

The University of Melbourne
Occupational Health and Safety Committee
Minutes of Meeting 1/07

Meeting 1/2007 of the Occupational Health and Safety Committee was held at 2.15pm on Tuesday 23 January 2007 in the Jim Potter Room, Old Physics.

1. Welcome, Attendance and Apologies

MEMBERSHIP	In Attendance	Apologies
Employer Representatives Vice-Principal nominated by the Vice-Chancellor (Chair) Vice-Principal, Human Resources or nominee Vice-Principal, Property and Campus Services or nominee Dean of a laboratory based Faculty General Manager, Environment Health and Safety Unit Academic Registrar or nominee	Mr Nigel Waugh Ms Julia McQuillan Ms Sue Butler attending for Mr Colin Reiter Mr Stefan Delaney Mr Garry Thomson	Prof. Glen Browning
Employee Health and Safety Representatives Six Health and Safety Representatives (HSRs) elected by the Health and Safety Representatives	Mr Paul Donald Mr Lindsay Rayner Mr Steven Adams	Mr Bruce Greenwood Ms Jennifer Scott Mr Ken Young
In Attendance	Ms Belinda Rule (Minutes Secretary)	
Student Observers One student nominated by the University of Melbourne Student Union One student nominated by the University of Melbourne Post Graduate Association	Mr Robert Anderson-Hunt Ms Sally Beattie attending for as-yet unappointed observer.	
Occasional Observers Other observers as determined by the Committee and invited by the Chair.	Mr Mike Barry	
Standing Observers		Mr Peter Robertson

2. Minutes of the previous meeting 04/2006

The minutes of meeting 04/2006, held on 31 October 2006, copies of which had been distributed, were confirmed.

3. Action items from meeting 04/2006

3.1 Consultation Procedure

The subcommittee of Ms Elizabeth Baré, Mr Delaney, Mr Donald and Mr Greenwood that had been delegated the power to ratify the Consultation Procedure had still not met.

Mr Donald advised that issues of interpretation of the *OHS Act 2004* (Vic) remained unresolved. Mr Waugh enquired whether the HSRs had another suggested wording for the

procedure. Mr Donald advised he had emailed this to the previous chair, Ms Baré. Mr Delaney advised he had never received an alternate suggested version of the procedure from the HSRs as previously agreed, and the HSR members had declined to attend the subcommittee meeting that had been arranged. Mr Delaney requested again that the HSRs put forward an amended version of the procedure, in relation to which he was happy to negotiate.

Mr Delaney noted it was possible for the University to adopt a "non-agreed" procedure if a resolution of these discussions was not reached; however, this was not preferred.

Members agreed that the matter was overdue to be resolved, and the full subcommittee (with Mr Waugh replacing Ms Baré) should meet promptly in the next fortnight to discuss an alternate draft to be put forward by the HSRs. Mr Donald advised he would not return from leave until January 30. Members noted that Mr Greenwood was on leave and his return date was unknown, and agreed that another HSR member could substitute for Mr Greenwood. Mr Waugh agreed to consult Ms Baré about Mr Donald's email. Mr Delaney agreed to forward the latest draft of the procedure to Mr Donald. Ms Rule would contact the subcommittee members to arrange the meeting.

4. Reports

4.1 Faculty and Department Safety Committees

Mr Delaney tabled the Phlebotomy Working Group Recommendations to OHSC, which had been referred to the OHSC by the Faculty of Medicine, Dentistry and Health Sciences (MDHS) for informational purposes. The Phlebotomy Working Group had been convened to review student training and competency measures in light of the needlestick injury at Northern Hospital that was reported to this committee on 31 October 2007. Mr Delaney would be writing to other laboratory-based Faculties to warn them of the issues raised and confirm procedural safety. He did not believe that other Faculties were involved in blood-taking, but would request confirmation of this in his letter.

Mr Rayner advised he thought MDHS had tackled the issues thoroughly.

Mr Thomson advised that his division, Academic Services, had a single exclusive trained blood-taker employed by the Health Service, and also had trained student nurses on rotation. Stringent protocols were already in force. However, he endorsed the recommendations.

Mr Barry sought clarification as to whether deficiencies in previous procedure had caused the incident. Mr Delaney advised that this was not the case – the student was working under normal and adequate supervision, but such injuries are unfortunately common in hospital settings.

4.2 Health and Safety Representatives

Mr Donald asked Mr Delaney to clarify the role of the EHS Unit in relation to HSRs. Mr Delaney clarified that for the whole University, the EHS Unit provided advice on relevant legislation, risk management and consultative process. In the past the Director of the Risk Management Office (now defunct), and later the General Manager, EHS, was invited to HSR forums to provide information, but this has not occurred since Alison Hunt-Sturman resigned as convenor of the forums.

Mr Donald advised that an instance had occurred where an EHS staff member had declined to provide advice to him. Mr Delaney advised that the details of such an instance should be raised with him for investigation.

4.3 HSR Refresher Training

Mr Delaney reported that a legislative update session of the on-campus HSR refresher training has been run in conjunction with Organisational Development, with a trainer from Victorian Trades Hall Council. Twenty HSRs attended and feedback had been good. HSR members who had attended also made a positive assessment. Further sessions are intended to be run this year.

4.4 Significant Incidents

Mr Delaney gave a verbal report on three significant incidents that had been reported to WorkSafe:

- trip and fall down stairs in Lincoln Square resulting in fractured arm. The stairs have no obvious defects, but their slope is being investigated for possible improvement;
- medical treatment after exposure to a substance. Staff member collapse occurred some time after breathing air-freshener in bathroom. Medical cause of collapse is not clear, and air-freshener in question is not classified as a Hazardous Substance;
- serious laceration. Occurred when knife used to cut cable tie slipped and sliced finger. Staff member has been advised to use scissors.

WorkSafe has decided not to investigate any of these incidents. There has been an increase in notifications to WorkSafe because the University's incident reporting procedures are working better than previously, and also at WorkSafe's request that organisations "over-notify" it of incidents.

Mr Waugh enquired whether the University had an air-freshener policy. Mr Delaney advised that it did not, and this was a low priority as air-fresheners were classified as non-hazardous substances and the risk associated with their use was low.

4.5 Regulatory Activity

Members were provided with a consolidated list of WorkSafe visits from 24 October 2006 to 16 January 2007 together with a verbal report from Mr Delaney.

In relation to the planned visit to the Dental Hospital, Mr Thomson asked whether the equipment at the new hospital premises was new. Mr Delaney advised that most of the University's equipment was new, although perhaps RMIT's (who share the premises) equipment was not. Concerns about RMIT's equipment should not affect us.

4.6 EHS Management System

4.6.1 External Audits

Provision of printed reports on this matter had been overlooked; the reports would be included with the circulation of the minutes.

Mr Delaney advised that a planning meeting had occurred with Lloyd's Register Quality Assurance. An audit would occur on 6-9th February, encompassing MDHS, Construction in Property and Campus Services, Information Services and contractor management in Information Services.

Six audit findings of Requires Correction were closed out at the planning meeting, but several remain, including purchasing, two in Vet Science and one in Student Union.

The University is making good progress as compared to eighteen months ago; in fact better than in many years.

4.6.2 Internal Audits

Mr Barry provided a report on the final results of internal OHS audits in 2006, with a comparison report for 2005. There was an improvement (decrease) in Non-Conformance findings from 11% to 4%. There was an increase in Requires Correction findings, but this was at least partly due to an increase in the number of criteria audited, and was less significant. Mr Barry was happy to answer any further queries about the reports at a later time, as he appreciated the information was very detailed.

Mr Thomson asked the reason for the increased Non-Conformances in training. Mr Barry advised these criteria had been assessed more intensively in 2006, and new compulsory training requirements had produced the Non Conformances. Some academic staff did not appear to be undergoing training in their occupational health

and safety responsibilities. Mr Delaney advised he was organising specialised training for University staff in executive roles. Invitations would follow the results of a survey on existing training completions by executives that he had conducted.

Ms Butler suggested it would be more useful to see comparison figures between 2005 and 2006 by percentage, as the number of criteria audited has increased, and members agreed.

Ms McQuillan sought clarification on the meaning of "systems audit", and Mr Delaney advised that this refers to an overview of the entire occupational health and safety management system.

Mr Anderson-Hunt asked what the Student Union audit involved, and Mr Delaney clarified that only that section of the Union that was a University-owned company was audited, and this did not include the elected representative area.

Mr Barry drew the committee's attention to the extract of the Planning and Budget Committee's EHS Budget Incentive 2007 provided. He advised its intention was to ensure that the audit process is taken seriously. Most areas are co-operative but there are certain repetitive Non Conformances that persistently go un-remedied.

Mr Adams asked whether the measure relied too much on punishment above positive reinforcement, which might be more effective. He expressed concern that pressure on lower level EHS staff would increase.

Mr Delaney advised that the goal of the measure was that no-one would be charged. Faculties receive ample notice to plan for and enact corrections to problems, and if they ultimately fail, then the money from the penalty may be used by the Senior Vice-Principal to fund the fix. The Senior Vice-Principal has also half-funded four new Faculty-based EHS positions, and this year's "Safety Leadership and Cultural Change" program would also provide positive feedback and recognise good performance.

Mr Barry provided the Internal Audit Schedule for 2007. He stressed this was a working document, and dates could be changed in the event of extenuating circumstances.

4.7 Review of EHS manual

Mr Delaney provided copies of three new procedures for inclusion in the EHS Manual:

- 4.7 (a) Emergency Preparedness and Response
- 4.7 (b) First Aid
- 4.7 (c) EHSMS Audit Procedure

These procedures were the result of a review of existing procedures and extensive consultation – Faculty General Managers, HSRs and EHS Coordinators were contacted directly, and all staff (including Building Emergency Controllers and First Aiders) were notified via Staff News.

Limited comments were received during the consultation process in regard to terminology, phrasing and presentation, including the need to define the term "internal audit", and these comments have been incorporated.

Mr Thomson asked why the Emergency Preparedness and Response procedure did not make reference to the University's new Crisis Management Response Plan (CMRP), and noted that the definitions of levels of threat were inconsistent between the documents.

Mr Waugh noted the CMRP was a sensitive document and its content should not be discussed in detail. Mr Delaney advised that the CMRP and its governance process were still in draft at higher management levels, so it could not be included yet. The Emergency Planning Group may direct further integration of the two documents at a later date, but such integration was not in the purview of the OHSC.

Mr Adams enquired why so much responsibility in the First Aid procedure was given to the Head of Department rather than the Department EHS Committee. Mr Delaney advised he felt that it was important that responsibility be explicit and concrete, and if it were given to the Department EHSC then final responsibility might be ambiguous. Ms McQuillan noted that this was consistent with a Head of Department's other responsibilities for staff.

The Committee supported the three procedures.

5. Other Business

5.1 Inclusion of EHS matters in the Head Start Program

In light of Heads of Department's EHS responsibilities, Mr Barry asked that material on EHS responsibilities be included in the "Head Start" induction program for Heads of Department, run by Human Resources. Ms McQuillan agreed to follow this up with Organisational Development.

5.2 Inclusion of local area EHS contacts information on EHS Unit website

Mr Adams asked that the existing online list of the University's HSRs be linked more prominently on the EHS Unit webpage. Mr Delaney agreed to cause it to be linked from the "EHS Unit Contacts" page.

5.3 Provision of prescription safety glasses

Mr Adams reported that he had been approached by a staff member whose department had declined to pay for prescription safety glasses. Mr Delaney advised that there was no formal policy on prescription safety glasses. In general, the University must provide Personal Protective Equipment (PPE), but it is up to the discretion of the department what form the PPE takes, provided it meets relevant standards. Depending on technical issues, the department may have a prerogative to choose to supply slide-over style safety lenses that attach to an existing pair of ordinary prescription glasses, rather than full prescription safety glasses. Mr Waugh suggested an individual discussion between the EHS Unit and the staff member would be most appropriate.

5.4 EHS Audit support materials on Internal Audit website

Mr Barry drew the committee's attention to a new EHS section of the Internal Audit website, offering resources to assist departments in preparing for Internal EHS Audits:
<http://www.unimelb.edu.au/audit/services/index%20EHS.html>

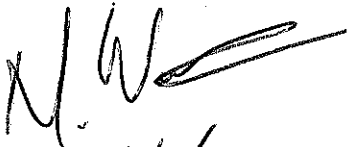
The next meeting of the Occupational Health and Safety Committee will be held on Monday, 23 April 2007 at 2.15pm in Plaza Conference Room 1.

MEETING CALENDAR FOR 2007

Tuesdays at 2.15pm in the Jim Potter Conference Room, Old Physics:

- 23 January 2007
- ~~3 April 2007~~ Postponed to Monday 23 April 2007, in the Plaza Conference Room 1.
- 10 July 2007
- 16 October 2007

BJR
2 April 2007


6/1/07