



BEGINNERS GUIDE TO FIRST AID WORKPLACE COMPLIANCE

A black and white photograph of two women practicing first aid on a mannequin. One woman is kneeling and wearing red gloves, while the other stands behind her, observing. A red semi-transparent banner is overlaid on the image, containing white text. The background is a plain, light-colored wall.

FOR MORE INFORMATION ON ALSCO'S FIRST AID KITS, EYEWASH STATIONS, DEFIBRILLATORS AND FIRST AID TRAINING, PLEASE CONTACT YOUR NEAREST ALSCO BRANCH BY CALLING 1300 077 391.

This document is a supplement to the Work Health and Safety Act applicable both nationally and within your State or Territory. While every effort has been made to provide accurate information, you must not rely on this guide totally but also refer to the provisions of the Act itself.



CONTENTS

Why Do You Need to Know the WHS Act Today?	4
Purpose of the WHS Act	5
Coverage	5
The Role of PCBUs	6
Duties of Care	6
Make Sure To Have First Aiders	7
Ensuring Properly Trained Staff	8
Know the Offences and Penalties	10
Health and Safety Duty Offences	10
Penalties for Breach of Health and Safety Duty Offences	11
Alternative Penalty Options	11
Managing Risks to Health and Safety	13
How to Identify Hazards	13
How to Assess Risk	16
First Aid Equipment, Facilities and Training	21
First Aid Kits	21
First Aid Signs	24
Other First Aid Equipment	25
First Aid Facilities	27
How do you determine what constitutes a ‘notifiable incident’?	30
When to Consult With Workers?	32
What the WHS Act Says	32
What is Effective Consultation?	36
Why AlSCO?	42
Features of the AlSCO Managed Service	42
Appendix: Links and Further Reading	43



SAFE WORK AUSTRALIA ESTIMATES THAT WORK- RELATED INJURY AND DISEASE COST AUSTRALIA ROUGHLY 5% OF ITS GDP.

WHY DO YOU NEED TO KNOW THE WHS ACT TODAY?

The WHS Act, like that of most other jurisdictions, is based on the 'model' WHS Act developed by Safe Work Australia.

The aim is to provide all workers in Australia with the same standard of health and safety protection regardless of the nature or location of their work.

A stronger national approach means greater certainty for businesses (particularly those operating across state borders) and over time reduced compliance costs for businesses.

More consultation between businesses, workers and their representatives (along with greater responsibilities) will make workplaces safer for everyone.

The harmonised work health and safety laws apply in the majority of Australian states. For more information about whether they apply in your state or territory, check with your local WHS regulator.



PURPOSE OF THE WHS ACT

The WHS Act provides a framework to protect the health, safety and welfare of all workers in their workplace, and of other people who might be affected by the work.

COVERAGE

The WHS Act covers:

- People who carry out work in any capacity for a person conducting a business or undertaking including employees, contractors, subcontractors, self-employed persons, outworkers, apprentices and trainees, work experience students and volunteers who carry out work.
- Other people at a workplace, visitors and customers.

The WHS Act does not cover 'volunteer associations' who do not have employees.

[More information about volunteer organisations and volunteers](#) is available on the Safe Work Australia website and from local WHS regulators.





THE ROLE OF PCBU_s

There is a strong obligation for the business officer – or person conducting a business or undertaking (PCBU) – to ensure the **workplace has adequate First Aid facilities, equipment and trained personnel.**

This means they must accurately assess the requirements for their workplace, taking into account a number of aspects, such as the nature of the business, the typical hazards involved, and the number of staff working at any one time.

DUTIES OF CARE

A PCBU's specific obligations, known as 'Duties of Care', fall into just a few categories. The PCBU is responsible to ensure:

- ☐ there is provision for adequate First Aid equipment,
- ☐ that each worker has access to that equipment,
- ☐ adequate number of workers appropriately trained in first aid (First Aiders),
- ☐ adequate number of First Aiders available at any time, and
- ☐ workers have access to facilities for the administration of First Aid



MAKE SURE TO HAVE FIRST AIDERS

When it comes to providing First Aid after an accident, it is essential that **every workplace has a properly trained First Aider on site at all times**. First Aiders have to report directly to the PCBU, but their role is arguably the most important.

Their responsibilities include:

- ☐ Taking reasonable care for their own health and safety
- ☐ Taking reasonable care not to adversely affect the health and safety of others
- ☐ Complying with any reasonable instructions given by the PCBU to allow him or her to comply with his or her duties
- ☐ Co-operating with any reasonable policy or procedure relating to health and safety in the workplace

Having enough First Aiders to deal with the staff numbers is also a key component to complying with the legislation.

The number of First Aiders on duty at any one time **depends on the type of work** too. For example, in low-risk workplaces (an office), one First Aider is required for every 50 workers; while in high-risk workplaces (a manufacturing complex), one First Aider is needed for every 25 workers.



ENSURING PROPERLY TRAINED STAFF

Staff can only be considered First Aiders if they hold **nationally recognised 'Statements of Attainment'** after completing an endorsed First Aid unit of competency. But the type of training is significant too.

The choice of [First Aid Training courses](#) include:

APPLY FIRST AID

Train staff to recognise and respond to common life-threatening injuries or illnesses, including CPR, and to manage the casualty and emergency situation until the arrival of medical or other help. In low-risk workplaces, First Aiders need only know how to perform CPR and treat minor illnesses and injuries.

APPLY ADVANCED FIRST AID

Train staff in additional competencies required to apply advanced first aid procedures. Suitable for some high-risk workplaces.

MANAGE FIRST AID IN THE WORKPLACE

Train staff to apply advanced first aid procedures and to manage a first aid room.

PROVIDE FIRST AID IN REMOTE SITUATIONS

Train staff to administer first aid in a remote and/or isolated situation, including preparing for aero-medical evacuation. Suitable for high-risk workplaces where emergency services are a distance away.





First Aiders are expected to undertake CPR refresher courses annually, and to renew their First Aid qualifications every 3 years. First Aiders may also need to be trained to respond to specific situations at their workplace – for example, where workers may have severe allergies to commonly used substances.

[Alsco's Managed Training Service](#) is a complete solution that is designed to keep you compliant with legislated training requirements in Australia. It offers a unique online administration tool to make record keeping simpler, with a convenient notification system for expired certificates and retraining. The training service offers complete compliance irrespective of the amount of employee turnover, paid at a fixed, pre-agreed cost each year.

A complete service to manage your training, records and costs all at the same time.
[Get compliant now!](#)



KNOW THE OFFENCES AND PENALTIES

HEALTH AND SAFETY DUTY OFFENCES

The WHS Act provides three categories of criminal offences for a breach of health and safety duties. The maximum penalties are different depending on the category of the offence and whether the offender is an individual (e.g. a worker, or a PCBU), an officer (as defined) or a body corporate.



Category 1 – a duty holder, without reasonable excuse, engages in conduct that recklessly exposes a person to a risk of death or serious injury or illness.



Category 2 – a duty holder fails to comply with a health and safety duty that exposes a person to a risk of death or serious injury or illness.



Category 3 – a duty holder fails to comply with a health and safety duty.





PENALTIES FOR BREACH OF HEALTH AND SAFETY DUTY OFFENCES

	Corporation	Individual as PCBU or officer	Individual as worker or other
Category 1	\$3 million	\$600 000, five years in jail or both	\$300 000, five years jail or both
Category 2	\$1.5 million	\$300,000	\$150,000
Category 3	\$500,000	\$100,000	\$50,000

ALTERNATIVE PENALTY OPTIONS

In addition to imposing a penalty courts may impose alternative measures including:

- Adverse publicity orders,
- Restoration orders,
- Work health and safety project orders,
- Court-ordered work health and safety undertakings,
- Injunctions, and training orders.



Here is a [simple first aid checklist for the Australian workplace](#) to help you understand if you are in compliance with WHS requirements.

The [AlSCO Managed First Aid Kit Service](#) begins with a complete survey of your workplace to determine requirements for compliance. Not just that, all first aid kits are restocked periodically with hospital grade supplies to ensure you have a complete kit with supplies that are not out-of-date. AlSCO also keeps you updated with changes in WHS legislation and incorporates these into its kits, giving you continuous peace-of-mind.

[Get your free audit today.](#)





MANAGING RISKS TO HEALTH AND SAFETY

HOW TO IDENTIFY HAZARDS

Inspect the Workplace

Regularly walking around the workplace and observing how things are done can help you predict potential accidents. Look at how people work, how plant and equipment is used, what chemicals are around, and what safe or unsafe work practices exist in your workplace.

Things to look out for:

- ☐ Does the work environment enable workers to carry out work without risks to health and safety (e.g. space for unobstructed movement, adequate ventilation, lighting)?
- ☐ How suitable are the tools and equipment for each task and how well maintained are they?
- ☐ Have any changes occurred in the workplace which may affect health and safety?





Hazards are not always obvious. Some hazards can **affect health over a long period of time** or may result in stress (e.g. a hostile work environment) or fatigue (e.g. shift work). Also, think about hazards that you may bring into your workplace along with new, used or hired goods (for example, worn insulation on a hired welding set).

As you walk around, you may spot straightforward problems and action should be taken on these immediately (e.g. cleaning up a spill). If you find a situation where there is an immediate or significant danger to people, move those persons to a safer location first and attend to the hazard immediately.

Make a list of all the hazards you can find, including the ones you know are already being dealt with, to ensure that nothing is missed. You may use a checklist designed to suit your workplace to help you find and make a note of hazards.

Consult Your Workers

Ask your workers about any **health and safety problems they have encountered** in doing their work and any near misses or incidents that have not been reported.

Worker surveys may also be undertaken to obtain information about the workplace - including workplace hostility, aches, pains and fatigue that can signal potential hazards.

Review Available Information

Information and advice about hazards and risks relevant to particular industries and types of work are available from WHS regulators, industry associations, unions, technical specialists and safety consultants.

Manufacturers and suppliers can also provide information about hazards and safety precautions for specific substances (safety data sheets), plant or processes (instruction manuals).

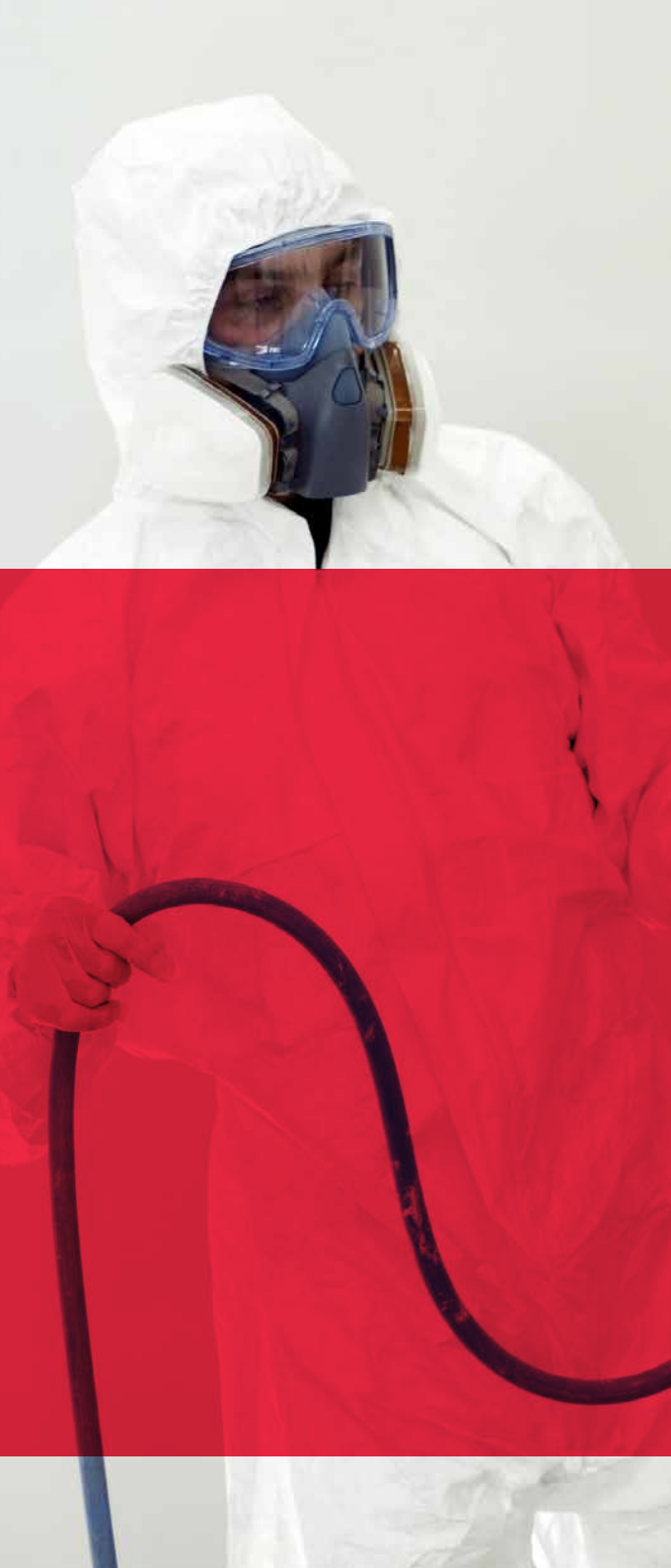


Analyse your **records of health monitoring**, workplace incidents, near misses, worker complaints, sick leave and the results of any inspections and investigations to identify hazards. If someone has been hurt doing a particular task, then a hazard exists that could hurt someone else. These incidents need to be investigated to find the hazard that caused the injury or illness.

TABLE 1: EXAMPLES OF COMMON HAZARDS

Hazard -	Potential harm -
Manual tasks	Overexertion or repetitive movement can cause muscular strain
Gravity	Falling objects, falls, slips and trips can cause fractures, bruises, lacerations, dislocations, concussion, permanent injuries or death
Electricity	Potential ignition source. Exposure to live electrical wires can cause shock, burns or death from electrocution
Machinery and equipment	Being hit by moving vehicles, or being caught by moving parts of machinery can cause fractures, bruises, lacerations, dislocations, permanent injuries or death
Hazardous chemicals	Chemicals (such as acids, hydrocarbons, heavy metals) and dust (such as asbestos and silica) can cause respiratory illnesses, cancers or dermatitis
Extreme temperatures	Heat can cause burns, heat stroke or fatigue, and cold can cause hypothermia or frostbite
Noise	Exposure to loud noise can cause permanent hearing damage
Radiation	Ultraviolet, welding arc flashes, microwaves and lasers can cause burns, cancer or blindness
Biological	Micro-organisms can cause hepatitis, legionnaires' disease, Q fever, HIV/AIDS or allergies
Psychosocial hazards	Effects of work-related stress, bullying, violence and work-related fatigue





HOW TO ASSESS RISK

Work Out How Severe The Risk Could Be

To estimate the severity of harm that could result from each hazard you should **consider the following questions:**

- ☐ What type of harm could occur (e.g. muscular strain, fatigue, burns, laceration)? How severe is the harm? Could the hazard cause death, serious injuries, illness or only minor injuries requiring first aid?
- ☐ What factors could influence the severity of harm that occurs? For example, the distance someone might fall or the concentration of a particular substance will determine the potential level of harm. The harm may occur as soon as something goes wrong (e.g. injury from a fall) or it may take time for it to become apparent (e.g. illness from long-term exposure to a substance).
- ☐ How many people are exposed to the hazard and how many could be harmed in and outside your workplace? For example, a mobile crane collapse on a busy construction site has the potential to kill or injure a large number of people.
- ☐ Could one failure lead to other failures? For example, could the failure of your electrical supply make any control measures that rely on electricity ineffective?
- ☐ Could a small event escalate to a much larger event with more serious consequences? For example, a minor fire can get out of control quickly in the presence of large amounts of combustible materials.





Work Out How Hazards May Cause Harm

In most cases, incidents occur as a result of a chain of events and a failure of one or more links in that chain. If one or more of the events can be stopped or changed, **the risk may be eliminated or reduced.**

One way of working out the chain of events is to **determine the starting point** where things begin to go wrong and then consider: 'If this happens, what may happen next?' This will provide a list of events that sooner or later cause harm.

In thinking about how each hazard may cause harm, **you should consider:**

- the effectiveness of existing control measures and whether they control all types of harm,
- how work is actually done, rather than relying on written manuals and
- infrequent or abnormal situations, as well as how things are normally meant to occur.

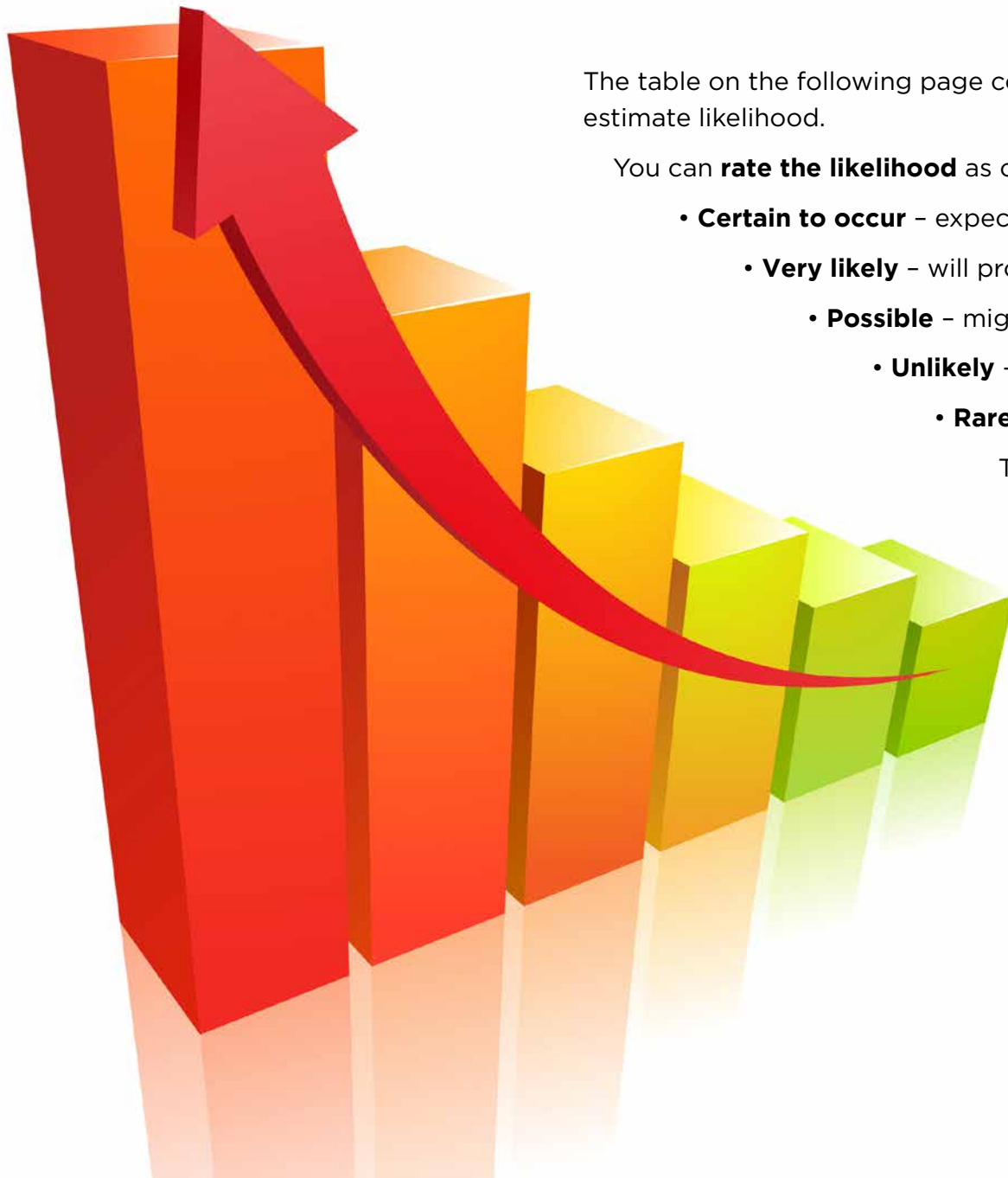
Consider maintenance, cleaning, and breakdowns of equipment and failures of health and safety controls.

Work Out the Likelihood of Harm Occurring

The likelihood that someone will be harmed can be **estimated by considering:**

- How often is the task done? Does this make the harm more or less likely?
- How often are people near the hazard? How close do people get to it?
- Has it ever happened before, either in your workplace or somewhere else?
How often?





The table on the following page contains further questions that can help you estimate likelihood.

You can **rate the likelihood** as one of the following:

- **Certain to occur** – expected to occur in most circumstances
- **Very likely** – will probably occur in most circumstances
- **Possible** – might occur occasionally
- **Unlikely** – could happen at some time
- **Rare** – may happen only in exceptional circumstances

The level of risk will increase as the likelihood of harm and its severity increases.



Questions regarding likelihood	Explanation and examples
How often are people exposed to the hazard?	A hazard may exist all of the time or it may only exist occasionally. The more often a hazard is present, the greater the likelihood it will result in harm. For example: Meshing gears in an enclosed gearbox can cause crushing only if the gearbox is open during maintenance, and, therefore, the potential for harm will not occur very often. Or, continuously lifting heavy boxes has the potential to cause harm whenever the work is done.
How long might people be exposed to the hazard?	The longer that someone is exposed to a hazard, the greater the likelihood that harm may result. For example: The longer a person is exposed to noisy work, the more likely it is that they will suffer hearing loss.
How effective are current controls in reducing risk?	In most cases, the risks being assessed will already be subject to some control measures. The likelihood of harm resulting from the risk will depend upon how adequate and effective the current measures are. For example: Traffic management controls have been implemented in a warehouse to separate moving forklifts from pedestrians by using signs and painted lines on the floor. These controls may need to be upgraded to include physical barriers.
Could any changes in your organisation increase the likelihood?	The demand for goods or services in many organisations varies throughout the year. Changes in demand may be seasonal, depend on environmental conditions or be affected by market fluctuations that are driven by a range of events. Meeting increased demand may cause unusual loads on people, plant and equipment and systems of work. Failures may be more likely. For example: Inner city restaurants and bistros are very busy during the period prior to Christmas, placing extra demands on the kitchen and serving staff. The increase in the volume of food to be prepared and serving a larger number of patrons increases the potential for human error and the likelihood of harm.



Questions regarding likelihood	Explanation and examples
Are hazards more likely to cause harm because of the working environment?	<p>Examples of situations where the risk of injury or illness may become more likely:</p> <ul style="list-style-type: none"> • Environmental conditions change. For example, work performed in high temperatures in a confined space increases the potential for mistakes because workers become fatigued more quickly; wet conditions make walkways and other things slippery. • People are required to work quickly. The rate at which work is done (e.g. number of repetitions) can overstress a person's body or make it more likely that mistakes will be made. • There is insufficient light or poor ventilation.
Could the way people act and behave affect the likelihood of a hazard causing harm?	The possibility that people may make mistakes, misuse items, become distracted or panic in particular situations needs to be taken into account. The effects of fatigue or stress may make it more likely that harm will occur.
Do the differences between individuals in the workplace make it more likely for harm to occur?	People with disabilities may be more likely to suffer harm if the workplace or process is not designed for their needs. New or young workers may be more likely to suffer harm because of inexperience. People who do not normally work at the workplace will have less knowledge than employees who normally work there, and may be more likely to suffer harm. These people include contractors, visitors or members of the public.



FIRST AID EQUIPMENT, FACILITIES AND TRAINING

First aid equipment, facilities and first aiders must be accessible to workers whenever they work, including those working night shifts or overtime

FIRST AID KITS

All workers must be able to access a first aid kit. This will require at least one first aid kit to be provided at their workplace.

CONTENTS

The first aid kit should provide basic equipment for administering first aid for injuries including:

- cuts, scratches, punctures and splinters;
- muscular sprains and strains;
- minor burns;
- amputations and/or major bleeding wounds;
- broken bones;
- eye injuries; and
- shock.





The contents of first aid kits should be based on a risk assessment. For example, there may be a higher risk of eye injuries and a need for additional eye pads in a workplace where:

- chemical liquids or powders are handled in open containers;
- spraying, hosing or abrasive blasting operations are carried out;
- there is any possibility of flying particles causing eye injuries;
- there is a risk of splashing or spraying of infectious materials;
- welding, cutting or machining operations are carried out.

Additional equipment may be needed for serious burns and for remote workplaces.

Design of Kits

First aid kits can be any size, shape or type to suit your workplace, but each kit should:

- be **large enough** to contain all the necessary items
- be **immediately identifiable** with a white cross on a green background that is prominently displayed on the outside
- contain **a list** of the contents for that kit
- be made of a material that will **protect the contents** from dust, moisture and contamination.





Location

In the event of a serious injury or illness, quick access to the kit is vital. First aid kits should be kept in a **prominent, accessible location** and able to be retrieved promptly. Access should also be ensured in all security-controlled workplaces. First aid kits should be located close to areas where there is a higher risk of injury or illness. For example, a school with a science laboratory or a carpentry workshop should have first aid kits located in these areas.

If the workplace occupies several floors in a multi-storey building, at least one kit should be located on every second floor. Emergency floor plans displayed in the workplace should include the location of first aid kits.

A portable first aid kit should be provided in the **vehicles of mobile workers** if that is their workplace (for example, for couriers, taxi drivers, sales representatives, bus drivers and inspectors). These kits should be safely located and secured in place so as not to become a projectile in the event of an accident.

Restocking and Maintaining Kits

A person in the workplace should be nominated to maintain the first aid kit (usually a first aider) and should:

- Monitor access to the first aid kit and ensure items used are replaced as soon as practicable after use.
- Undertake regular checks (after each use or, if the kit is not used, at least once every 12 months) to ensure the kit contains a complete set of the required items (an inventory list in the kit should be signed and dated after



each check).

- Ensure that items are in good working order, have not deteriorated and are within their expiry dates and that sterile products are sealed and have not been tampered with.

AlSCO offers a sturdy, highly visible, wall mounted First Aid Cabinet which features only hospital grade supplies. The first aid kit along with its managed service is designed to ensure ongoing compliance for your workplace. Choose the kits that best meet the requirements of your workplace from a [variety of AlSCO First Aid Kits](#).

FIRST AID SIGNS

Displaying well-recognised, standardised first aid signs will assist in easily locating first aid equipment and facilities. Further information on the design and use of signs is available in AS 1319 - Safety Signs for the Occupational Environment available from [Standards Australia](#).

You could also check and download first aid signs from the [AlSCO first aid resources page](#).





OTHER FIRST AID EQUIPMENT

In addition to first aid kits, you should consider whether any other first aid equipment is necessary to treat the injuries or illnesses that could occur as a result of a hazard at your workplace.

Automatic Defibrillator

Providing an [automatic defibrillator](#) can **reduce the risk of fatality from cardiac arrest** and is a useful addition for workplaces where there is a risk of electrocution or where there are large numbers of members of the public.

Automatic defibrillators are **designed to be used by trained or untrained persons**. They should be located in an area that is clearly visible, accessible and not exposed to extreme temperatures. They should be clearly signed and maintained according to the manufacturer's specifications.

Learn more about defibrillators, their origin and how they evolved over time, and why they're vital to your workplace through the following articles.

1. [I survived!](#)
2. [A Brief History of the Defibrillator and How it Saves Lives](#)
3. [AED: Does Your Workplace REALLY Need One?](#)





Eyewash and Shower Equipment

Eyewash and shower equipment may be permanently fixed or portable, depending on the workplace. [Eyewash equipment](#) should be provided where there is a **risk of hazardous chemicals or toxic substances** causing eye injuries.

Immediate access should be provided to **shower equipment in workplaces** where there is a risk of:

- exposure to hazardous chemicals resulting in skin absorption or contamination from infectious substances,
- serious burns to a large area of the face or body (including chemical, electrical or deep burns in sensitive areas).

Shower facilities can consist of:

- an appropriate deluge facility,
- a permanently rigged hand-held shower hose
- a portable plastic or rubber shower hose that is designed to be easily attached to a tap spout – for small, relatively low-risk workplaces where a fixed deluge facility would not be reasonably practicable but the risk of serious burns is still foreseeable (for example, a fish and chip shop).

Portable, self-contained eyewash or shower units have their own flushing fluid which needs to be refilled or replaced after use. Further guidance is available in AS 4775 – Emergency eyewash and shower equipment.

To know more about [why you need eyewash stations at your workplace read here](#).

Use this [handy guide to treating eye injuries](#) at your workplace.



FIRST AID FACILITIES

A risk assessment will help determine the type of first aid facilities needed. For example, a clean, quiet area within the workplace that affords privacy to an injured or ill person may be suitable and practicable for some workplaces.

Access to a telephone for contacting emergency services or an emergency call system should be provided as part of all first aid facilities.

First Aid Rooms

A first aid room **should be established at the workplace** if a risk assessment indicates that it would be difficult to administer appropriate first aid unless a first aid room is provided.

For example, workers who carry out work at workplaces where there is a higher risk of serious injury or illness occurring that would not only require immediate first aid, but also further treatment by an emergency service, may benefit from having access to a dedicated first aid room.

A first aid room is recommended for:

- low-risk workplaces with 200 workers or more
- high-risk workplaces with 100 workers or more.

The **contents of a first aid room** should suit the hazards that are specific to the workplace. The location and size of the room should allow easy access and movement of injured people who may need to be supported or moved by stretcher or wheelchair.

The following items should be provided in the room:

- a first aid kit appropriate for the workplace,



- hygienic hand cleanser and disposable paper towels,
- an examination couch with waterproof surface and disposable sheets,
- a cupboard for storage,
- a container with disposable lining for soiled waste,
- a container for the safe disposal of sharps,
- a bowl or bucket (minimum two litres capacity),
- electric power points,
- a chair and a table or desk,
- the names and contact details of first aiders and emergency organisations.

A first aid room should:

- ☐ offer privacy via screening or a door,
- ☐ be easily accessible to emergency services (minimum door width of 1 metre for stretcher access),
- ☐ be well lit and ventilated,
- ☐ have an appropriate floor area (14 square metres as a guide),
- ☐ have an entrance that is clearly marked with first aid signage.

Maintaining a first aid room should be allocated to a trained occupational first aider, except where this room is part of a health centre or hospital.



Health Centres

Health centres **staffed by a registered health practitioner** (a doctor or nurse) or paramedic can provide emergency medical treatment and cater to the types of hazards in high-risk workplaces. A health centre may be established in the workplace (e.g. at a large mine site) or, if readily available, external emergency services may be used.

If a health centre is located at the workplace, the facility should:

- ☐ be self-contained,
- ☐ be located at ground level where possible in a quiet, clean area that is a safe distance from hazardous operations and clear of any general thoroughfare,
- ☐ be convenient and accessible to workers at the times that they work and have an entrance clearly marked with health centre signage,
- ☐ have walls, floors and ceilings that are made of impervious materials and are easy to clean,
- ☐ have enough space to accommodate first aid equipment.

Not sure of what is needed at your workplace? Get a free workplace audit.
An expert from AlSCO will come to your workplace and help you decide.
Get in touch with AlSCO today.





HOW DO YOU DETERMINE WHAT CONSTITUTES A ‘NOTIFIABLE INCIDENT’?

Only the most serious safety incidents are intended to be notifiable, and they trigger requirements to preserve the incident site pending further direction from the regulator.

Under the WHS Act the following type of incidents that arise out of the conduct of a business must be notified to the relevant regulator:

The death of a person

- A serious injury or illness of a person
- A dangerous incident

A “**serious injury or illness**” requires a person to have:

- Immediate hospital treatment as an in-patient in a hospital
- Immediate treatment for:
 - An amputation of any part of his or her body
 - A serious head injury
 - A serious eye injury
 - A serious burn
 - The separation of his or her skin from an underlying tissue (such as



degloving or scalping)

- A spinal injury
- The loss of a bodily function
- Medical treatment within 48 hours of exposure to a substance.

“Dangerous incident” means an incident in relation to a workplace that exposes a worker or any other person to a serious risk to their health or safety emanating from an immediate or imminent exposure to:

- An uncontrolled escape, spillage or leakage of a substance
- An uncontrolled implosion, explosion or fire
- An uncontrolled escape of gas or steam
- An uncontrolled escape of pressurised substance
- An electric shock
- A fall or release from a height of any plant, substance or thing
- A collapse, overturning, failure or malfunction of, or damage to, any plant that is required to be authorised for use in accordance with the regulations
- A collapse or partial collapse of a structure
- A collapse or failure of an excavation or of any shoring supporting an excavation
- An inrush of water, mud or gas in workings into an underground excavation
- An interruption of the main system of ventilation in an underground excavation.

[Download the Incident Notification fact sheet from the Safe Work Australia website.](#)



WHEN TO CONSULT WITH WORKERS?

Many organisational decisions or actions have health and safety consequences for workers. For example, introducing new equipment may affect the tasks your workers carry out, their time-frames, how they interact with each other and the environment.

WHAT THE WHS ACT SAYS

The WHS Act identifies specific matters that trigger the requirement for consultation.

Section 49: A person conducting a business or undertaking must consult with workers when:

- ☐ Identifying hazards and assessing risks arising from the work carried out or to be carried out
- ☐ Making decisions about ways to eliminate or minimise those risks
- ☐ Making decisions about the adequacy of facilities for the welfare of workers
- ☐ Proposing changes that may affect the health or safety of your workers, and
- ☐ Making decisions about procedures for consulting with workers; resolving health or safety issues; monitoring the health of your workers; monitoring the conditions at the workplace and providing information and training for your workers.



However, it may be useful to also consult workers about matters that are not listed above, for example when conducting investigations into incidents or 'near misses'.

Regular consultation is better than consulting on a case-by-case basis only as issues arise because it allows you to identify and fix potential problems early.

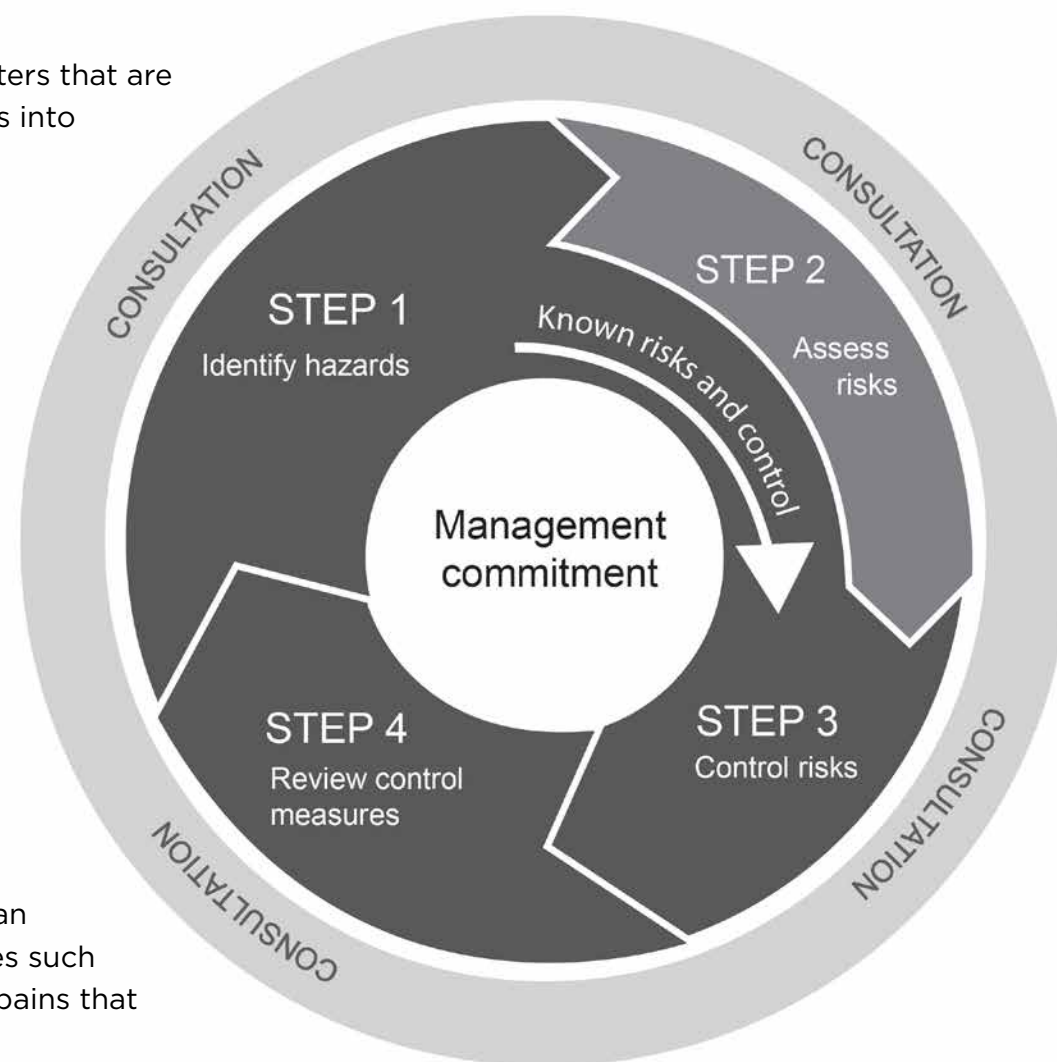
Managing risks

Consultation is required when identifying hazards, assessing risks and deciding on measures to control those risks.

In deciding how to control risks, you must consult with your workers who will be affected by this decision, either directly or through their health and safety representative. Their experience may help you identify hazards and choose practical and effective control measures.

Regularly walking around the workplace, talking to your workers and observing how things are done will also help you identify hazards. Conducting a survey of your workers can provide valuable information about work-related health issues such as workplace bullying, stress, as well as muscular aches and pains that can signal potential hazards.

Workers and their health and safety representatives may need access to information such as technical guidance about workplace hazards and risks (plant, equipment and substances). Information should not be withheld.



The Risk
Management Process
Diagram care of Safe Work Australia



The WHS Act requires that you allow any health and safety representative for a work group to have access to information you have relating to hazards (including associated risks) affecting workers in the work group, along with any information about the health and safety of workers in the work group. This does not extend access to any personal or medical information concerning a worker without the worker's consent.

Further guidance on risk management is available in the [Code of Practice: How to Manage Work Health and Safety Risks](#).

Deciding on welfare facilities

Utilities are things provided for the welfare of workers, such as toilets, drinking water, washing facilities, dining areas, change rooms, personal storage and [first aid](#).

You must consult your workers when making decisions about what facilities are needed (for example, the number and location of toilets), taking into consideration the number and composition of your workforce, the type of work your workers do and the size and location of your workplace. The consultation should also cover things such as access, cleaning and maintenance of the facilities.

If the facilities are already provided at the workplace, you should consult your workers and their health and safety representatives when there are any changes that may affect the adequacy of the facilities. This will help you determine if you need to change or expand your facilities.

Further guidance is available in the [Code of Practice: Managing the Work Environment and Facilities](#).



Making changes

You must consult your workers when planning to make changes that may affect their work health and safety, for example, when:

- Changing work systems such as shift work rosters, procedures or environment
- Developing a new product or planning a new project
- Purchasing new or used equipment or using new substances
- Restructuring the business.

Developing procedures

A procedure sets out the steps to be followed for work activities. You must consult with affected workers when developing procedures for:

- Resolving work health and safety issues
- Consulting with workers on work health and safety
- Monitoring workers' health and workplace conditions
- Providing information and training.

Procedures should be in writing to provide clarity and certainty at the workplace and assist in demonstrating compliance.

They should clearly set out the role of health and safety representatives, and any other parties involved in the activity. The procedures should be easily accessible, for example by placing them on notice boards and intranet sites.

If issue resolution procedures are agreed to, the WHS Regulations include minimum requirements including that these procedures are set out in writing and communicated to all workers to whom the procedure applies.



WHAT IS EFFECTIVE CONSULTATION?

Consultation is a two-way process between you and your workers where you:

- Talk to each other about health and safety matters
- Listen to their concerns and raise your concerns
- Seek and share views and information, and
- Consider what your workers say before you make decisions.

Section 48: Consultation requires that:

- ☐ Relevant work health and safety information is shared with workers
- ☐ Workers are given a reasonable opportunity to express their views and to raise health or safety issues
- ☐ Workers are given a reasonable opportunity to contribute to the decision-making process relating to the health and safety matter
- ☐ The views of workers are taken into account, and
- ☐ Workers are advised of the outcome of any consultation in a timely manner.

Management commitment and open communication between managers and workers are **important in achieving effective consultation**. Your workers are more likely to engage in consultation when their knowledge and ideas are actively sought and any concerns about health and safety are taken seriously.





Consultation does not mean telling your workers about a health and safety decision or action after it has been taken. Workers should be encouraged to:

- Ask questions about health and safety
- Raise concerns and report problems
- Make safety recommendations
- Be a part of the problem-solving process.

While consultation **may not always result in an agreement**, this should be the objective as it will make it more likely that the decisions are effective and will be actively supported.

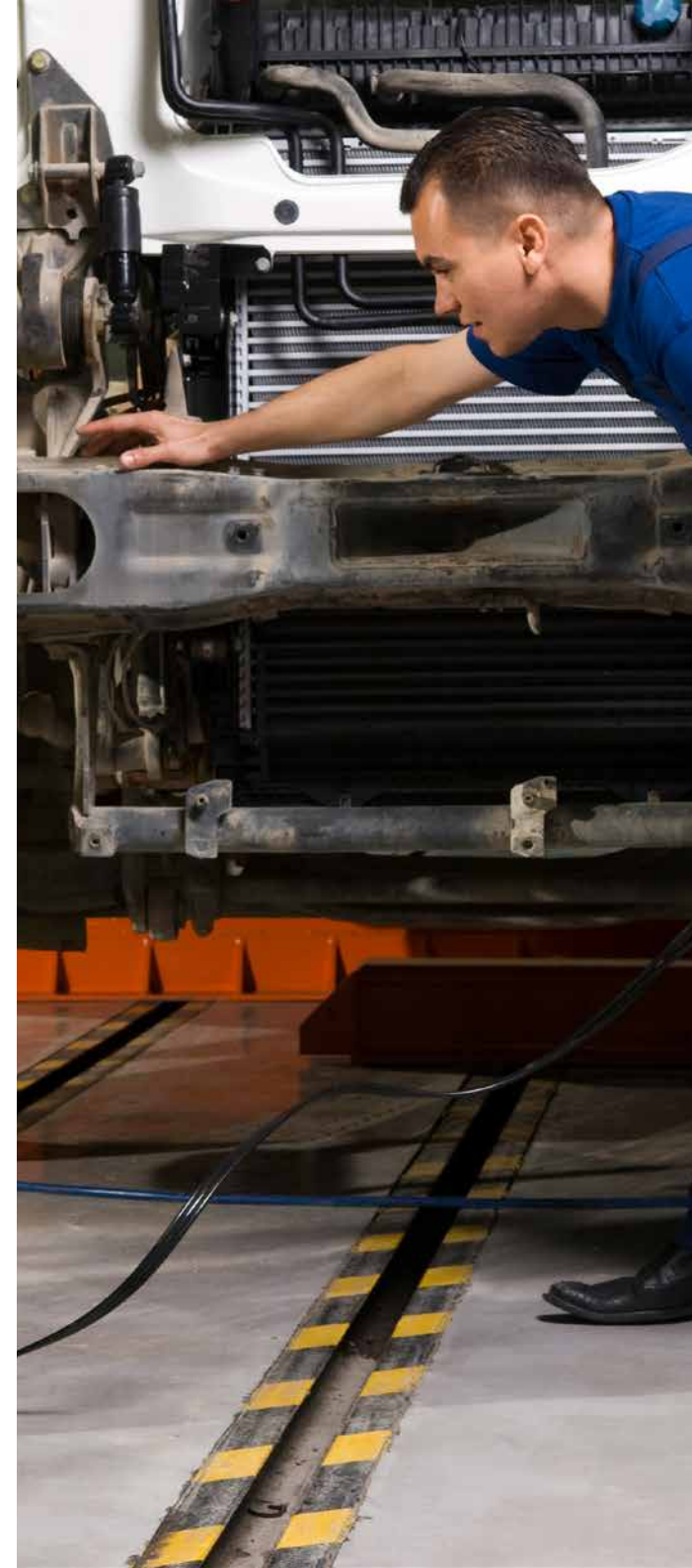
Sharing information

You must share relevant information with workers and their health and safety representatives about matters that may affect their health and safety.

This information should be provided early on so that workers and health and safety representatives have enough time to consider the matters, discuss them and then provide feedback to you.

You should make available all the information that you have relating to the health and safety matter to enable informed and constructive discussions. This information may include:

- Health and safety policies and procedures
- Technical guidance about hazards, risks and risk control measures
- Hazard reports and risk assessments
- Proposed changes to the workplace, systems of work, plant or substances



- Data on incidents, illnesses or injuries (in a way that protects the confidentiality of personal information).

The information should be presented in a way that can be easily understood by your workers and take into account literacy needs and the cultural or linguistically diverse backgrounds of your workers.

Young workers and those with limited English may be less likely to question health and safety practices or speak up if they are unsure. They may find it easier to communicate through a health and safety representative, an interpreter or worker representative.

Information should also be simplified and presented in different ways, such as using diagrams, to make it easier to understand.

Meeting face-to-face is usually **the most effective way of communicating**, although that may not always be possible or preferable. Information can also be shared in other ways, including:

- By telephone or email
- Featuring current health and safety news and information on intranet sites or noticeboards.

Information should be updated and attention drawn to new material so that people who do not regularly check it will know what is happening in their workplace.

Providing reasonable opportunities to express views and contribute

Giving your workers a reasonable opportunity to express their views and contribute to health and safety decisions may involve:

- Providing a suitable time during work hours for consultation with workers
- Allowing opinions about health and safety to be regularly discussed and



considered during workplace meetings

- Providing workers with different ways to provide feedback, for example, using email, setting up an intranet health and safety page or a suggestion box.

How long the consultation process takes will depend on the complexity of the health and safety matter, how many people are being consulted, the accessibility of workers and the methods of consultation.

A simple issue affecting only a small number of workers can probably be dealt with in a few hours or days through regular channels of communication. A complex technical matter, or consulting a large workforce, may require more time.

If there are health and safety representatives for the workplace, you must include them in the discussions, with or without the involvement of workers directly.

Taking views into account

You must take the views of your workers and health and safety representatives into account before making a decision. Consultation does not require consensus or agreement, but you must allow your workers to contribute to any health and safety decisions you make in your business.

Advising outcomes of consultation

You should agree to respond to concerns and questions raised by workers within a certain time-frame and offer feedback about any options they propose. You must inform your workers of your final decision or course of action as soon as possible. You should provide information to help them understand the reasons for your decision.



To what extent should you consult?

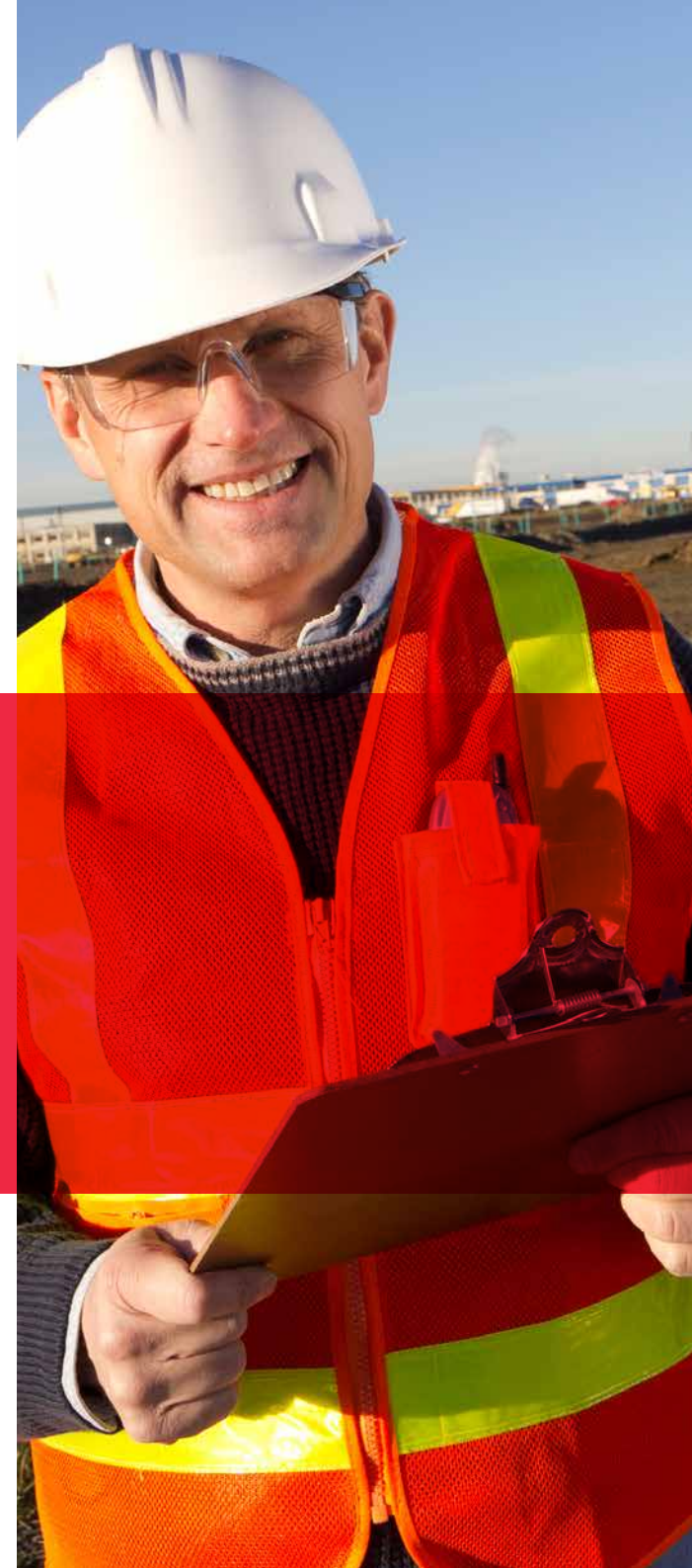
You must consult on health and safety matters so far as is reasonably practicable with workers who carry out work for you and who are (or are likely to be) directly affected. This includes consulting with your contractors and their workers and volunteers (if any) about health and safety decisions that directly affect them and which you influence or control.

The consultation that is 'reasonably practicable' is both possible and reasonable in the particular circumstances. What is reasonably practicable will depend on:

- ☐ Size and structure of the business
- ☐ Nature of the work that is carried out
- ☐ Nature and severity of the particular hazard or risk
- ☐ Nature of the decision or action, including the urgency to make a decision or take action
- ☐ Availability of the relevant workers and any health and safety representatives
- ☐ Work arrangements, such as shift work and remote work
- ☐ Characteristics of the workers, including languages spoken and literacy levels.

The aim of consultation should be to ensure that you have sufficient information to make well-informed decisions and that the workers who may be affected are given a reasonable opportunity to provide their views and understand the reasons for the decisions.

You are not expected to do the impossible but are required to take a proactive and



sensible approach to consultation. For example, an urgent response to an immediate risk may necessarily limit the extent of consultation in some circumstances.

It may also not be reasonably practicable to consult with workers who are on extended leave. However, it would be appropriate to ensure that these workers are kept informed about any matters that may affect their health and safety when they return to work.

It is not always necessary to consult with every worker in your workplace. The workers you consult with will be those who are, or could be, directly affected by the health and safety matter.

For example, a problem with air temperature experienced on one level of an office block may not directly affect the work health and safety of workers on other levels. Only workers on the affected level need to be consulted about the matter.

Must consultation be documented?

Consultation with workers and with other duty holders does not have to be documented unless specifically required under the WHS Regulations. However, it is recommended that you keep records to demonstrate compliance with consultation requirements. Records of consultation may also assist the risk management process and make disputes less likely.

The records should include any outcomes of discussions. The records can be brief and simple, and cover:

- Who is involved
- Who is to take action and by when
- What the safety matter is
- When the action has been completed
- What decision has been made



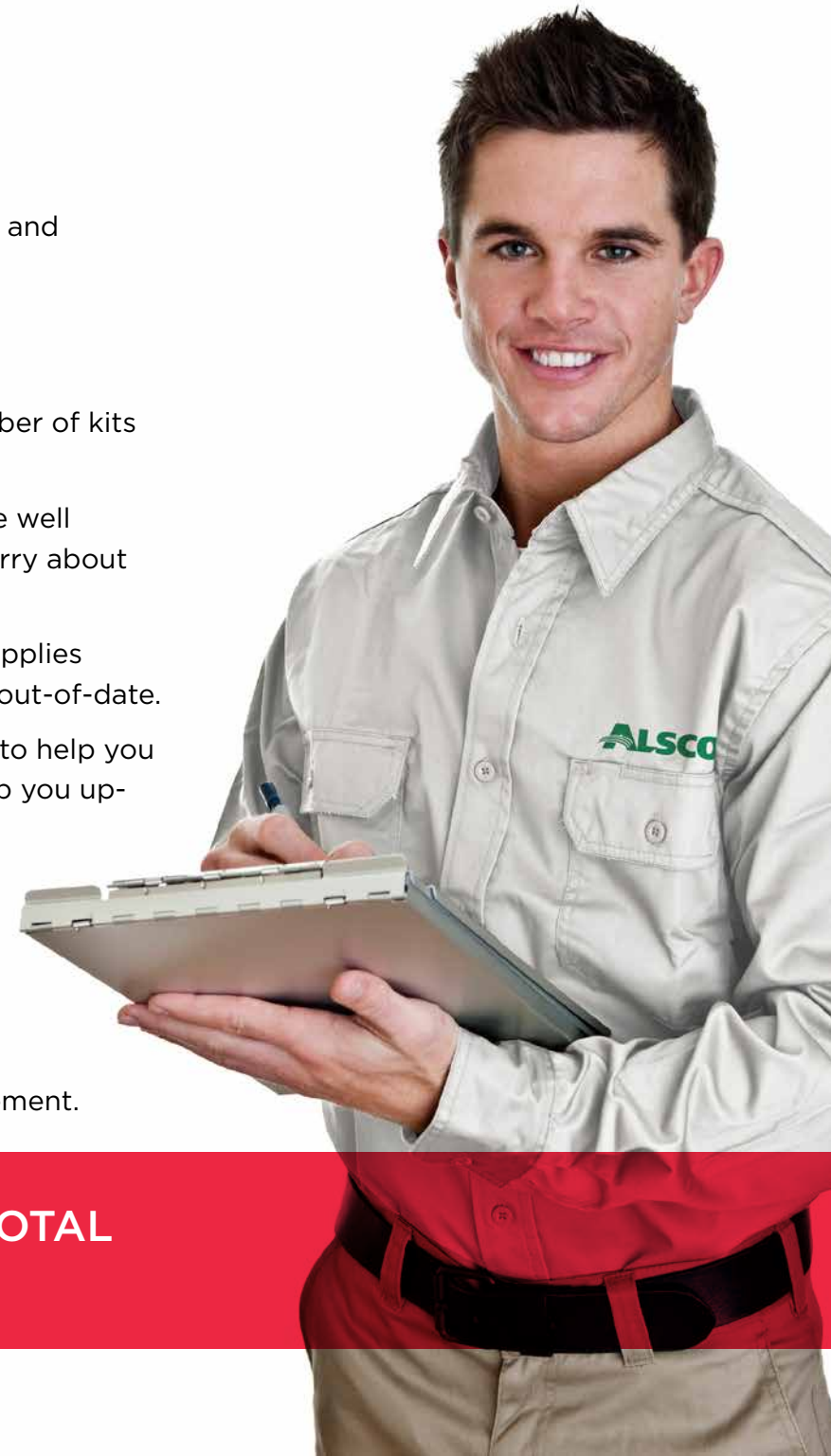
WHY ALSCO?

Simply because AlSCO **delivers, installs, restocks and manages** your first aid kits and equipment and ensures **complete WHS compliance** for your entire workplace.

FEATURES OF THE ALSCO MANAGED SERVICE

- AlSCO conducts a survey to ascertain your requirements. Modules and number of kits are adjusted to meet the needs of your specific workplace
- The kits contain quality hospital-grade supplies. The supplies of the kits are well organised in clearly-labelled, injury-specific modules. You don't have to worry about locating the correct supplies quickly during an emergency.
- All modules are refilled as per a scheduled maintenance programme. All supplies which are approaching their expiry date are replaced before they become out-of-date.
- Leave your WHS compliance worries behind. AlSCO starts with a free audit to help you identify what you need to do in order to achieve compliance. It also keeps you up-to-date with changes in WHS legislation.
- It is a complete safety and WHS compliance solution. Not only are AlSCO first aid kits WHS compliant, they also offer eyewash stations and state-of-the-art defibrillators. AlSCO is a Registered Training Organisation offering nationally accredited training courses for first aid and fire and warden training.
- One small, simple flat fee allows for easy budgeting and cash-flow management.

ENSURE COMPLETE WHS COMPLIANCE WITH TOTAL PEACE OF MIND. GET YOUR FREE QUOTE NOW.



APPENDIX: LINKS AND FURTHER READING

Websites Worth Visiting:

- [Safe Work Australia](#)
- [Alsco Training](#)
- [Alsco First Aid](#)

Recommended Reading:

- [Australian Work Health & Safety Strategy, 2012-2022](#)

Resources:

- [First Aid Signs](#)
- [First Aid Posters](#)
- [First Aid How-To Guides](#)
- [First Aid Book Reviews](#)
- [First Aid Glossary](#)
- [Safe Work Australia Guidance Material, Information Sheets and Fact Sheets](#)
- [Harmonised WHS Acts across states and territories](#)
- [Model Codes of Practice](#)

