination, Substitution, Isolation, Engineering, Administration and Personal Protective Equipment.

^{***}Corrective Actions are a management responsibility
****See WHSMS section 7.1 Risk Management

WHS Issued Identified	Risk Rating*	Corrective Action**	Person Responsible***	Date complete****	Signature
As above					
STEP 3. ADD ALL OUTSTANDING ISSUES IDENTIFIED TO WORK AREA'S CORRECTIVE ACTION PLAN	IED TO WORK	AREA'S CORRECTIVE ACTION PLA	Nt		January January
Issue Identified	Date Identified		Person Responsible		
As above					
					The second secon

STEP 4. SIGNATURES REQUIRED (when the Planned Inspection & this form have been completed)

Signature:	
Supervisor/ Manager:	

HSR/ Worker:

Tier 2 HSC meeting date:

Date:

Date:

I acknowledge that I have completed a Planned Inspection of the relevant work area and either completed or assisted in completing this checklist accordingly.

STEP 1: WORK	STEP 1: COMPLETE THE PLANNED INSPECTION FORM, TICK 'Yes' OR 'No' OR 'N/A' ('No' Requires details in the Issue Identified column) WORK GROUP: Cassia/Dhulwa Mental Health Unit	' ('No' DATE	'No' Requires deta DATE: 19/08/2018	etails in the Issue Identified column) 18
INSPEC	INSPECTED BY (Manager's name): Tash Lutz	INSP	ECTED BY	INSPECTED BY (HSR/ Worker's name): Myette Leversage
ftem No	Item	Yes	No N/A	Issue Identified (add detail to Corrective Action Plan – page 5)
1. Genera	1. General Work Safety Issues			
1.1	Are all Corrective Action(s) from last month's inspection complete?		_	
1.2	Are policies, flow charts & reporting forms accessible in work area? e.g. RTW, Riskman	_	×	
1.3	Is the work area induction/orientation program performed for all new workers? (this should	×		
	inciude emergency awareness, dangerous substances & nazards specific to the work area)			
4:	Have all relevant workers completed or programmed to attend mandatory WHS training (incl. Danoerous Substances, Manual Handling, SAIR etc)?	×		
1.5	Are Standard Operating Procedures (SOPS) Safety Rules developed & posted?	×		
1.6	Do all workers know where the nearest emergency exit/emergency assembly point is located?	×		
1.7	Do all workers know who the HSR is for the work area/ department?	×		
8.	Comments:			*
2. Housekeeping	eeping			
2.1	Are all walkways, floors, stairs (incl. Fire Stairs), and exits clear of obstruction?	×		
2.2	Are all walkway lines clearly marked?	×		
2.3	Are all stock/ supplies safely stored and stacked?	×		
2.4	Are floor surfaces clear of rubbish, liquid, debris, trip hazards, etc?	×		
2.5	Are stairs, steps & treads safe?	×		
2.6	Are hazard/ safety signs visible/ legible?	×	VS	
2.7	Is the workplace layout functional & safe?	×		
2.8	Is there good access & egress to the work areas?	X		
2.9	Is the work area free from any fumes, vapours or dust?	X	200	
2.10	Comments:			
3. Lighting				
3.1	Are lighting standards adequate in all areas, including external areas? (e.g. no glare on PC monitor)	×		
3.2	Are light fittings clear & in good working order?	×		
3.3	Comments:			
4. Ventilation	tion			
4.1	Is there adequate ventilation?	×		
4.2	Is the ventilation draught-free?	×		
4.3	Comments:			20
5 Flectrical Safety	al Safatu			0

STEP 1	STEP 1: COMPLETE THE PLANNED INSPECTION FORM, TICK 'Yes' OR 'No' OR 'N/A'	, ('No' R	equires	'N/A' ('No' Requires details in the Issue Identified column)
WORK	ı Unit	DATE	DATE: 19/08/2018	2018
INSPEC	INSPECTED BY (Manager's name): Tash Lutz	INSPE	CTED B	INSPECTED BY (HSR/ Worker's name): Myette Leversage
Item No	Item	Yes	No	N/A Issue Identified (add detail to Corrective Action Plan – page 5)
5.1	Has electrical equipment been tagged & tested? Is it within the correct time frame? (minimum vearly)	×		
5.2	Are leads off the ground or in a conduit/covering or cable tray?	×		
5.3	Are there sufficient power outlets to operate electrical equipment in the area? (i.e. NO double adapters no power hoards plinned into power hoards or extension leads into extensions leads.)	×	>	
5.4	ds & fittings supported above work areas, wet areas & passages safely?	×		
	cords not knotted)		Ñ	
5.5	Are all extension cords & fitters protected from mechanical damage & moisture? Are all leads/plugs/outlets in good condition? (no exposed wires/crimps/tears/rips in the outer	××		
5.7	Are all routed cords in good condition? No evidence of stretching/crimping/wear and tear? inclusive of electronic equipment (Pumps, Beds, Plinths, Scissor lifts etc.)	×		
5.8	Are headsets in good working order?	×		
5.9	The Cardiac and/or Body Protected (RCD) area is tested and tagged? (6 monthly, if applicable)	×		
5.10	Comments:	7		
6. First Aid				
6.1	Is the first aid kit fully stocked & current?	6	3	
6.2	Are First Aider's names clearly identified? Do workers know who the First Aid Officer is for the work area?		×	
6.3	Is there a method for recording injuries? (Riskman or ACT Govt. Accident Incident Report)	×		
6.4	Do all workers at the workplace know the first aid procedures to be followed in the event of serious injury or incident (determine from interview)?	×		
6.5	Comments:			
7. Fire/ Er	7. Fire/ Emergency/ Security			
7.1	Has all emergency equipment been serviced according to the required schedule (check yellow tag)? Fire Extinguishers, Hose Reels, Blankets and Hydrants (6 monthly), Fire Doors (12 Monthly), Smoke Doors (monthly).	×		
7.2	Has emergency equipment that is missing, or recently been used, been replaced? (Items may include: Extinguishers, Hose Reels, Fire/Smoke Doors, Blankets, Break Glass alarms, Manual Call Point, Exit Signs, Smoke & Thermal Detectors, Sprinklers, Fire Suppression, WIP Phones and EWIS/FIP Panels.)	×		
7.3	Are all exits/fire doors clearly marked, clear of obstruction, easily opened?	×		20
7.4	Check all Emergency Exit lighting (running person) is in working order and direction correct	×		
(.5	Are emergency evacuation diagrams/plans/procedures available and current?	×		

INSPECTED BY (Menager's name). Tash Lutz Inspect Park Par	WORK	WORK GROUP: Cassia/Dhulwa Mental Health Unit	DATE	DATE: 19/08/2018	
Are fire stairs clear of obstruction and in working order? (e.g. lights/doorshandralis) Are duress alarms available/working/frequently tested? Are duress alarms available/working/frequently tested? Are there procedures processes in place for issues of violence/aggression? Comments: Sesonal Protective Equipment (PPE) Is she protection being used when required? Is she dangerfout of service tag system in place? Is the dangerfout of service tag system in place? Is the dangerfout of service tag system in place? Are records of equipment maintenance in the place of the place	INSPEC	TED BY (Manager's name): Tash Lutz	INSPE	TED BY (HSR/ Worker's name): M	/ette Leversage
Are fire stairs clear of obstruction and in working order? (e.g. lights/doors/handralis) Are duress alarms available/working/frequently tested? Are duress alarms available/working/frequently tested? Comments: Is eya protective Equipment (PPE) Is the parporpate PPE being used when required? Is the danger/out of service tag system in place? Is the danger/out of service tag system in place? Is the danger/out of service tag system in place? Is the danger/out of service tag system in place? Is the danger/out of service tag system in place? Is the danger/out of service tag system in place? Is the danger/out of service tag system in place? Is the danger/out of service tag system in place? Is the danger/out of service tag system in place? Is the danger/out of service tag system in place? Are records of equipment the service tag system in place? Are records of equipment the service tag system in place? Are ladders/stsb used stafely and in good condition? Are all adders/stsb used stafely and in good condition? Are all adders/stsb used stafely and in good condition? Comments: Is the Dangerous Substance Register current and easily accessible? Are all Safety Data Sheets (SDS, formerly MSDS) current and easily accessible? Are all safety Data Sheets (SDS, formerly MSDS) current and easily accessible? Are all dangerous substances Properly trained in the safe handling of Dangerous Substances Properly trained in the safe handling of Dangerous Substances Indication program? Are all workers properly trained in the safe handling of Dangerous Substances Its included in the Local Orientation program? Are all bangerous substances Individuity those stored in tarks/ drums labeled correctly? Are all bang	Item No	Item		N/A	ail to Corrective Action Plan - page 5)
Are duress alarms available/working/frequently tested? Are duress alarms available/working/frequently tested? Are there procedures/ processes in place for issues of violence/aggression? X September 2 September 2 September 3	7.6	Are fire stairs clear of obstruction and in working order? (e.g. lights/doors/handrails)	×		
Are there procedures/ processes in place for issues of violence/aggression? Are there procedures/ processes in place for issues of violence/aggression? Comments: Is appropriate PPE being used when required? X X X X X X X X X	7.7	Are duress alarms available/working/frequently tested?	×		
Comments: Is eye protective Equipment (PPE) Is eye protection being used when required? Is tage protection being used when required? Is tage protection being used when required? Is tage protection being used when required? Is the danger/out of service 18g system in place? X Is the danger/out of service 18g system in place? X Is the danger/out of service 18g system in place? X Is the danger/out of service 18g system in place? X Is the danger/out of service 18g system in place? X Are reacrition for the safety and in good condition? X Are ladders/steps used safety and in good condition? X Are ladders/steps used safety and in good condition? X Are ladders/steps used safety and in good condition? X Are ladders/steps used safety and in good condition? X Are ladders/steps used safety and in good condition? X Are ladders/steps used safety and in good condition? X Are ladders/steps used safety and in good condition? X Are all safety of the all equipment is being used correctly? X Comments: Is there evidence that all equipment is being used correctly? X Are all Safety Data Sheatoce Register current and easily accessible? X Are all Safety Data Sheatoce Register current and easily accessible? X Are all safety Data Sheatoce Manual current and easily accessible for the safe handling x Are all amperious substances found the safe handling of Dangerous Substances? Is this training X Are all workers properly trained in the safe handling of Dangerous Substances? Is this training X Are all workers properly trained in the safe handling of Dangerous Substances? Is this training X Are all workers properly trained in the safe handling of Dangerous Substances? Is this training X Are all workers properly trained in the safe handling of Dangerous Substances? Is this training X Are all workers properly trained in the safe handling of Dangerous Substances including the substances including the substances including the substances includ	7.8	Are there procedures/ processes in place for issues of violence/aggression?	×		
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Is face protection being used owner required? Is appropriate PPE being used correctly? Is appropriate PPE being used correctly? Is the dangerfout of service tag system in place? X Is the dangerfout of service tag system in place? X Comments: Is equipment checked annually? Look for tag on equipment from Bio-Med, etc. X Are records of equipment maintenance including available? X Are ladders/steps used safely and in good condition? X Are ladders/steps used safely and in good condition? X Are ladders/steps used safely and in good condition? X Are ladders/steps used safely and in good condition? X Are ladders/steps used safely and in good condition? X Are ladders/steps used safely and in good condition? X Are ladders/steps used safely and in good condition? X Are ladders/steps used safely and in good condition? X Are all safely Dangerous Goods! chemicals – referred to as Dangerous Substances Plangerous Substance Manala current and easily accessible? X Are all safely Data Sheets (SDS, formerly MSDS) current and easily accessible? X Are all workers properly trained in the safe handling of Dangerous Substances? Is this training X Are all workers properly trained in the safe handling of Dangerous Substances? Are all workers properly trained in the safe handling of Dangerous Substances included in the Local Orientation program? Are Dangerous Substances including those stored in tanks/ drums labeled correctly? (incl. x Items that have been decarded or availing disposal	8.1	Is eye protection being used when required?	×		The contract of the contract o
Is appropriate PPE being used correctly? Is the danger/out of service tag system in place? Is the danger/out of service tag system in place? Is the danger/out of service tag system in place? Is PPE issued, stored, maintained, training given in its use? Comments: Is PPE issued, stored, maintained, training given in its use? Comments Is equipment checked annually? Look for tag on equipment from Bio-Med, etc X Are ladders/steps used safely and in good condition? X Are ladders/steps used safely and in good condition? X On visible appearance, does all equipment appear to be in good condition? X Comments: Is there evidence that all equipment is being used correctly? X Comments: Is there evidence that all equipment is being used correctly? X From observation, are correct hazardous manual task procedures being used? X From observation, are correct hazardous manual task procedures being used? X S From observation, are correct hazardous manual task procedures being used; X Comments: Is the Dangerous Substance Register current and easily accessible? X S Is the Dangerous Substance Manual current and easily accessible? X Are all Safety Data Sheets (SDS, formerly MSDS) current and easily accessible? X Are all dangerous substances? S Are all dangerous substances? S Are all dangerous Substances including those stored in tanks/ drums labeled correctly? (incl. X Included in the Local Orientation program? Are Dangerous Substances including those stored in tanks/ drums labeled correctly? (incl. X Included in the Local Orientation program?	8.2	Is face protection being used when required?	×		
Is the danger/out of service tag system in place? Is PPE issued, stored, maintained, training given in its use? Comments: Comments: Is equipment checked annually? Look for tag on equipment from Bio-Med, etc	8.3	Is appropriate PPE being used correctly?	×		
Is PPE issued, stored, maintained, training given in its use? Comments: Comments: Is equipment checked annually? Look for tag on equipment from Bio-Med, etc X Are records of equipment maintenance including available? X Are ladders/steps used safely and in good condition? X Are ladders/steps used safely and in good condition? X Are ladders/steps used safely and in good condition? X Comments: Substance and laquipment is being used correctly? X From observation, are correct hazardous manual task procedures being used? X From observation, are correct hazardous manual task procedures being used? X From observation, are being used, are they secured/stable? X From observation are being used, are they secured/stable? X Is the Dangerous Substance Register current and easily accessible? X Are all Safety Data Sheets (SDS, formerly MSDS) current and easily accessible? X Are all workers properly trained in the safe handling of Dangerous Substances? Is the Dangerous Substances including those stored in tanks/ drums labeled correctly? (incl. X Items that have been decanded or availing cisonsal) Items that have been decanded or availing cisonsal) Items that have been decanded or availed or avai	8.4	Is the danger/out of service tag system in place?	×		And the second s
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ur work area)	NMA Issue Identified (add detail to Corrective Action Plan – page 5)	NSPEC- Ses × × × × × × × × × × × × × × × × × × ×	INSPECTED BY (Manager's name): Tash Lutz
	×		Government Vehicle prestart checklist has been completed? (WHSF.37)
	×		סממונים ווכס מוח יוו פססת סמוימונים: ביפי ווכס טו אמוכן כו כוו, פססת ווכמת
מימים שמסט סטומונים: ב-אַ- ווסס טי אממן טי סוו, אַסטט וופמט,			clutter free and in good condition? Ela free of water or oil good tread
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STEP 2. COMPLETE PLAN FOR ALL IDENTIFIED ISSUES THAT CAN BE RESOLVED IMMEDIATELY (Sign-off when completed)	ES THAT C	AN BE RESOLVED IMMEDIATELY (S	Sign-off when completed)	THE PARTY OF THE P	
WHS Issued Identified	Risk Rating*	Corrective Action**	Person Responsible***	Date complete****	Signature
Spill kit not easily accessible and is currently located away from unit in the supply room		To be relocated on the unit - closer to clinical area	DMHU ADON		
Nurse Escorts feel unsafe. Concerns raised re escorting of some consumers at 1:1 ratio. Safety concerns raised relate to occupational violence and sexual assault (including consumers that may have a history of sexual assault). Other issues noted included: Not having a witness when an incident occurs. Lack of consumer supervision if the staff member needs to go to the toilet.		Email relating to vehicle transport resent to all DMHU staff ALL Dhulwa staff are to utilise a taxi for any 1:1 Dhulwa staff accompanied therapeutic leave escorts requiring vehicle transport. Where it is operationally feasible, another Dhulwa staff member will attend the therapeutic leave for the purpose of driving the ACT Government car. August 2018 The audit of 5 de-identified leave plans was tabled showing that the process for leave is in place and appropriate. Outstanding actions: DMHU Leave Procedure is being updated to ensure additional clarification for staff staff are encouraged to address all issues of concern relating to	DMHU UMT to update procedures – changes sitting with policy unit ALL staff to report incidents / concerns related to escorts		
		escorts / patient transports – no			205

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	DMHU UMT to send out	until	can						p	odate																		
	to ser	interim directive – until	operational manual can	-i				M	DMHU UMT to send	directive prior to update	S																	
	UMT	direct	onaln	plete				7	UMT	e prio	edure																	
ll ll	MHO	iterim	perati	be completed.	d				MHD	irectiv	of procedures	Á	>															
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0			ng Tetal	II.d	Operational management of	~	seclusion rooms to be	Si	ď,	peg	800	New	W to	team,	pted	tions	toria	and	SW. It		hat	pec	del,			_	ere a	e, so
ised t			Updates to deteriorating	patient procedure (mental health)	agem	de-escalation suite and	to be	Operational Procedures	ialise	ndors	À	nter	e, NS	MHD	d adc	risdic	in Vic	ania	in N	he	ılwa t	t aligr	e mo	nt	II the	entio	hey w	re car
ues ra		ons:	deter	cedur	lman	on sui	ome	l Proc	s spec	and e		oy Hu	servic	he Dí	ed an	of ju	icare	Tasm	spitals	ring t	of Dhu	som a	servic	nifica	een a	prev	ed. T	secu
s/iss	001	gactio	es to	11 pro	tiona	calatic	ion ro	tiona	S is g	ased	ckage	ered	alth	rs of t	ndors	mber	orens	nes in	ic Hos	ed du	ning c	were	MHU	o sig	betw	lence	ssess	r high
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new reports / issues raised to management in August	August 2018	Outstanding actions:	•		0				VPM training is a specialised,	evidence based and endorsed	training package	It is delivered by Hunter New	England Health Service, NSW to	all members of the DMHU team,	VPIM is endorsed and adopted	across a number of jurisdictions	including Forensicare in Victoria,	Wilfred Lopes in Tasmania and	the Forensic Hospitals in NSW. It	was assessed during the	commissioning of Dhulwa that	these units were most aligned	with the DMHU service model,	There is no significant	difference between all the	various violence prevention	programs assessed. They were all	suitable for high secure care, so
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	Distance between Seclusion Rooms and Main Facility	Concerns raised re escorting an agitated consumer	through a nailway with four doors to reach seclusion	2					Violence Prevention Management (VPM)	Incident where nurses were required to enter seclusion	room with a consumer who was not adequately	medicated, resulting in injuries to four staff.																
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Dpp 3dd	44	PPE is currently located in the	DMHU to attend to	
Concerns raised regarding access to and	ste	staff stations and in the de-	signage and paint the	
appropriateness of PPE, such as eye protection.	es	escalation area. The location of	draw red.	
	PP	PPE is to remain where currently		
	loα	located and if needed the drawer		
	W	will be painted RED and signage		
	in	indicating "PPE" will be applied.		
	Ë	The issue of padded protective		
	ns	suits was discussed. While they		
	WC	were suggested by the nurse		
	eq	educator last year as a possible		
	Sa	safety mechanism, the Director	1	
	W	Workplace Safety has had)	
	ex	experience with these suits in Old.		
	Ō	Old has stonned using them as		
	- E	they had other unintended		
		A continue distriction of		
	3	consequences and injuries. As		
	ns	such, MHJHALJS has made a	205	
	de	decsion not to use them.		
Agency staff orientation and training	Ag	Agency staff receive orientation which	DMHU ADON / CNC to	
Nursing staff report that agency are rostered on shift	inc	includes induction to Dhulwa and	ensure agency staff have had	
without appropriate orientation. UMT acknowledge there	AV.	VPM training before commencement.	access to appropriate	
has been one occasion when a staff member did not have	H	The Dhulwa Induction Checklist	orientation including VPM	
VPM training and that agency staff was placed in a lower	ŏ	Operational Procedure is used to	No snort term Agency starr	
acuity area on the decision of the ADON.	en	ensure all agency staff have	of a shift	
	වි	completed their appropriate induction.	ALL staff are responsible for	
			supporting new and agency	
			staff in their orientation to the	
			unit	
			ALL staff should escalate	
			concerns to NIC, CNC or	
	3		ADON	

																														20) 9	
																									-							
Management plans are	developed by the	Multidisciplinary Team (MDT)	with all team members expected	to contribute to the person's	clinical plan. The management	plan is on MAJICeR and is	accessible by all staff. Staff have a	professional responsibility to	review clinical plans to ensure	appropriate care and treatment is	provided.	The Mental Health (Security	Facility) Act 2016 outlines the	responsibly for the facility as	being with the Assistant Director	of Nursing, for leading the care	and treatment provided at	Dhulwa in addition to the safe	management and order of the	unit.	Dhulwa is a highly regulated	environment and staff have a	mutual responsibly to know the	policies and procedures that are	specific to their workplace.	Action – team in-services to be	provided on:	The legislative responsibilities	for a secure facility,	© consider a 'policy of the month'	process for Dhulwa team	meetings, and
Clinical handover between shifts of individual	management plans and some staff not being	familiar with the detail in the plan.																														

			2	10	
	Operational Director to make a directive that the Nurse in Charge of the Shift is to allocate roles for VPM at the beginning of each shift	DMHU UMT to review procedure and ensure all elements are considered in future			
Clinical handover/ MDT and the professional and workplace responsibility of all staff to be aware of a patients management plan.	It is the role of the Nurse in Charge to ensure/coordinate there are 5 VPM trained staff on the floor and that everyone knows their role if a situation requiring the deployment of VPM interventions was required	3 levels of de-brief that are expected in MHJHADS: 2 Individual with the injured staff – this occurred; 2 Immediate staff group/team debrief – it was acknowledged that the team debrief did not occur. MHJHADS Incident Procedure outlines the role and process for providing that debrief and the management team will ensure that this occurs routinely in future; and 2 General communication with all staff in Dhulwa – this occurred via regular email			
	Resourcing on the floor with patient leave and other activities	Availability of debriefing following incident			

*Note: Corrective Actions shall be established by referring to the Hierarchy of Control, section 7.1.11 or WHSF.21 in the Health Directorate's Work, Health and Safety Management System (WHSMS). The Hierarchy of Use the Risk Matrix located in Section 4, WHSF.20 in the WHSMS - all High and Extreme risks must be reported in Riskman (Non-Individual form) and the relevant Tier 2 Health and Safety Committee (HSC) Control is, in descending order of effectiveness: Elimination, Substitution, Isolation, Engineering, Administration and Personal Protective Equipment.

***Corrective Actions are a management responsibility

****See WHSMS section 7.1 Risk Management

STEP 3, ADD ALL OUTSTANDING ISSUES IDENTIFIED TO WORK AREA'S CORRECTIVE ACTION PLAN

Concerns from Aug 15 WHS meeting:

-Failure to maintain staff safety and well being

short staffing

not enough registered staff for leave/de-escalation

-Proposal by Katrina at 15/08/2018 meeting CNCs, CDNs, A and D nurse on the floor during de-escalation and leave

-Written policy that AHAs will go on floor during de-escalation, leave, and when short for safety/presence

-Security presence on the floor at all times.

Written policy re: same

2-Debriefing staff after incident within 2 hours or before end of shift, whichever happens first

3-Written policy of leave

No taxi's, 1:1's Minimum of 2 staff VPM trained

4-Agency Staff not receiving required training (VPM, Access to Majicer)

t-Agency Starf not receiving required training (VPIN, Access to Clear written policy on agency staff rostering

Have VPM training

-As per Deb Plant, Agency nurses not to be nurse in charge and to alert her if so 5-Protective Equipment not located in appropriate area/not accessible.

Written policy on the correct location of the Protective Equipment.

o All staff to be notified via email.

6-Security must pass through 4-6 doors to get on to the floor and assist

Minimum one security guard on floor at all times.

7—Dhulwa closed inaccessible on 8 and 13 August 2018 due to lack of security staff

Written policy establishing a minimum of five security guards per shift.

Two additional security guards to be rostered on when consumer has a custodial appointment.

More registered staff rostered on per shift (current 5 per shift not enough).

AIN duties and responsibilities at Dhulwa to be properly defined and written down.

AINs should be allowed to accompany consumers on leave.

STEP 4. SIGNATURES REQUIRED (when the Planned Inspection & this form have been completed)

Signature:

Date.

Tier 2 HSC meeting date:

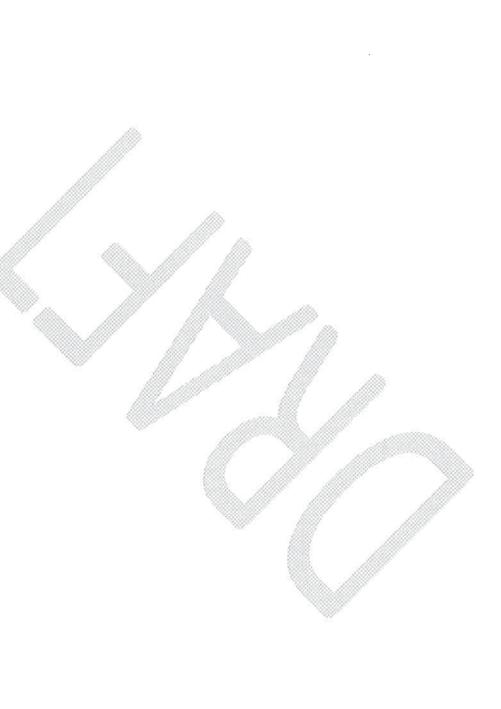
Supervisor/ Manager:

HSR/ Worker: Myette Leversage, RN

Signature:

Date: 19/08/2018

I acknowledge that I have completed a Planned Inspection of the relevant work area and either completed or assisted in completing this checklist accordingly.







Agenda Work Health & Safety Committee Justice Health Services

Monday 8 October 2018 3.30pm – 4.00pm

Via Teleconference -x27162

WELCOME

1.	Attendance / Apologies
2. 2.1 2.2	Minutes and Action Arising from Previous Meeting Action Minutes of Previous Meeting Outstanding action arising from previous meetings
3	Reports

3.	Reports
3.1	
3.2	
3.3	
2.4	Dhulwa Montal Hoalth II

- 3.4 Dhulwa Mental Health Unit
- 3.5 Staff Accident/Incident Reporting
- 4. Report from Workplace Safety
- Divisional Workplace Goals and Objectives
- 5.1 Staff Wellbeing
- 5.2 Working towards a Smoke Free Environment
- 6. Items to be included on the Program Risk Register
- 7. Items to be raised to the Divisional Work, Health & Safety Meeting
- 8. Other Business
- 8.1 Annual WHS Safety Checks

Next meeting:

JHS Work Health & Safety Committee will be held November 2018.



Purpose/comments: For endorsement

Action Minutes Justice Health Services Meeting: Work Health & Safety Committee

Meeting Date:	8 October 2018	Agenda Item No:	2.1
Subject:	Action Minutes of Justice Heal	th Services Work Health & Safe	ty Committee
	Masting of 9 Ostobox 2019		
	Meeting of 8 October 2018		
Made Control of Contro			
Source:	Renee Wilesmith		
	Executive Assistant – Justice H	ealth Services	
1	Justice Health Services		
- 100		47.0	
		ion.	
	*		

Justice Health Services Work Health & Safety Committee Meeting 8 October 2018

ACTION MINUTES

1. Attendance and Apologies

In Attendance:

Name	Role	✓	Ap,
			or ×
Dannielle Nagle	Operational Director, Justice Health Services (Chair)	1	
Deborah Plant	Operational Director, Dhulwa Mental Health Unit	1	
Tegan Murray	A/g Senior Manager, Forensic Mental Health Services	1	
Rory Maguire	A/g Assistant Director of Nursing, Primary Health	1	
Tasha Lutz	A/g Assistant Director of Nursing, Dhulwa Mental Health	1	
	Unit		
Roxanne Orford-	HSR, 1 Moore St, Forensic Mental Health	1	
Dunne			
Gwynne Thomas	HSR, AMC, Primary Health		AP
Jacqueline Monaghan	HSR, AMC, Primary Health		AP
Alfred Cardona	HSR, AMC, Primary Health	1	
Yolanda Robertson	HSR, Bimberi, Primary Health		AP
Sue Tremble	HSR, DMHU		AP
Myette Leversage	HSR, DMHU	√	
Goodwell Mhlanga	HSR, DMHU		AP
Denise Meyboom	Workplace Safety Representative		AP
Jacqui Raby	Administration & Information Manager, JHS		AP
Liza Marando	Administration & Information Manager, DMHU		AP
Renee Wilesmith	Staff Member – Minutes	1	

2. Minutes and Action Arising from Previous Meetings

2.1 Action Minutes of Meeting

The Minutes from the previous meeting were endorsed.

2.2 Outstanding Action Arising Running Sheet from previous meetings

The outstanding actions arising were reviewed and updated.

3. Reports





3.2

3.3

3.4 Dhulwa Mental Health Unit

- Noted there were a number of exposed wires these were seen to by a technician who has since covered them and deemed them as not-live.
- Noted DMHU has been getting through their corrective action plan.
- Noted ECU needs to be added as a standing agenda item.
- Noted a number of small WHS issues within ECU that are being fixed.

3.5 Staff Accident/Incident Reporting

- Noted there were 0 incidents reported as high/extreme.
- Noted that not all of what was recorded on the SAIR was actually SAIR.

4. Report from Workplace Safety

- Denise Meyboom left information regarding duress alarms for home visits. It was discussed that duress alarms for home visits are not a complete answer to safety for home visits but could offer some benefits
- Noted there should be better staff training for home visits.

5. Divisional Workplace Goals & Objectives

- Noted that managers should be ensuring staff are not accruing too much leave as staff become fatigued.
- 6. Items to be included on the Program Risk Register

Items to be raised to the Divisional Work, Health & Safety Meeting

Nil.

8. Other Business

- It was noted by Tash Lutz that it is difficult for HSRs on shift at Dhulwa to attend the current meeting time.
- The question was raised as to whether the meeting in future could be held between 1:30-3:30pm which would provide a greater opportunity for HSRs to attend.

Next Meeting: The next Work Health & Safety meeting will be held 12 November 2018.





CANBERRA HOSPITAL AND HEALTH SERVICES

Mental Health, Justice Health and Alcohol & Drug Services Justice Health Services: Work Health & Safety Meeting

Outstanding Action Arising Running Sheet

Meeting: October 2018

Item	Action Item	Person(s)	From Meeting		Remarks
S		Responsible			
Η	Annual Checks	All Managers	August 2018	0	Annual Reports need to be provided to Denise Meyboom
					before the end of August 2018.
				0	Completed – ITEM CLOSED.
2.	Divisional	Dannielle Nagle	August 2018	0	Dannielle to send out an email to all HSR's as HSR's are to
	Workplace Goals				review the Divisional Workplace Goals and Objectives.
	and Objectives			0	Completed – ITEM CLOSED.
'n.	RISKMAN	Tegan Murray &	August 2018	0	Jaime to enter a RISKMAN regarding Duress alarms at AMC
		Rory Maguire			not working.
				•	8/10/18 - Tegan and Rory to follow up on this.
4.	ACTCS Meeting	Tegan Murray &	August 2018	0	Jaime and Cheryl to ensure that the issue with Duress
		Rory Maguire			alarms at the AMC is tabled at AMC managers meetings.
				•	8/10/18 – Tegan and Rory to follow up on this.
5.	ASCOM Delay	Deb Plant	August 2018		Deb to find out how long the delay is from the ASCOM
					Duress alarm going off to when it reaches the first handset.
				0	 8/10/18 – Ongoing.

STEP 1:	ETE THE PLANNED INSPECTION FORM, TICK Yes'	'No' Requir	res det	OR : No' OR : N/A' ('No' Requires details in the Issue Identified column)
NO EX				DATE: 6.09.2018
このまれ	-	INSPECTE	D BY (INSPECTED BY (HSRI Worker's name): Liza Marando and Sue Tremble
item No	-	Yes No	NIA	Issue Identified (add detail to Corrective Action Dian., page 5.)
11.6	Are Dangerous Substances including those stored in tanks/ drums labeled correctly? (incl. items that have been decanted or awatting disposal)		>	
11.7	Are Dangerous Substances stored correctly? Is packaging intact? (incl. separation and segregation)		7	
11.8	Are shocks of Dangerous Substances checked to ensure they are not out of date?		>	
11.9	Are Dangerous Substances disposed of correctly?		->	
11.10	Are spill kits available for dangerous substances? Are workers trained in using a spill kit?	7		
7-	Fire mitigation available? (appropriate types of extinguishers/ biankets for Dangerous Substances's stored	7		
11.12	Is waste disposed of in correct the containers' bins? (e.g. Clinical waste only in bins provided)	7		
11.13	Are medication/ drugs securely maintained and accounted for?		>	
11.14	Comments:			
12. Workstations	stations		3	
12.1	Are the workstations in the area set up ergonomically? (refer to section 7.7.14.1, 7.7.15 & WHSE 34 Workstation chapters as a section of the	7		
43.0	To choose the personal crowners of the second secon	-		
771	Do drains have the connect castors for the moon type (e.g. soft tyre for hard surfaces, hard plastic for carpeted surfaces)?	~		
123	Are desks/worktops/benches clutter-free?	7		
12.4	Is there sufficient legroom under desks/worktops/benches?	7		
12.5	Comments:			
13. Plant	13. Plant Rooms (for Property Maintenance & Management and Health Centre Managers Only)			
13.1	Are the plant rooms clear of stored equipment, chemicals and rubbish?	7		
13.2	Has all emergency equipment been serviced according to the required schedule (6 mthly)?	7		
13.3	Are exit signs are visible?	7		
13.4	Is access/egress to the plant room clear and free of trip hazards?	~		
13.5	Are plant rooms kept locked? Are they appropriately signposted if the plant room is a confined space?	٨		
13.6	Are walkways/stairways.clutter free and in good condition? E.g. free of water or oil, good tread, etc.	7		
13.7	Comments:			
14. Other	14. Other Issues (specific to your work area)			
14.1	Government Vehide prestart checklist has been completed? (WHSF.37)	7		

INSPECTIED BY (Reinager's name); Liza Marando INSPECTIED BY (Reinager's name); Liza Marando and Ster Trenhie Inspection Inspect	MOR W	WIORK GROUP: Administration Area			DATE: 6.00.3048
Clear Clear	INSPE	TED BY (Manager's name): Liza Marando	INSPE	CTED BY	(HSR/ Worker's name): Liza Marando and Sue Tremble
Check all Emergency Extilighting (funning person) is in working order and direction correct V Are the engretive yeachaillon diginals plansificacidures analable and current? V V Are the statics dear of obstuding and plansificacidures analable and current? V V Are the procedures processes in place for issues of violence/aggression? V V Are there procedures processes in place for issues of violence/aggression? V V Are there procedures processes in place for issues of violence/aggression? V V Are there procedures processes in place for issues of violence/aggression? V V Is appropriate PPE being used when required? Is the disperitual place of more of the procedures processes in place for issues of violence/aggression? V Is the disperitual place of the procedures procedures processes in place for issues of violence/aggression? V Is the disperitual place of the procedures procedures procedures processes in place for its uses of violence/aggression? V Is the disperitual place of the procedures	Item No	Kem	Yes	N. O	Issue identified (add defail to Corrective Action Plan - nage 5.)
Are temegency evacuation diagrams/plans/procedures available and current? Are the stalis dear of obstruction and in working order? (e.g. lights/doors/handralis) Are there procedures/ processes in place for issues of wiolence/aggression? Are there procedures/ processes in place for issues of wiolence/aggression? Comments: Is eye protection being used when required? Is the damper/out of service tag system in place? Is the damper/out of service tag system in place? Is the damper/out of service tag system in place? Is the damper/out of service tag system in place? Is the damper/out of service tag system in place? Is the damper/out of service tag system in place? Is the damper/out of service tag system in place? Is the damper/out of service tag system in place? Is the damper/out of service tag system in place? Is the damper/out of service tag system in place? On visible appearance, does all equipment appear to be in good condition? Are ladders/steps used safely and in good condition? On visible appearance, does all equipment is being used correctly? From observation, are correct hazardous manual task procedures being used? Are ladders/steps used safely manually take to correctly? If gas cylinders are being used, are they secured/stable? Comments: Is the Dangerous Substance Register current and easily accessible? Are all safety Data Streets (SDS, formerly MSDS) current and easily accessible? Are all safety Data Streets (SDS, formerly MSDS) current and easily accessible? Are all safety Data Streets (SDS, formerly MSDS) current and easily accessible? Are all safety bare streets from early are they secured/stable? Are all safety bare streets from early are they secured to as Dangerous Substances? Are all safety bare streets from early secured to as Dangerous Substances? Are all safety bare streets from early secured to as a bargerous Substances? Are all workers properly trained in the safe handling of Dangerous Substances? Are all workers properly trained in the safe handling of Dangerous	7.4	Check all Emergency Exit lighting (running person) is in working order and direction correct	7		
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Are all workers properly trained in the safe handling of Dangerous Substances? Is this training included in the Local Orientation program?	4.	Are risk assessments and SOPs completed, current and easily accessible for the safe handling of all dangerous substances?			
	7,5	Are all workers properly trained in the safe handling of Dangerous Substances? Is this training included in the Local Orientation program?	>		

WORK GROUP:	Administration: Area				DATE: 6.00.2048
INSPEC	INSPECTED BY (Manager's name)::Liza Marando	INSP	CTE	BY (H	INSPECTED BY (HSR/ Worker's name): Liza Marando and Sue Trendle
Item-No	litem	Kes	No	MA	Issue Identified (add detail to Corrective Action Plan _ made #)
5.1	Has electrical equipment been tagged & tested? Is it within the correct time frame? (minimum yearly)	7			
5.2	Are leads off the ground or in a conduit/covering or cable tray?		7		Reception office has exposed wiring see attached photos
5.3	Are there sufficient power outlets to operate electrical equipment in the area? (i.e. NO double adapters, no power boards plugged into power boards or extension leads into extensions leads)	7			
5,4	Are extension cords & fittings supported above work areas, wet areas & passages safely? (i.e. cords not knotted)	>			
5.5	Are all extension cords & fitters protected from mechanical damage & moisture?	7			
5.6	Are all leads/plugs/outlets in good condition? (no exposed wires/crimps/fears/rips in the outer cable, or bent prongs)		7		Reception office has exposed winng see attached photos
2.7	Are all routed cords in good condition? No evidence of stretching/orimping/wear and tear? inclusive of electronic equipment (Pumps, Beds, Plinths, Scissor lifts etc.)		7		
5.8	Are headsets in good working order?			7	
5.9	The Cardiac and/or Body Protected (RCD) area is tested and tagged? (6 monthly, if applicable)			7	
5.10					
6. First Aid					
6.1	is the first aid kit fully stocked & current?	7			
6.2	Are First Aider's names clearly identified? Do workers know who the First Aid Officer is for the work area?	7			
6.3	Is there a method for recording injuries? (Riskman or ACT Govt. Accident Incident Report)	7			
6.4	Do all workers at the workplace know the first aid procedures to be followed in the event of serious injury or incident (determine from interview)?	7			
6.5	Comments:				
7. Fire/ Ei	7. Fire/ Emergency/ Security				
1.7	Has all emergency equipment been serviced according to the required schedule (check yellow tag)? Fire Extinguishers, Hose Reels, Blankets and Hydrants (6 monthly), Fire Doors (12 Monthly), Smoke Doors (monthly).	>			
7.2	Has emergency equipment that is missing, or recently been used, been replaced? (Items may include: Extinguishers, Hose Reels, Fire/Smoke Doors, Blankets, Break Glass alarms, Manual Call Point, Exit Signs, Smoke & Thermal Detectors, Sprinklers, Fire Suppression, WIP Phones and EWIS/ FIP Panels.)			72	
7.3	Are all exits/fire doors clearly marked, clear of obstruction, easily opened?	7			

	WOLK STOCK AMILIES AND A PER		TART.
INSPEC	INSPECTED BY (Manager's name): Liza Marando	INSPECTED BY (H	INSPECTED BY (HSR/ Worker's name): 132 Marandy and Suc Tramble
Item No	Item	Yes No N/A	Issue Identified (and debit to Competing Action Plans
1. Gener	1. General Work Safety Issues		come recipied (and detail to corrective Action Plan - page 5)
F.712	Are all Corrective Action(s) from last month's inspection complete?	1	
1.2	Are policies, flow charts & reporting forms accessible in work area? e.g. RTW, Riskman	7	
1.3	Is the work area induction/orientation program performed for all new workers? (this should	~	
,	include emergency awareness, dangerous substances & hazards specific to the work area)		
4:	Have all relevant workers completed or programmed to attend mandatory WHS training (incl. Dangerous Substances, Manual Handling, SAIR and 2	7	
1.5	Are Standard Operation Procedures (SODS) Safety Bules developed 3 procedures		
1.6	Do all workers know where the nearest emergency exit/emergency assembly point is horsted?	^	
1.7	Do all workers know who the HSR is for the work area/ department?	-	
1.8	Comments:		
2. Housekeeping	Keeping		
2.1	Are all walkways, floors, stairs (incl. Fire Stairs), and exits clear of obstruction?	-	
2.2	Are all walkway lines clearly marked?		
23	Are all stock/ supplies safely stored and stacked?		
2.4	Are floor surfaces clear of rubbish, liquid, debris, trip hazards, etc?	2	
2.5	Are stairs, steps & treads safe?	7	
26	Are hazard/ safety signs visible/ legible?		
27	is the workplace layout functional & safe?		
28	Is there good access & egress to the work areas?	-	
2.9	is the work area free from any fumes, vapours or dust?	2	
2.10	Comments:		
3. Lighting			
3.1	Are lighting standards adequate in all areas, including external areas? (e.g. no glare on PC monitor)	7	
3.2	Are light fittings clear & in good working order?		
3.3	Comments:		
4. Ventilation	tion	THE PERSON NAMED IN	
1.7	Is there adequate ventilation?	7	
4.2	Is the ventilation draught-free?	7	
4.3	Comments;		
5. Electrical Safety	al Safety		

STEP 2. COMPLETE PLAN FOR ALL IDENTIFIED ISSUES THAT CAN BE		IMMEDIATELY (S)	RESOLVED IMMEDIATELY (Sign-off when completed)		100mm
WHS Issued Identified Ratin	Corre	*	Person Responsible***	Date complete	Signature
Reception area office has exposed wiring behind filing cabinet	Facilities Management to be notified and to action as soon as possible via MyFM Work Order		HSR/Property Manager	. 81/6/9	MAN MAN
	14.0	*			The state of the s
ETE THE	CK 'Yes' OR 'No' OR 'N/A	('No' Requires de	'No' OR 'N/A' ('No' Requires details in the Issue Identified column)	ed column)	
WORK GROUP: Administration Area				DAT	DATE: 6.09.2018
INSPECTED BY (Manager's name): Liza Marando		INSPECTED BY	(HSR/ Worker's name):Lit	INSPECTED BY (HSR/ Worker's name): Liza Marando and Sue Tremble	
Item No Item		Yes No N/A	issue identified (add de	Issue Identified (add detail to Corrective Action Plan - page 5	30e 5)
	The second secon				

Note: Corrective Actions shall be established by referring to the Hierarchy of Control, section 7.1.11 or WHSF.21 in the Health Directorate's Work, Health and Safety Management System (WHSMS). The Hierarchy of "Use the Risk Matrix located in Section 4, WHSF.20 in the WHSMS - all High and Extreme risks must be reported in Riskman (Non-Individual form) and the relevant Tier 2 Health and Safety Committee (HSC) Control is, in descending order of effectiveness: Elimination, Substitution, Isolation, Engineering, Administration and Personal Protective Equipment. *Corrective Actions are a management responsibility ****See WHSWS section 7.1 Risk Management

STEP 3. ADD ALL OUTSTANDING ISSUES IDENTIFIED TO WORK AREA'S CORRECTIVE ACTION PLAN

STEP 4. SIGNATURES REQUIRED (when the Planned Inspection & this form have been completed)

Supervisor/ Manager: (A) (A) Signature:

HSR Worker. LIZA Maracado Signature:

Sue Gremble

[2/9] [18 Tier 2 HSC meeting date: Date:

Date:

Morando

81.60.90

6.9.18

I acknowledge that I have completed a Planned Inspection of the relevant work area and either completed or assisted in completing this checklist accordingly.

