Contents

WORKPLACE HEALTH & SAFETY

Policy Number: 702	
Title: Definitions	
Owner: Executive Manager	
Review Date: January 2018	**Policy Risk Rating:** Low

Accident: Read the same as for **incident**.

Aged Care Facility: The term 'The Aged Care Facility' refers to either the Village Baxter Lodge or the Village Baxter Manor.

Attachment: Provides additional information to accompany the procedure

Consultation: is required under the WHS legislation in every state. In this context 'consultation' is the requirement for there to be a genuine opportunity for employees to effectively participate in the decision-making process on matters affecting their WHS.

Department head: in the Village Baxter these will be:-

- for the Manor   - Director of Nursing.
- for the Lodge   - Director of Nursing
- for Catercare   - Catering Manager
- for the Maintenance Dept.   - Infrastructure Manager
- for the Home Care Services   -   - Community Services Manager
- for the Day Care Centre   - Community Services Manager
- for Administration   - General Manager

Document (Doc): refers to a model procedure

Employee Hand Book: BVB provides all employees with a handbook that summarises important information such as administration, terms and conditions and WHS.

Employee representatives: Victoria has legal requirements covering nominated (usually elected) employee representatives. They are referred to as WHS representatives and represent particular work groups.

Equipment: this includes items classified as 'plant' under state legislation as well as hand-held and hand-driven equipment.

Forms: designed to be used by the facility for routine recording of information,

Hazard: is a source of potential harm. It is often useful to consider sources such as energy, chemicals, personal physical movements, and the movement of people.

WHS coordinator: in these procedures, the WHS coordinator is the Human Resources / Community Services Manager who has a designated role in WHS.

Incident: is an event that has caused or has the potential to cause injury, illness or damage.

PPCE: (personal protective clothing and equipment), is any item of clothing or equipment worn by workers to limit exposure to hazards. It includes protective footwear, hand and eye protection, respiratory protection and protective clothing.

Management audit: managers have a legal responsibility to monitor the WHS program and the compliance with documented procedures. The management audit process should include review of documentation, such as completed checklists, and workplace inspections conducted at appropriate intervals. This audit process does not imply that managers, or anybody else, need to take on a policing role.

Resident Information Book: this may be a booklet or a few pages of information for incoming residents and their families. There are a number of WHS matters where the support or action by residents or their families can assist in reducing the risk for both employees and residents.

Risk: is the likelihood (probability) that harm will occur.

Risk management: the management processes for reducing the potential for a hazard to cause harm. Usually it involves a range of strategies including hazard identification, assessment and control, and the implementation of management systems.

Senior manager/responsible officer: WHS is legally a management responsibility. This is recognised in state legislation by the requirement to designate a senior manager who has authority to act on behalf of the organisation in WHS matters.

Serious injury: There is a legislated requirement to report workplace deaths and serious injury. Serious injury is defined in Accident Compensation Act and includes fracture or amputation of limbs or part of limb, loss of use of any part of person's body or bodily function, admission to hospital, acute symptoms of exposure to substances.

Shall/should: 'shall' indicates that the procedure is mandatory, while 'should' allows some discretion.

States: refers to both states and territories.

Supervisor: Those who have 'control' of employees, whether or not they are paid an allowance.

Training: each procedure is accompanied by training and other information requirements. This does not imply that every procedure must have a designated training program. Requirements under the heading 'Training' may involve formal training, briefing of employees or dissemination of information on the new procedure. These requirements may be integrated with those of a number of other procedures to make a training/information module.

Policy Number:	711
Title:	Introduction to the Village WHS Manual
Owner:	Executive Manager
Review Date: January 2018	**Policy Risk Rating:** Low

1. INTRODUCTION

1.1. A healthy and safe working and living environment requires co-operative and concerted effort by management and all employees.

1.2. The Directors and management of The Village Baxter are committed to the development of a comprehensive and effective Workplace Health and Safety (WHS) Program, and to the implementation of the policies and procedures detailed in this Manual. The Manual describes the purpose, scope, procedure, training requirements and responsibility for implementing each aspect of the WHS Program. It is the reference point for everyone involved with the Village in creating and maintaining a healthy and safe environment.

1.3. The WHS Manual has been drafted by a sub-committee of the OH&S Committee, using the Practical Guide to Implementing Workplace Health and Safety in Residential Aged Care as a model procedure. It has been approved by the OH&S Committee and General Manager. The manual is regularly reviewed by the WHS Committee to ensure information is relevant and current.

1.4. Users of the Manual should refer where appropriate to The Village Baxter's organisation chart, and to floor plans in their workplace which indicate the location of emergency exits, fire extinguishers and associated equipment, and evacuation assembly points. Users should ensure they understand key terms as they are defined in the Manual.

1.5. The Manual, and its policies and procedures, shall be reviewed annually, to monitor its effectiveness and facilitate the process of continuous improvement.

Policy Number:	721
Title:	Workplace Health and Safety
Owner:	Executive Manager
Review Date: January 2018	**Policy Risk Rating:** Low

1. PURPOSE

The WHS policy is a statement of Board of Directors and management commitment and an accurate reflection of the approach to WHS within The Village Baxter.

2. PROCEDURE

2.1. The WHS policy shall be developed by the WHS Committee.

2.2. The General Manager or delegate and a representative of WHS Committee shall sign and date the procedure in recognition of the joint contributions.

2.3. The policy shall be reviewed annually.

2.4. The WHS policy shall be permanently displayed on the Village Intranet and website, and the Resident Information Book and Employee Handbook shall also make reference to it. Hardcopies will be made available as necessary.

3. RELATED POLICIES AND DOCUMENTS

- All policies numbered 700 - 799

Policy Number: 721.1	
Title: Attachment 1 – WHS Policy	
Owner: Executive Manager	
Review Date: January 2018	**Policy Risk Rating:** Low

The Village Baxter is both a working and living environment in which we aim to achieve the standards of care established by the Department of Health and Ageing. The needs of the residents can only be fully met when the Workplace Health and safety of employees is not compromised.

The Village Baxter believes that all employees have the right to a workplace that is, as far as is practicable, safe and without risk. While managing WHS is a management responsibility, employees, contractors, residents, and visitors all have a role to play in achieving a safe and healthy working and living environment.

As part of their role in achieving a healthy and safe working and living environment, employees will be provided with a genuine opportunity to participate in decisions on matters with the potential to affect their WHS.

Our residents are at 'home' at **The Village Baxter** and have the right to participate in activities which involve a degree of personal risk. However **The Village Baxter** is a community and, as in all communities, no individual has the right to put other members of the community, including employees, at risk.

The management of **The Village Baxter** will implement strategies in line with state and federal WHS legislation aimed at continuously improving health and safety. Relevant information, instruction and training will be provided to enable all personnel to carry out their responsibilities and effectively participate in the WHS program.

Everybody at **The Village Baxter** has a personal responsibility to work safely. Management, employees and contractors recognise that no task is so important that time cannot be taken to find a safe and healthy way to work.

Management Representative Signature	**Date**
WHS Committee Representative Signature	**Date**

Policy Number:	722
Title:	Roles and Responsibilities
Owner:	Executive Manager
Review Date: January 2018	**Policy Risk Rating:** Low

2. PURPOSE

2.1.   WHS is an integral part of work – not an 'add on'. WHS is legally and practically a management function. Effective management requires identification and allocation of responsibilities and monitoring of performance.

2.2.   This document identifies the WHS responsibilities of all Village Baxter community members so that each person can effectively contribute to the WHS of employees.

3. PROCEDURE

3.1.   Everybody in The Village Baxter has responsibility for WHS to the extent to which they are capable. Capability is determined by the level of authority, qualifications, skills, training and physical capability.

3.2.   The General Manager has overall responsibility for decisions relating to WHS.

3.3.   The Human Resources Manager shall be designated the 'WHS Convenor'.

3.4.   When functions are required outside the expertise of the WHS Convenor or other on-site personnel, management shall engage the services of appropriately qualified personnel to provide advice or deliver service.

3.5.   Responsibility statements are attached to this Policy.

3.6.   The responsibility statements shall be reviewed by the WHS committee and the final statements agreed to by the WHS committee and General Manager.

4. RELATED POLICIES AND DOCUMENTS

- Attachment 1   WHS Responsibilities of General Manager
- Attachment 2   WHS Responsibilities of Department Head
- Attachment 3   WHS Responsibilities of Convenor, WHS Committee
- Attachment 4   WHS Responsibilities of WHS Committee
- Attachment 5   WHS Responsibilities of Employees
- Attachment 6   WHS Responsibilities of Residents and Their Families.
- Attachment 7   Role of WHS Committee.

Policy Number:	722.1
Title:	Attachment 1 – Responsibilities of the General Manager
Owner:	Executive Manager
Review Date: January 2018	**Policyicy Risk Rating:** Low

The General Manager shall ensure the development of an effective WHS program, including compliance with statutory obligations.

The General Manager has a responsibility to:

1. Publish a Policy expressing management attitude on WHS (Policy 721 – Attachment 1)

2. Facilitate mechanisms to provide an effective consultation with employees and the WHS Committee (Policy 722 – Attachment 1 Role of WHS Committee; Policy 741 WHS Issue resolution)

3. Ensure an effective WHS plan is in place including objectives and targets (Policy 731 – Attachment 1)

4. Consult with the membership of the WHS committee

5. Ensure that WHS committee meetings are held and that an agenda is circulated and minutes kept (Policy 722 – Attachment1)

6. Assign someone to coordinate the WHS function

7. Monitor WHS performance including compliance with external regulations/standards and internal policy and procedures

8. Ensure appropriate resources and budget allocations for WHS improvement, training and equipment

9. Attend selected meetings, training sessions and other safety related events

10. Liaise with government WHS inspectors as required

11. Be readily available to employees to discuss WHS issues and take an active role in the resolution of concerns

12. Incorporate WHS in the performance appraisal system for all managers and supervisors

13. Review the WHS performance of managers and supervisors including analysis of workplace injuries

WORKPLACE HEALTH & SAFETY

Policy Number:	722.2
Title:	Attachment 2 – Responsibilities of the Department Head
Owner:	Executive Manager
Review Date: January 2018	**Policy Risk Rating:** Low

The department head coordinates the WHS function for their department and puts in place an effective WHS program.

The department head has a responsibility to:

1. monitor WHS performance within the department

2. ensure compliance with external legislation, standards and internal policies and procedures

3. ensure that employees and the WHS Committee are consulted during development and review of policies and procedures or changes in work environment that impact upon staff safety

4. implement strategies to ensure that hazards are identified and risks assessed and effectively controlled

5. ensure all incidents are documented and investigated

6. review incident reports and investigations

7. regularly review safety performance of employees involved in multiple incidents

8. ensure adequate training is provided for all employees in WHS issues

9. support the function of the WHS committee

10. through organisation charts and rosters ensure adequate supervision taking account of safety needs

11. take action to make safe any unsafe situations or acts

12. ensure safe work procedures are defined and documented for each task

13. facilitate return to work of injured workers through agreed procedures

14. set an example by observing safety rules

Policy Number:	722.3
Title:	Attachment 3 – Responsibilities of Convenor, WHS Committee
Owner:	Executive Manager
Review Date:	January 2018 **Policy Risk Rating:** Low

The role of the WHS Convenor is to facilitate the implementation and monitoring of the WHS program. The role will be integrated with other roles, however there should be a time allocation for WHS duties.

The WHS Convenor does not take on the management role or responsibilities in relation to the WHS function. It is a legal requirement, that managing WHS is the responsibility of management. The WHS Convenor is to:

1. facilitate the development and coordination of preventive strategies such as policies, procedures, safe work practices, control of specific hazards, safety management plans, and health promotion

2. ensure safety and health programs are integrated into the work systems

3. consult and communicate to promote safety and health in the workplace

4. facilitate the activities of the WHS committee

5. assist in identification and assessment of workplace hazards and the development of control strategies

6. be involved in workplace inspections, audits and incident investigation

7. assess the impact on WHS of planned and actual changes to the workplace and work practices

8. access sources of WHS information and systematically disseminate information

9. coordinate the collection, recording and analysis of WHS data

10. provide advice and information to managers and the WHS committee

11. coordinate the development and implementation of an WHS training program

12. maintain currency of information on legislation, codes of practice, and industry and Australian standards

13. contribute to the evaluation of the effectiveness of the WHS program

14. prepare budget for submission to General Manager

Policy Number:	722.4
Title:	Attachment 4 – WHS Responsibilities WHS Committee Members
Owner:	Executive Manager
Review Date: January 2018	**Policy Risk Rating:** Low

WHS Committee members have a critical role in ensuring that documented procedures are translated into a safe and healthy work environment and appropriate work practices, and that safety issues are identified and dealt with appropriately.

WHS Committee members have a responsibility to:

1. Attend meetings.

2. Prepare for meeting by reading circulated material prior to the meeting

3. Act as a resource and advocate for staff

4. Assist in recommending solutions to WHS issues.

5. Participate in the in the development, implementation and monitoring of the WHS Plan

6. Set an example and promote an ethos of safety throughout the Village

7. Communicate concerns which may affect policies and procedures.

8. Be interested and motivated to take an active role in the WHS Committee and in implementing actions in the workplace.

9. Assess and monitor WHS priorities.

10. Assist in resolving WHS issues referred to the Committee.

Policy Number:	722.5
Title:	Attachment 5 – WHS Responsibilities of Employees
Owner:	Executive Manager
Review Date: January 2018	**Policy Risk Rating:** Low

In the performance of their work, employees are responsible to the extent of their ability, to preserve the WHS of themselves, their fellow employees and others, including residents.

In particular, employees are to:

1. Set an example to fellow employees in following all OHS procedures, practices and directions and adopting safe systems of work.

2. Correct, where possible, and immediately report, using documented procedures, any unsafe situation including 'near-miss' incidents

3. Ensure they do not perform unfamiliar tasks for which they have not received relevant appropriate instruction or training

4. Report, using documented procedures, all work-related injuries

5. Cooperate with, and participate in, all programs designed to make the working and living environment safer and healthier

6. Maintain good housekeeping standards at all times

7. Observe all warning signs and notices

8. Wear and/or use, in the proper manner, protective clothing and equipment appropriate to the job

9. To wear clothing and footwear appropriate for the tasks to be performed.

10. Contribute ideas to the development of a safer and healthier working and living environment

11. Not intentionally or recklessly interfere with or misuse any equipment or materials.

12. Participate in and support the return-to-work programs

13. Cooperate with the employer so far as is necessary to meet employer's obligations under OHS legislation.

14. Follow established work practices and policies

Policy Number:	722.6	
Title:	Attachment 6 – WHS Responsibilities of Residents and Their Families	
Owner:	Executive Manager	
Review Date:	January 2018	**Policy Risk Rating:** Low

The Village Baxter provides residents with a supportive home environment aimed at enabling residents to lead a full, and even risk-taking, lifestyle. However, the rights of residents to a home-like environment and the choice to take some personal risk shall not place employees or other residents at risk of injury or ill health.

To help ensure a healthy and safe environment for all, families and capable residents should:

1. contribute their ideas and viewpoints on WHS issues at Residents' Meetings
2. appreciate that all Village Baxter procedures and tasks will be designed with the wellbeing of both employees and residents in mind
3. acquaint themselves, and comply, with the requirements of The Village Baxter emergency evacuation plan and any safety rules
4. acknowledge that from time to time some activities and routines may be reorganised to take into account the WHS or rehabilitation needs of employees
5. acknowledge that all employees have the right to a healthy and safe working life and therefore should not be expected to place themselves at risk of injury in their day-to-day work
6. appreciate that WHS considerations may mean that not all requests for services can be accommodated immediately or as expected or preferred

Policy Number:	722.7
Title:	Attachment 7 – Role of WHS Committee
Owner:	Executive Manager
Review Date:	January 2018 **Policy Risk Rating:** Low

1. THE MAJOR OBJECTIVES OF THE COMMITTEE ARE TO:

The WHS policy is a statement of Board of Directors and management commitment and an accurate reflection of the approach to WHS within The Village Baxter.

1.1. facilitate cooperation between The Village Baxter and its employees in developing and carrying out measures designed to ensure a safe and healthy working environment

1.2. formulate, review and disseminate to employees of The Village Baxter and, where appropriate, to residents and relatives, the standards, rules and procedures relating to WHS

2. TO MEET THESE OBJECTIVES, THE COMMITTEE SHALL:

2.1. hold scheduled meetings, with prepared, circulated agendas

2.2. assist in developing, monitoring and reviewing WHS procedures to implement a continuous improvement approach to health and safety which will integrate WHS into the overall management system

2.3. assist in developing systems to ensure consultation occurs on all issues relating to WHS

2.4. consider any proposed changes to the workplace, work organisation, or work practices that may affect the WHS of employees

2.5. review accident reports and follow-up actions. Make recommendations as appropriate

2.6. examine WHS inspection and audit reports and recommend actions where necessary

2.7. discuss reports and information supplied by on-site personnel, WHS inspectors, consultants and other external sources, and recommend actions where necessary

2.8. consider and discuss reports by employee representatives and management and any outstanding WHS issues. Recommend actions where appropriate.

2.9. facilitate the development and conduct of training programs in WHS and monitor effectiveness of the training programs

2.10. ensure WHS standards are considered when new equipment is purchased and new procedures developed

2.11. contribute to development of the annual WHS improvement plan. Monitor achievement of the annual plan

WORKPLACE HEALTH & SAFETY

Policy Number:	723
Title:	Workplace Health and Safety Budget
Owner:	Executive Manager
Review Date: January 2018	**Policy Risk Rating:** Low

1. PURPOSE

To articulate the financial resourcing of the WHS Committee and safety initiatives recommended by the Committee.

2. PROCEDURE

2.1. It is recognised that membership of the WHS Committee is a voluntary commitment by individuals to the welfare of colleagues, residents and visitors of the Village. Attendance at WHS Committee meetings is often during non-shift times of members. Therefore any member attending WHS Committee meetings in their own time will be entitled to be paid for their attendance. Members should note their timesheets accordingly and any dispute referred to the convenor of the WHS Committee.

2.2. Much WHS activity is incorporated into standard operating budgets (eg maintenance, staff training). However there may be occasions when the WHS Committee believe that a special initiative is required to address specific safety concerns / issues. In such cases the WHS Committee will prepare a brief of the issues and recommended initiative, including costs, to be submitted to the Village Executive for acceptance / non-acceptance. Where accepted funding will be allocated by Village Management.

3. RELATED POLICIES AND DOCUMENTS

- Nil

WORKPLACE HEALTH & SAFETY

Policy Number:	731
Title:	Workplace Health and Safety Planning and Review
Owner:	Executive Manager
Review Date: January 2018	**Policy Risk Rating:** Low

1. PURPOSE

To successfully run any business, managers must plan, organise, lead and manage employees and the environment to ensure that organisational goals are met in a timely and cost-effective manner.

For financial survival, to meet required standards, and to minimise injuries, WHS must be integrated into both the strategic planning and day-to-day operation of The Village. Documented review and action plans also assist in ensuring managers meet their personal legal requirements in WHS.

2. DOCUMENT CONTROL

2.1. Authorisation and issue of WHS procedures shall be controlled to ensure only current documents are in circulation. All WHS documents shall be dated, and superseded documents shall be withdrawn. The Chair WHS Committee shall be responsible to ensure agreed changes to policies are made.

3. REVIEW

3.1. The WHS committee shall conduct an annual review of the WHS Plan.

3.2. This review shall take into account:

- achievement of the performance measures over the previous year
- collated and analysed incident and injury reports
- reports on workplace inspections including housekeeping and fire equipment
- WHS committee minutes over the last 12 months
- management and external audits
- up-to-date information on hazards and WHS management
- reports from external sources, such as WHS inspectors
- any relevant information.

3.3. The General Manager shall ensure that regular audits of the WHS program are undertaken and documented. The results of the audits shall be reviewed as part of the planning process.

3.4. Staff appraisals shall include consideration of WHS responsibilities.

4. WORKPLACE HEALTH AND SAFETY ANNUAL IMPROVEMENT PLAN

4.1. Long-term and 12-month WHS plans, including strategies, responsibilities, time frames and priorities, shall be drawn up.

4.2. The plans shall take note of the performance measures outlined in Attachment 1. These performance measures take into account the difficulty of obtaining a valid and reliable measurement of WHS performance.

5. RELATED POLICIES AND DOCUMENTS

- Attachment 1   WHS Performance Measures

Policy Number:	731.1
Title:	Attachment 1 – WHS Performance Measures
Owner:	Executive Manager
Review Date: January 2018	**Policy Risk Rating:** Low

The WHS Committee has agreed that the following performance measures should apply for the calendar year:

1. 10% reduction in Manual Handling injuries from the quantum of the previous year's injuries

2. 10% reduction in incidences of Resident Aggression on the quantum of the previous year's incidents

3. Achieve staff awareness of emergency procedures of 90%. Assessment through audit of training responses.

4. Compliance with Aged Care Standards

These performance measures are to be assessed at the end of each calendar year. At that time performance measures will be reviewed and established for the following year.

WORKPLACE HEALTH & SAFETY

Policy Number:	741
Title:	Employee Consultation, Communication and Issue Resolution
Owner:	Executive Manager
Review Date: January 2018	**Policy Risk Rating:** Low

1. PURPOSE

1.1. Open and effective communication is vital for good industrial relations, quality management and effective management of WHS

1.2. All employees have a role in achieving a safe and healthy working environment. Every employee can directly influence WHS by identifying hazards and contributing to discussion on WHS.

1.3. This document details the consultation and communication required to enable The Village Baxter to meet organisational and legal requirements on consultation and ensure that all employees have a genuine opportunity to effectively participate in decision making on matters with a potential to affect their WHS.

2. EMPLOYEE REPRESENTATIVE

2.1. WHS representatives shall be elected by their peers in their work group. The employee shall then represent the work group from which they were elected

3. ROUTINE COMMUNICATION

3.1. WHS representatives should be consulted and participate in incident investigations, risk assessments and the development of control measures.

3.2. Employees and their WHS representatives should be consulted on all proposed changes to the workplace, equipment, policies and procedures that may affect their WHS.

3.3. Information on hazards, WHS activities, and achievements, shall be disseminated to employees in a systematic and readily understood manner.

3.4. To reinforce the integration of WHS into daily work, WHS shall be a standard agenda item at employee, supervisors and other Village (non-resident) committee meetings. Minutes of OH&S Committee meetings shall be kept and posted on staff notice boards.

4. WH&S COMMITTEE

4.1. A WH&S committee shall be a permanent functioning advisory committee at The Village Baxter.

4.2. The committee shall have representation from both management and employees. Both personal care and non-nursing employees shall be represented on the committee.

4.3. Employee representatives shall be elected by employees; management representatives shall be appointed by management. One management representative shall be the Convener - WH&S Committee.

4.4. Depending on the status of the program and tasks at hand, committee meetings shall be held at least two-monthly at a mutually agreeable time.

4.5. Meetings shall be conducted according to standard business practice, including the circulation of an agenda prior to the meeting, the following of the prepared agenda and recording and distribution of minutes.

5. WH&S ISSUES

5.1. WHS is primarily a management responsibility. A senior member of management shall be nominated to represent management in the resolution of WHS issues.

5.2. Employees are encouraged to raise WHS issues promptly using the agreed procedure (refer to Attachment 3 WHS Issue Resolution Procedure). A WHS issue may involve a hazard, a work practice or a procedure.

5.3. WHS issues shall be resolved as promptly as possible in accordance with the agreed procedure. Refer to Attachment 3.

6. RELATED POLICIES AND DOCUMENTS

- Attachment 1 WHS Issue Resolution Procedure

WORKPLACE HEALTH & SAFETY

Policy Number:	741.1
Title:	Attachment 1 - Employee Consultation Communication and Issue Resolution - Process Map
Owner:	Executive Manager
Review Date:	January 2014 **Policy Risk Rating:** Low

Management

Representative

Issue / Hazard Identified

Complete Hazard Alert

Report to Immediate Supervisor

Report to Employee Rep. / Committee Rep.

Issue Resolved?
- No
- Yes

Report to Department Head

Document Resolution

Issue Resolved? — Yes

No

Communicate resolution to all involved employees

Take to WHS Committee

Resolution tabled at WHS Committee

Issue Resolved? — Yes

No

End of Issue

Call in Inspector

Issue Resolved — Yes

Policy Number:	742

WORKPLACE HEALTH & SAFETY

Title: Communication, Language and Cultural Issues	
Owner: Executive Manager	
Review Date: January 2018	**Policy Risk Rating:** Low

1. PURPOSE

Good WHS and injury prevention requires effective communication among employees, management, and residents in their daily activities. The needs of Non-English Speaking Background employees and residents must be considered. Information, instruction and training should take account of any language differences to ensure all employees have an opportunity to actively participate in all WHS matters and activities.

2. PROCEDURE

2.1. Language profiles should be developed for both employees and residents of NES Background. These profiles shall identify principal spoken languages, and other languages.

2.2. A hazard identification process should be undertaken that identifies the activities and tasks where a language communication difficulty may contribute to the risk of injury.

2.3. An action plan should be developed to address the hazards identified.

2.4. Employees with bilingual and bi-cultural skills should be encouraged to be actively involved in developing communication strategies and in hazard identification.

3. RELATED POLICIES AND DOCUMENTS

- Nil

Policy Number:	751
Title:	Hazard and Incident Reporting and Investigation
Owner:	Executive Manager
Review Date: January 2018	**Policy Risk Rating:** Low

1. PURPOSE

1.1. An 'incident' is an event that has caused or has the potential to cause injury, illness or damage.

1.2. To achieve a safe and healthy working environment, hazards must be identified and either eliminated or reduced as far as practicable. All incidents must be investigated to identify the cause(s) and preventive actions. This requires that hazards and incidents are reported. Legislation also creates specific requirements for the reporting of certain incidents.

1.3. This procedure details the reporting requirements to meet both organisational and legal requirements.

2. HAZARD REPORTING

2.1. Where possible, employees should take immediate action to remove or minimise any hazards. They should advise their supervisor, who will be responsible for taking appropriate action.

2.2. Employees shall report hazards on Form 5.1.1, Hazard Alert. The report shall be promptly investigated and actioned, according to Attachment 1, Hazard and Incident Reporting System, with a response to the initiating employee. All Hazard Alerts and their resolution should be reported and reviewed at the next meeting of the WHS Committee.

3. INCIDENT AND INJURY REPORTING

3.1. Where there is an incident (an event that has caused an injury or had the potential to cause injury or damage) involving employees, the incident shall be reported on Form 5.1.2, Workplace Injury and Disease Record.

3.2. The Accident / Injury / Near Miss Report shall be readily available to all employees and should be used whenever first aid is given or apparent work-related pain or ill-health is noticed.

3.3. If an incident results in death or serious injury (refer Doc 1.2, Definitions) to an employee then the appropriate government department shall be immediately informed. The HR Manager is to be immediately informed and will ensure that the matter is reported to Worksafe Victoria and the site shall be preserved pending investigation by a Worksafe Investigator.

3.4. Where an injury occurs also refer to Doc 9.1 Claims Administration, Rehabilitation and Return to Work.

4. INCIDENT INVESTIGATION

4.1. All incidents shall be investigated by the department head and, when appropriate, an WHS employee representative to identify actions for future prevention. The outcome of the investigation shall be to identify cause(s) and not allocate blame. The outcomes of the incident investigation will be recorded on the Workplace Injury and Disease Record.

4.2. The outcomes of all incident investigations shall be reported to the WHS committee. The committee shall review and, if necessary, revise recommended actions and effectiveness of hazard control.

5. ANALYSIS OF DATA

5.1. Workplace Injury and Disease Records shall be analysed and any trends identified at least annually. The WHS committee shall review the analysis and recommend action as appropriate.

6. RELATED POLICIES AND DOCUMENTS

- Attachment 1 – Hazard and Incident Reporting System
- Form 5.1.1 – Hazard Alert
- Form 5.1.2 – Accident / Injury / Near Miss Report Form

WORKPLACE HEALTH & SAFETY

Policy Number:	751.1
Title:	Attachment 1 – Hazard and Incident Reporting System
Owner:	Executive Manager
Review Date:	January 2018 **Policy Risk Rating:** Low

Hazard Identification

Question	Responsibility	Action	Indicators	Outcome Actions
Do we have a problem?	Management	Collect and review information	Review: • Workers Comp Claims • Incident Reports • Absenteeism • Sick Leave • Employee Complaints • Employee Turnover • Morale and job satisfaction • Resident aggression	Advise management of outcomes. Advise employee of proposed actions and seek support

Risk Assessment

Question	Responsibility	Action	Indicators	Outcome Actions
What are the causes of the problem?	Departmental Heads	Consult with employees through informal discussions and / or formal questionnaire	Areas for Investigation: **Work Design** • Level of responsibility • Supervision • Job control • Job content • Workload and Pace • Work scheduling • Rosters • Employee skills match task requirements • perceived support from management and peers • meal and other breaks **Way people are managed** • supportive • participative • clear definition of roles • feedback on work performance • opportunity for development • management of interpersonal conflict • training provided **Nature of work** • Health and safety • Dealing with death and dying, dementia and aggression **Employee interactions** • Policies in place for sexual harassment	Collate results Provide feedback to management and employees

			• Policies on administration and employment are documented, administered, and known to all.	
Risk Control				
Question	**Responsibility**	**Action**	**Indicators**	**Outcome Actions**
Have we got it right? What are the solutions?	Departmental Head	Rules for discussion established to promote a positive environment	• Verify major cause of stress. • Develop action plans with time frames to address issues.	Provide feedback to management and employees on outcomes and action plans.
Monitor and Review				
Question	**Responsibility**	**Action**	**Indicators**	**Outcome Actions**
Did we get it right?	WHS Committee	Review current situation against action plans and original indicators of problem.	• Refer earlier indicators and potential sources or problems	Provide feedback to employees including any further actions.

Modified from **'*Quality of working life strategy'*, Comcare Australia, 1993

Policy Number:	752
Title:	Maintenance of Equipment
Owner:	Executive Manager
Review Date: January 2018	**Policy Risk Rating:** Low

1. PURPOSE

Safe and well-maintained equipment is essential to the safety of employees and residents.

This procedure details the requirements for safe and well-maintained equipment as well as compliance with health and safety legislation.

2. PROCEDURE

2.1. Routine Maintenance

2.1.1. All equipment requiring regular inspection and/or maintenance shall be listed in Form 5.2.1, Equipment Maintenance Register.

2.1.2. A schedule of inspections and/or maintenance, should be drawn up taking into account the frequency stated in the Equipment Maintenance Register.

2.1.3. Maintenance, repairs and alterations shall be carried out in a safe manner by appropriately competent persons. The competent person shall be aware of, and implement, electrical isolation and lockout procedures as appropriate.

2.1.4. Equipment must be 'signed off' as safe for use before it is returned to service following maintenance.

2.2. Maintenance in Response to a Hazard

2.2.1. Where maintenance is required for safety reasons outside the programmed schedule, a Hazard Alert (Form 5.1.1) shall be completed and a maintenance tag attached to the item.

2.2.2. Where an equipment fault poses an immediate risk to safety it shall be immediately removed from service and tagged 'Out of Service'. A Hazard Alert shall be written and action taken as appropriate.

3. RELATED POLICIES AND DOCUMENTS

- Form 5.2.1 - Equipment Maintenance Register

Policy Number: 753	
Title: WHS Housekeeping	
Owner: Executive Manager	
Review Date: January 2018	**Policy Risk Rating:** Low

1. PURPOSE

High standards of WH&S housekeeping, including a general standard of cleanliness and tidiness, are essential to a healthy and safe working environment. This policy articulates the procedures for ensuing that such standards are maintained.

2. POLICY

The housekeeping standards within the Village Baxter premises are monitored in a manner that supports high levels of cleanliness and tidiness in accordance with current WH&S practices.

3. PROCEDURE

3.1. At all times, employees should be aware of the work area and correct, or arrange for correction, of any housekeeping hazards. (The Hazard Alert Form 5.1.1 should be used for any hazards that cannot be readily corrected.)

3.2. The ESIS system will be used to provide a housekeeping checklist that meets the requirement of each work area.

3.3. Regular housekeeping inspections should be conducted in each communal building according to the ESIS schedule.

3.4. The emergency equipment shall be checked according to the ESIS System as part of the WHS housekeeping inspections. The maintenance department is responsible to ensure that appropriately trained staff / contractors are employed for this purpose.

3.5. The 'inspector' shall meet with the Department Head and Infrastructure to review the results of checklists, (ESIS system), consider the best course of action, and delegate a responsible person to take action should any issues be discovered during the inspection.

3.6. The WHS committee shall oversee compliance with the procedure to ensure inspections are conducted and review meetings held. The General Services Manager will report to the WH&S committee to confirm that inspections have been performed and any actions taken on a half yearly basis.

4. RELATED POLICIES AND DOCUMENTS

- ESIS System
- FORM 753.1.1

WORKPLACE HEALTH & SAFETY

Policy Number:	754
Title:	Purchasing Hiring and Leasing
Owner:	Executive Manager
Review Date: January 2018	**Policy Risk Rating:** Low

1. PURPOSE

Reduction of hazards at their source, not buying them into the Village, is a most cost effective way of ensuring a healthy and safe working environment. WHS considerations should be included in the selection criteria when purchasing, hiring or leasing new equipment or purchasing substances.

2. PROCEDURE

2.1. The potential impact on WHS shall be considered prior to the purchase, hire or lease of any equipment or substances. On-site trialling of equipment and consultation with employees using it is recommended to fully assess the WHS impact of equipment.

2.2. WHS requirements, based on appropriate legislation and standards, shall be considered when purchasing all goods.

2.3. Provision of clear instructions and, where appropriate, training for safe use is an essential selection criteria for purchasing, hiring or leasing of equipment or for purchasing of substances

2.4. New equipment and substances shall not be used until information and training has been provided on its safe use where appropriate.

2.5. Where appropriate a Trial & Evaluation Form is to be completed prior to purchase.

3. RELATED POLICIES AND DOCUMENTS

- Attachment 1 - Product Trial & Evaluation Form

WORKPLACE HEALTH & SAFETY

Policy Number:	754.1
Title:	Attachment 1 – Product Trial Evaluation Form
Owner:	Executive Manager
Review Date:	January 2018 **Policy Risk Rating:** Low

This form should be completed for equipment purchases where pre-purchase trial is possible and attached to the Village Capital Equipment Purchase Submission Form.					
Product Name					
Department					
Trial Period	From:		To:		
Name/s of staff evaluating product (list all)					

Please rate out of 5 the following:	*(5 being the highest or most positive rating)*				
Does the job it was purchased for?	1	2	3	4	5
Ease of use	1	2	3	4	5
Storage	1	2	3	4	5
Durability (strength)	1	2	3	4	5
Safe to use for staff	1	2	3	4	5
Safe to use for residents / clients	1	2	3	4	5
Instructions easy to follow	1	2	3	4	5

Positive Comments			
Negative Comments			
What alternatives have been considered?			
Purchase Recommended?	☐Yes	☐No	
Name		**Date**	
Signature			

WORKPLACE HEALTH & SAFETY

Policy Number:	756
Title:	Contractors and Temporary Personnel
Owner:	Executive Manager
Review Date: January 2018	**Policy Risk Rating:** Low

1. **PURPOSE**

   1.1. Under common law and WHS legislation, an employer has the same responsibilities for contractors and temporary/agency personnel as they have for permanent employees in relation to matters over which the employer has control. This responsibility cannot be removed or minimised by any contractual agreement.

   1.2. Due to possible lack of familiarity with the work environment and work practices, contractors and temporary personnel may have a higher risk of injury than regular employees. They may also influence the safety of others.

   1.3. This procedure sets out the organisational procedures to enable The Village Baxter to meet these responsibilities in respect of contractors engaged by the Company.

2. **PROCEDURE**

   2.1. All contract work engaged by Village Staff shall be conducted by appropriately qualified and registered people.

   2.2. Tradespeople

      2.2.1. The Village Baxter must ensure safe access and egress, and to the extent over which they have control, a safe work area for tradespeople. Any hazards should be pointed out before the tradespeople begin work.

      2.2.2. Where required for the safety of residents, employees and tradespeople, arrangements should be made to exclude residents and employees from the tradespeople's work area.

      2.2.3. Confirmation should be sought from the tradesperson that the Village is advised of any unavoidable hazards created by the work, thus enabling additional safety precautions to be taken as required.

   2.3. Regular Non-Nursing Contractors

      2.3.1. Contractors should meet legislative and community standards on equipment, work practices and personal protection.

      2.3.2. The contractor shall be responsible for appropriate safety and maintenance of his equipment.

      2.3.3. Contractors shall be required to comply with relevant aspects of the WHS program such as reporting of hazards and injuries.

2.4. Nursing Agency Personnel

    2.4.1.   While the employment, selection and usually payment of these personnel is handled by the agency, The Village Baxter has a responsibility to both the employees and residents to ensure that the agency employees are able to perform their work safely.

    2.4.2.   On arrival of the agency personnel, adequate time should be allowed for orientation and handover.

    2.4.3.   The "Agency Staff" checklist is to be completed and signed.

3. RELATED POLICIES AND DOCUMENTS

- Nil

WORKPLACE HEALTH & SAFETY

Policy Number: 757	
Title: Visitors and Volunteers	
Owner: Executive Manager	
Review Date: January 2018	**Policy Risk Rating:** Low

1. PURPOSE

1.1. The Village Baxter has both a legislative and common law duty of care to provide for the safety of people who enter the Village buildings or grounds. There is also a requirement to ensure that, within the areas over which the management has control that visitors and volunteers do not impact adversely on the safety of employees.

1.2. The management of The Village Baxter owes the same duty of care to volunteers as to paid employees.

2. PROCEDURE

2.1. The nature of an aged care facility is such that many visitors will be frail and elderly. There will also be children. Therefore all practicable steps must be taken to ensure safe access and egress, including maintaining conditions of paths, steps, and landings, as well as ensuring adequate lighting.

2.2. Work practices should avoid introducing temporary hazards affecting access and egress. Equipment should not be left out that may be hazardous to children.

2.3. The interior of the Village Baxter is meant to be 'home-like'. However, it is also a workplace and so may have hazards not identified by visitors or volunteers. Any obvious hazards to visitors should be identified and the hazard should be removed, or minimised, or access to the area restricted.

2.4. Tasks allocated to volunteers should take account of the skills and training of the individual volunteer.

3. RELATED POLICIES AND DOCUMENTS

- Nil

Policy Number:	758
Title:	WorkSafe Inspections
Owner:	Executive Manager
Review Date: January 2018	**Policy Risk Rating:** Low

1. PURPOSE

To identify the procedures to be followed during site visits in Aged Care Facilities by WorkSafe Inspectors.

2. POLICY

All staff will cooperate with the requests of visiting WorkSafe Inspectors, whilst making every endeavour to preserve the privacy and dignity of Village residents and clients. The following principles will be followed during WorkSafe inspections.

3. PRINCIPLES FOR WORKSAFE VICTORIA INSPECTORS WHEN CONDUCTING INSPECTIONS OF AGED CARE WORKPLACES

3.1. The following principles have been developed and agreed to, by representatives from the following stakeholder organisations:

3.1.1. Aged Care & Community Victoria (ACCV), now Leading Aged Services Australia (LASA).

3.1.2. Department of Health & Ageing

3.1.3. The Aged Care Standards & Accreditation Agency Ltd

3.1.4. WorkSafe Victoria

4. PROCEDURE

4.1. Aged Care Providers will produce all documents relevant to the WHS inspection or investigation in accordance with Inspectors' powers under Section 99 or 100 of the WHS Act 2004.

4.2. Aged Care Providers will fully cooperate with WorkSafe Inspectors in the performance of their duties in accordance with the WHS Act 2004.

4.3. WorkSafe Inspectors will explain the purpose of their visit and the reason for Aged Care providers need to produce relevant documents and materials and demonstrate safe practices.

4.4. WorkSafe Inspectors will only require Aged Care providers to produce documents and materials relevant to the WHS inspection or investigation and not unreasonably request documents or material that compromises the privacy, dignity or confidentiality or residents.

4.5. WorkSafe Inspectors will accept de-identified documents and material produced by Aged Care providers (e.g. Nursing Care plans) if there are concerns about protecting the privacy of individual residents, in accordance with the Aged Care Act and Privacy Principles.

4.6. All documents inspected and/or obtained by WorkSafe Inspectors are protected by application of privacy laws and principles.

4.7. Any manual handling demonstrations or other WHS issues involving residents should be performed in a way that upholds the dignity and privacy of the resident. The resident will give expressed permission to be involved in any WHS demonstration of use of lifting equipment or other work practices.

4.8. The resident should be capable and competent to give expressed permission of involvement in any WHS inspection, investigation or demonstration and the resident's safety, dignity and privacy should not be compromised by their involvement.

4.9. Where requests are made by WorkSafe Inspectors for work practices to be demonstrated, it will be acceptable for these to occur, using staff instead of residents, if this is not possible otherwise.

5. RELATED POLICIES AND DOCUMENTS

- Nil

Policy Number: 761	
Title: Manual Handling	
Owner: Executive Manager	
Review Date: January 2018	**Policy Risk Rating:** Low

1. PURPOSE

Manual handling, especially the handling of residents, is the major cause of injury in aged care facilities. Manual handling regulations require a hazard identification, risk assessment and control approach. This procedure provides guidance for strategies to reduce the risk of injury and to meet legislative requirements.

2. DEFINITION:

Manual Handling is any activity involving the use of muscular force to push, pull, carry, or restrain any object, person or animal.

3. PROCEDURE

3.1. All Manual Handling

3.1.1. Manual handling tasks within The Village Baxter shall be systematically identified, assessed, and control actions implemented to reduce the risk of injury as far as practicable.

3.1.2. All work practices and equipment used should be reviewed regularly and new assessments performed as needs identified to ensure manual handling is reduced as far as practicable.

3.1.3. A list has been compiled of regular manual handling tasks with a significant risk of injury to either employees or residents (risk identification). This list is available from the WHS Convenor, or from the intranet on H:/public/manualhandling.

3.1.4. Each task is assessed and examined for ways to eliminate or reduce the handling, or for other ways to reduce the risk (risk assessment and control).

3.1.5. WHS Committee Members are consulted when developing and assessing the list of tasks.

3.2. Resident Movement

3.2.1. The Village Baxter's policy is, while encouraging resident mobility, independence and dignity, to reduce manual handling and manual lifting to a minimum.

3.2.2. Dressing and undressing residents is a frequently performed manual handling task.

3.2.3.   Aggressive behaviour by people with dementia is a frequent cause of manual handling injury in aged care facilities. Procedures detailed in WHS Policy 769, should be followed to reduce the risk of injury due to aggressive behaviour.

3.2.4.   In communal areas staff should consider potential hazards and ensure furniture, equipment and layout of the facility is arranged to minimise manual handling by employees as far as practicable.

3.2.5.   Residents should be encouraged to arrange furniture and other belongings to minimise manual handling requirements.

3.2.6.   Shower chairs, commodes and other wheeled equipment for moving residents should be maintained in good working condition.

4. RELATED POLICIES AND DOCUMENTS

- Nil

WORKPLACE HEALTH & SAFETY

Policy Number:	761.0
Title:	Security
Owner:	Executive Manager
Review Date: January 2018	**Policy Risk Rating:** Low

1. PURPOSE

1.1. This procedure is designed to ensure security for employees, including prevention of illegal entry, and personal threat, while considering the need for freedom of movement for residents and the need to restrict egress for wandering residents.

1.2. WHS issues related to security must be managed by identifying hazards related to security, and assessing and controlling the risk.

2. PROCEDURE

2.1. This procedure is designed to ensure security for employees, including prevention of illegal entry, and personal threat, while considering the need for freedom of movement for residents and the need to restrict egress for wandering residents.

2.2. WHS issues related to security must be managed by identifying hazards related to security, and assessing and controlling the risk.

3. ACCESS / EGRESS / ILLEGAL ENTRY

3.1. The Village Baxter aims to restrict public access to its residential care facilities to a minimum, especially at night.

3.2. Employees should only admit people after 9.00 pm upon confirmation of identity.

3.3. Security lighting should be strategically located around the exterior of the facility. This lighting should include movement sensor lighting in areas of low use or where it is desirable to turn off lights during certain hours.

3.4. Public area external doors should be secured after dark and checked by evening and night duty employees.

3.5. The design of the garden and surrounds should reduce potential hiding spots for intruders. Strategies to ensure security and safety of wandering residents should not prevent escape in an emergency.

4. RESIDENT POSSESSIONS

4.1. Some residents become confused as to the location of their possessions with the result that they may blame employees for 'stealing' their possessions. Secure storage should be available for residents' valuables and residents and their families should be discouraged from keeping valuables in units to eliminate or reduce such claims and facilitate appropriate response when they do occur.

5. EMPLOYEE POSSESSIONS

5.1. Lockable cupboards shall be provided for employees to store personal belongings during work hours.

6. THREAT / ASSAULT

6.1. There shall be a readily available method of raising an alarm in an emergency.

6.2. Emergency numbers shall be clearly posted and a procedure documented and known for dealing with a security emergency.

6.3. Where there are sole workers, additional measures should be considered to ensure personal safety.

6.4. Access to car parking during dark hours and the potential for threat to employees entering or leaving the facilities should be assessed and action taken as appropriate.

7. RELATED POLICIES AND DOCUMENTS

- Nil

Policy Number:	761.1
Title:	Infection Control
Owner:	Executive Manager
Review Date: January 2018	**Policy Risk Rating:** Low

1. PURPOSE

1.1. A safe and healthy working environment includes the control of risk from exposure to infection and infectious diseases. The nature of an aged care facility is such that an infectious disease can spread quickly to affect many residents, employees and visitors.

1.2. This procedure establishes systems to minimise the risk of transmission of infectious diseases to other persons.

2. SCOPE

2.1. The procedure covers the hazard of infection to employees, residents and visitors. The procedure should be read in conjunction with WHS Policy 7613 Personal Protective Clothing and Equipment.

2.2. Control measures for *legionella* are covered under WHS Policy 766, Environment. Many other activities within the aged care facility, for example selection purchasing and use of cleaning chemicals, manual handling, aggression and first aid, impact on infection control. The relevant procedures should be considered.

3. RESPONSIBILITY

3.1. **Senior Manager/Responsible Officer:** to ensure commitment and appropriate budget allocations for infection control are considered at design and building upgrade, and adequate supply of consumables for infection control. They shall ensure there is access to current infection control knowledge and information.

3.2. **Director of Nursing:** to ensure appropriate infection control procedures are established in consultation with employee representatives and to ensure compliance with procedures.

3.3. **Employee Representative:** to be involved in the hazard identification and risk assessment process, and the development of infection control procedures.

3.4. **Employees:** having been provided with appropriate training, to comply with the documented procedures in every aspect of their work.

4. **PROCEDURES**

   4.1. An infectious diseases hazard identification and risk assessment shall be carried out across all areas of The Aged Care Facility. The areas considered shall include, but not be limited to:

   - environment/housekeeping
   - food handling and storage
   - nursing care
   - infectious and general waste disposal.

   4.2. Infection control issues shall be considered at design, renovation or modification stages of building.

   4.3. Infection control issues shall be considered in developing management systems and in organisation of work.

   4.4. Appropriate infection control procedures shall be developed to cover the following areas:

   - laundry
   - environment/housekeeping
   - food handling
   - food storage
   - nursing and attendant care
   - blood and body substance precautions
   - disposal of sharps
   - infectious and general waste disposal.

5. **TRAINING**

   5.1. Care Manager or nominated staff member: Shall attend training or take other steps to ensure currency in infection control knowledge relative to aged care.

   5.2. All Employees shall have access to infection control training covering:

   - routes of infection
   - general effects of infectious agents
   - general and infectious waste disposal
   - infection control procedures relevant to their particular work.

5.3. Role-specific training should be provided for employees working in the following areas:

- nursing and attendant care

- housekeeping/laundry

- food handling.

6.   RELATED POLICIES AND DOCUMENTS

- Infection Control Policies 200 - 299

Policy Number:	761.2
Title:	Smoking
Owner:	Executive Manager
Review Date: January 2018	**Policy Risk Rating:** Low

1. PURPOSE

WHS legislation prohibits smoking in any "enclosed" workspace, whether indoor or outdoor and prohibits the employer from actions that facilitate smoking. This policy articulates the Village response to this legislation.

2. POLICY

Village Baxter is a "Smoke- Free" environment. The Smoking of cigarettes by staff, volunteers, contractors and visitors is prohibited on Village Baxter property, except for specific designated "Smoking areas". Any person smoking on Village Baxter property (other than in a designated area) may be subject to Village Baxter disciplinary procedures, prosecution or both.

3. PROCEDURE

3.1. Except for specially declared "Smoking Areas", all areas of the Village Baxter are designated non-smoking areas.

3.2. Any staff member smoking on Village Baxter property outside the designated smoking areas, will be committing an offence and subject to the Village Baxter disciplinary procedures under the Village policies and Collective Agreement.

3.3. It is the responsibility of staff using the designated smoking areas to ensure the area is kept neat and tidy at all times.

3.4. The Village will continue to support staff who wish to quit smoking under the Village Baxter Staff Health Assistance (Smoking) Program (Policy No:461)

3.5. The private sleeping or living quarters of a resident are exempt from the legislation insofar as:

- The resident has the right to smoke and wishes to do so.

- The room becomes a work place when staff enter the room and the resident must cease smoking for the duration of the staff visit.

- This exemption does not apply to common areas of Village facilities. (Lounges, dining rooms, etc.)

3.6. This policy also applies to Volunteers, contractors, and visitors to the Village.

3.7. Employee handbooks and Resident induction kits should refer to the Village Smoking Policy.

4. RELATED POLICIES AND DOCUMENTS - Nil

Policy Number:	761.3	
Title:	Personal Protective Clothing and Equipment (PPE)	
Owner:	Executive Manager	
Review Date:	January 2018	Policy Risk Rating: Low

1. PURPOSE

1.1. Personal protective clothing and equipment (PPCE) selected carefully and used and maintained properly are an important part of an WHS program. However, they are only one aspect of safety and should be considered as part of an appropriate safety plan. PPCE do not replace the requirement to ensure all possible measures have been taken to eliminate or reduce hazards.

1.2. This procedure sets the guidelines for use of protective clothing and equipment to achieve a safe and healthy working environment in The Village Baxter.

2. PROCEDURE

2.1. The requirements for PPCE should be based on the outcomes of a risk assessment.

2.2. PPCE requirements should be included in documented work procedures.

2.3. The Village Baxter should provide personnel issue of all protective equipment used in this procedure with the exception of standard clothing/uniforms.

2.4. Employee representatives and the employees using specific PPCE shall be consulted during the selection and purchase of PPCE.

2.5. Where PPCE is re-used, as with aprons and rubber boots, suitable storage areas shall be provided.

2.6. Re-useable PPCE should be checked, cleaned and maintained as appropriate.

2.7. Clothing:

2.7.1. Clothing must be suitable for the purpose, non-restrictive at shoulders, back, hips and thighs. Divided skirts or loose trousers worn with loose fitting shirts are recommended for female employees.

2.7.2. Prospective employees should be advised of the clothing requirements.

2.7.3. Suitable aprons/gowns made of rubber/or PVC should be worn when performing dirty jobs or where there is a risk of contact with body substances. Aprons/gowns should be changed as soon as they become soiled.

2.8. Footwear:

    2.8.1. Types of footwear affect the risk of slips and falls and can also contribute to back pain and fatigue. Shoes should be flat-heeled, closed-in and supportive. Soles should provide good grip.

    2.8.2. Rubber boots or overshoes should be worn when showering residents. These boots or overshoes shall be personal issue.

    2.8.3. Safety footwear should be worn when there is a risk of foot injuries from activities such as mowing lawns and undertaking maintenance work.

2.9. Gloves

    2.9.1. Appropriate gloves shall be worn when handling/or potentially contacting body substances. The gloves shall be changed before starting a new task. Care must still be taken with hand washing when wearing gloves.

    2.9.2. Appropriate gloves shall be worn when using chemicals.

    2.9.3. Employees should wear appropriate gloves when performing tasks with a risk of hand injury or dermatitis, for example hand washing dishes, cleaning or gardening.

    2.9.4. Oven mitts or gauntlets shall be used for handling hot dishes in the kitchen. Tea towels should never be used as oven or pot mitts.

2.10. Eye and Respiratory Protection

    2.10.1. Appropriate eye protection shall be worn when there is a risk of eye injury, for example when performing any task that may cause flying particles or splashes of body fluids, or when working around foliage.

    2.10.2. The Village Baxter may use some chemicals, which will require the use of a respirator.

3. RELATED POLICIES AND DOCUMENTS

- Policy 409 - Employee Presentation and Dress Code

WORKPLACE HEALTH & SAFETY

Policy Number: 762	
Title: Chemicals	
Owner: Executive Manager	
Review Date: January 2018	**Policy Risk Rating:** Low

1. PURPOSE

To ensure that all chemicals used by the Village Baxter are used and stored in a safe manner, according to current regulation and manufacturers recommendations.

2. PROCEDURE

2.1. Safety Data Sheets (MDS) are available in all areas storing chemicals to identify hazards and safe usage.

2.2. All out of date and/or no longer used chemicals shall be disposed of using approved methods of disposal.

2.3. Appropriate risk control strategies for hazardous chemicals shall be implemented in line with SDS, product labels and other sources of reliable information.

2.4. Chemicals kept on the premises should be labelled according to the SDS. Labels shall not be altered or defaced.

2.5. Training in work procedures, including the selection, use, storage and maintenance of Personal Protective Clothing and Equipment shall be provided to employees as appropriate.

3. New Chemicals and Chemicals Used by Contractors

3.1. The purchasing procedure, WHS Policy 754 should be complied with to ensure that only chemicals which have been assessed and approved for use are brought on site.

4. RELATED POLICIES AND DOCUMENTS

- Nil

Policy Number: 763	
Title: Equipment	
Owner: Executive Manager	
Review Date: January 2018	**Policy Risk Rating:** Low

1. PURPOSE

Careful selection, maintenance and use of plant, machinery, hand tools and equipment is fundamental to the provision of a safe working and living environment.

2. PROCEDURE

2.1. Current Equipment

2.1.1.   The hazards associated with the design and use of all current equipment should be identified and assessed with the aim of eliminating or minimising risk. In assessing risk exposure, employees, maintenance employees, residents and visitors shall all be considered.

2.1.2.   All equipment assessed as requiring ongoing routine preventative maintenance shall be entered in the ESIS System.

2.1.3.   Detailed records including hazard assessment, risk control plans and maintenance records shall be kept on any equipment requiring Government registration or notification, e.g. Lifts.

2.1.4.   The need for documented operating procedures shall be assessed and these prepared as required.

2.1.5.   Training in these procedures should be provided to appropriate employees.

3. RELATED POLICIES AND DOCUMENTS

- Nil

WORKPLACE HEALTH & SAFETY

Policy Number:	764
Title:	Electricity
Owner:	Executive Manager
Review Date: January 2018	**Policy Risk Rating:** Low

1. PURPOSE

Electricity is an essential service in all working and living environments. However, electricity is a lethal hazard. Improper use and/or poorly maintained equipment can result in fire and/or injury or death.

2. PROCEDURE

2.1.   Residual Current Devices (RCDs), also called safety switches, should be used or installed at the main electrical switchboard or in individual power points where appropriate. These RCDs should be tested and tests documented as specified in AS 3760, 'In-Service Inspection and Testing of Electrical Equipment'.

2.2.   Use of double adaptors is discouraged within the Village Baxter. Power boards may be used as required but only where they have an overload cutout.

2.3.   Extension cords should only be used on a temporary basis and, should be positioned in a way that they cannot become damaged, wet or become a trip hazard.

2.4.   When an electrical fault is detected the appliance shall be immediately withdrawn from service and tagged as being out of service.

2.5.   Unqualified employees shall not attempt to repair electrical items. All electrical repairs or alterations shall be carried out by a registered electrician.

2.6.   All Company owned electrical cords and cord-connected electrical equipment should be routinely inspected to ensure that there are no obvious signs of damage.

2.7.   Electrical equipment not required during the night should be switched off.

2.8.   Areas around electrical switchboards should be kept clear for a distance of at least 1 metre.

2.9.   A suitable fire extinguisher shall be located adjacent to the electrical switchboard.

2.10.   Village owned electrical equipment to be tagged and tested in accordance with legislative requirements.

2.11.   Residents of RAC facilities are required to have their own electrical appliances tagged and tested where-ever practicable

3. RELATED POLICIES AND DOCUMENTS

- Nil

Policy Number:	765
Title:	Buildings
Owner:	Executive Manager
Review Date: January 2018	**Policy Risk Rating:** Low

1. PURPOSE

Buildings must comply with the Building Code of Australia, relevant Australian Standards, health standards and fire standards to ensure safe working and living environment, and an acceptable standard of care.

2. PROCEDURE

2.1. Access to buildings should be reviewed to ensure safe access and egress for employees, residents, contractors and visitors.

2.2. Maintenance employees shall have access to the asbestos register. Any work carried out on any asbestos-containing material shall be carried out in accordance with the WorkSafe Australia Code of Practice on Asbestos, 1988, or relevant state legislation or codes.

3. RELATED POLICIES AND DOCUMENTS

- Nil

WORKPLACE HEALTH & SAFETY

Policy Number:	766
Title:	Environment
Owner:	Executive Manager
Review Date: January 2018	**Policy Risk Rating:** Low

1. PURPOSE

While The Village Baxter needs to provide care in a home-like environment and meet the needs of the residents who have limited mobility and often impaired sensory perception, the WHS of the employees must be considered.

2. PROCEDURE

2.1. It is the policy of The Village Baxter that a program shall be put in place to work toward compliance with State & Federal legislation.

2.2. Selection and maintenance of flooring materials should be appropriate to the area and avoid creating hazards for employees or residents.

2.3. Paths, ramps and steps should have hand rails, slip resistant surfaces and be pitched so that water runs way from the path wherever possible. Paths and ramps should be designed so that they do not contribute to manual handling problems associated with pushing trolleys, wheelchairs and so on.

2.4. Where steps are necessary, they should have consistent riser height and edges should be highlighted in a contrasting colour.

2.5. Hot taps should be temperature controlled or the hot water system regulated to deliver water at a temperature that will not cause burns. The maintenance program should ensures the reliability of the temperature control via the Maintenance schedule.

2.6. There should be adequate designated storage areas for all items, including those frequently accessed, such as walking frames, wheelchairs and residents' belongings.

2.7. Restricted areas, first-aid kits, emergency exits and fire extinguishers shall be appropriately and clearly signed.

2.8. Lighting should be designed to meet the needs of both residents and employees.

2.9. Full length glass panels should be avoided or be of safety glass and be clearly marked for visibility.

2.10. Excessive noise can lead to confusion for the elderly and create a hazard for employees. Floor coverings and furnishing materials and other factors such as background music should take into account noise levels. Noise exposure in areas such as laundry and workshop should be assessed and controlled as appropriate.

2.11.   The balance between thermal environment (heat and cold) and the level of activity associated with the work tasks, especially in areas such as the laundry and outdoors, should be assessed.

2.12.   A suitably qualified person should maintain all air-conditioning systems as per legislative requirements.

2.13.   A clean area should be available for employees to eat meals.

2.14.   Toilet facilities must be available for employees.

3.   RELATED POLICIES AND DOCUMENTS

- Nil

WORKPLACE HEALTH & SAFETY

Policy Number:	767
Title:	UV Radiation
Owner:	Executive Manager
Review Date: January 2018	**Policy Risk Rating:** Low

1. PURPOSE

1.1. Australia has the highest incidence of skin cancer in the world, with more than 380,000 people treated for the disease every year. At least 1 in 2 Australians will be diagnosed with skin cancer in their lifetime. The major cause of skin cancer is a combination of exposure to UV radiation and various personal risk factors. Eyes can also be damaged through overexposure to UV radiation. The majority of outdoor work around the Village Baxter will be undertaken during daylight hours and therefore all reasonable steps should be undertaken to eliminate or reduce any workplace exposure to UV radiation.

1.2. This policy applies to those staff whose work requires that a minimum of 40% of their working day is subject UV exposure.

2. PROCEDURE

2.1. The most effective ways of reducing UV exposure is a combination of protection methods. In order of effectiveness they are:

2.1.1. Reorganizing work to avoid the UV peak of the day.

2.1.2. Providing natural or artificial shade

2.1.3. Providing appropriate protective clothing

2.1.4. Applying sunscreen.

2.2. Procedures for staff of the Village Baxter who work predominately outside and are therefore regularly exposed to UV radiation will be:

2.2.1. Whenever possible organise work flows to avoid the UV peak of the day.

2.2.2. Utilise available natural or artificial shade when performing tasks.

2.2.3. Employees should have breaks out of the sun in conditions of extreme heat, and maintain a regular fluid intake.

2.2.4. Wear appropriate protective clothing. The Village recommends wide brimmed hat, long sleeved shirt with collar, closed in shoes, sunglasses and gloves. However, the Village understands the need to balance protection with comfort to ensure other problems such as heat exhaustion do not occur. For this reason the MINIMUM dress standard will be: hat, either brimmed or peaked, short sleeved shirt with collar, short trousers, closed in shoes / boots with socks and sunglasses.

2.2.5.   Sunscreen will be provided to employees. Employees must apply sunscreen of SPF 30+ in accordance with manufacturers' instructions.

2.2.6.   Early detection of skin cancers is important. Employees are encouraged to have annual checks by their medical practitioner as part of their health regime.

3. RELATED POLICIES AND DOCUMENTS

- Nil

WORKPLACE HEALTH & SAFETY

Policy Number:	768
Title:	Occupational Stress
Owner:	Executive Manager
Review Date: January 2018	**Policy Risk Rating:** Low

1. PURPOSE

Occupational stress can effect a person's health, enjoyment of life and ability to work effectively. This procedure outlines a process to address Occupational stress in the same way as other hazards, that is, hazard identification, risk assessment and risk control.

2. PROCEDURE

2.1. The Executive Manager, in consultation with the WHS committee, should determine the need and support for an occupational stress strategy.

2.2. Where a need is recognised, a strategy should be initiated to identify, assess and control Occupational stress. Attachment 1: Developing an Occupational Stress Program, provides a guide for the design and implementation of such a program.

2.3. Consultation and confidentiality shall be key factors in developing the occupational stress program.

2.4. Where necessary, external specialist advice should be engaged by the Executive Manager and made available to employees through agreed procedures. Contact information should be readily available to employees.

2.5. Procedures should be prepared and external resources available to support a systematic response to a critical incident.

3. RELATED POLICIES AND DOCUMENTS

- Attachment 1: Developing an Occupational Stress Program

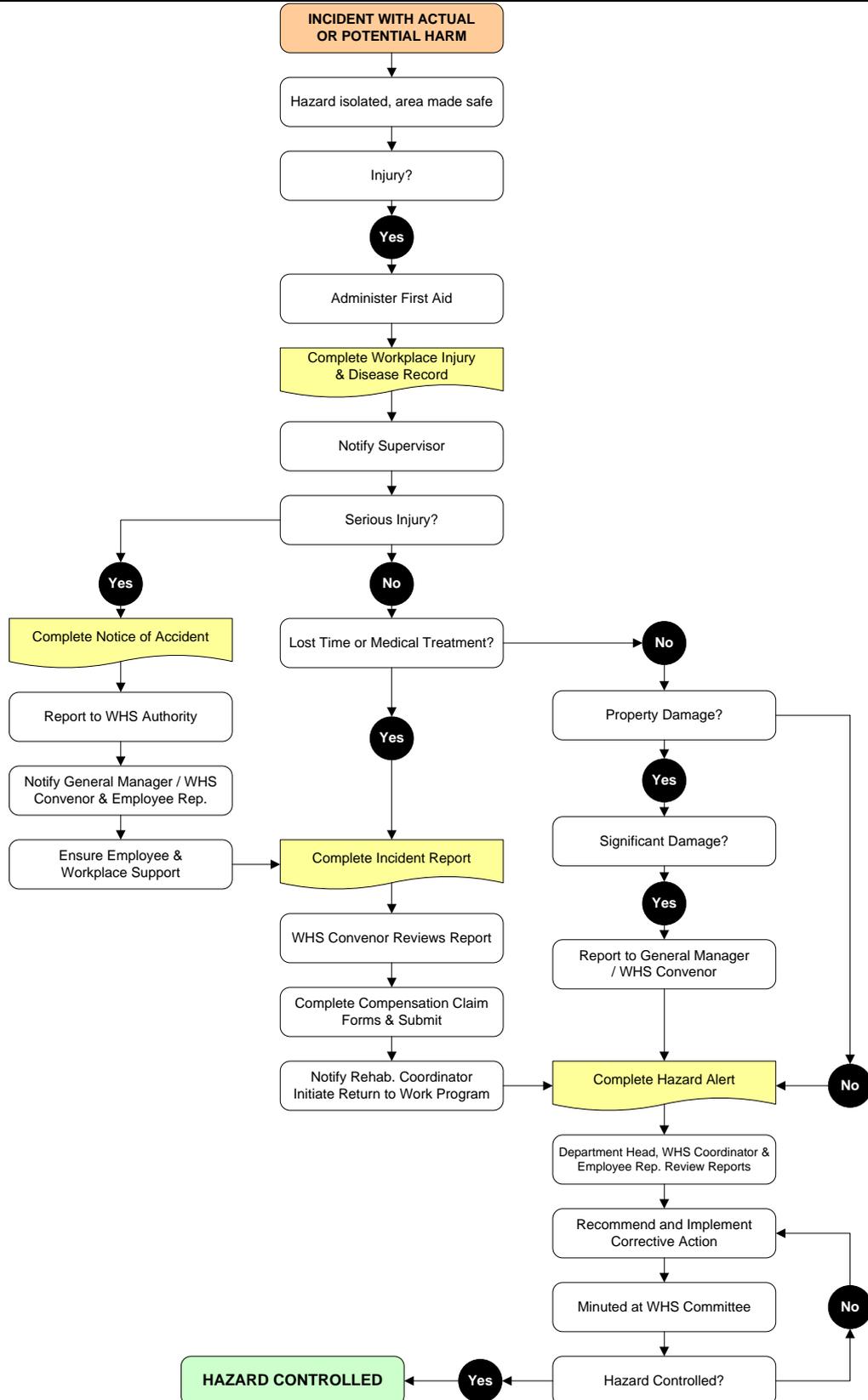# WORKPLACE HEALTH & SAFETY

Policy Number:	768.1
Title:	Attachment 1 - Developing an Occupational Stress Program
Owner:	Executive Manager
Review Date: January 2014	**Policy Risk Rating:** Low

WORKPLACE HEALTH & SAFETY

Policy Number: 769	
Title: Resident Aggression	
Owner: Executive Manager	
Review Date: January 2018	**Policy Risk Rating:** Low

1. PURPOSE

1.1. Aggressive incidents and injury due to resident aggression are often considered 'part of the job' in aged care, especially care of people with dementia.

1.2. People exposed to aggression may be injured at the time or suffer health effects such as feelings of exhaustion, headaches or insomnia over an extended period.

1.3. Management and employees have the responsibility in law and through care standards to minimise and manage resident aggression through a strategy of identification, assessment and control.

2. PROCEDURE

2.1. Risk Identification and Assessment

2.1.1. Incidents of aggressive behaviour shall be reported to the Supervisor and documented in nursing notes, and where injury occurs, an Accident / Incident Report completed. Resident incident reports should be completed as detailed in Resident Care Policies.

2.1.2. All reports of resident aggression shall be investigated by the Supervisor for cause and appropriate action taken.

2.1.3. On admission, information should be sought on any aggressive tendencies. This information and recommended control actions shall be included in the nursing care plan.

2.1.4. The risks of aggressive behaviour should be assessed using the Aggression Risk Assessment.

2.2. Risk Control

2.3. An action plan as part of the Resident Care Plan shall be developed and implemented based on the outcomes of this assessment.

2.3.1. The nursing care plan for all residents exhibiting aggressive behaviour shall be reviewed and modified on a regular basis.

2.4. Post-Incident Management of Personnel

2.4.1. Following any incident of aggression, employees, and any other people involved (victim, witness and others) shall be followed up by the supervisor to 'defuse' and 'debrief'. The object of this process is to acknowledge and validate the reactions and prevent cumulative stress.

2.4.2. External specialist advice engaged under the procedure on Occupational stress WHS Policy 768 shall also be available, through agreed procedures, to employees exposed to aggression. Contact information shall be readily available to all employees.

3. TRAINING

3.1. All employees with direct contact with residents shall receive training including:

- o   rights and responsibilities of employees
- o   understanding dementia and communicating with residents with dementia
- o   how to identify potentially violent situations including 'trigger' events and situations
- o   role of nursing care plans in preventing aggressive behaviour
- o   procedures for preventing aggression
- o   dealing with difficult residents and 'defusing' potentially aggressive situations
- o   emergency procedures for threatening situations
- o   evasive self-defence techniques
- o   post-incident reporting procedures
- o   post-incident support facilities

4. RELATED POLICIES AND DOCUMENTS

- • Attachment 1 - Aggression Risk Assessment

WORKPLACE HEALTH & SAFETY

Policy Number: 771	
Title: First Aid	
Owner: Executive Manager	
Review Date: January 2018	**Policy Risk Rating:** Low

1. PURPOSE

The purpose of this policy is to identify the Village response to injuries occurring within the Village to staff, residents, and visitors.

2. POLICY

The Village Baxter will ensure it has procedures to manage acute medical situations or injuries arising from accidents involving employees, residents or visitors to the Village. Prompt appropriate first aid will be provided to minimise injury and promote recovery. Reporting procedures will enable the provision of appropriate treatment, and the review of incidents as an aid to further prevention and improvements to Village safety.

3. PROCEDURE

3.1. An assessment of the first aid needs of The Village Baxter shall be undertaken to identify the needs for first aid supplies and for training. This assessment should consider first aid injuries that have occurred and the type of hazards likely to result in injuries requiring first aid.

3.2. Even though dressings, bandages and so on are part of the general supplies of The Village Baxter, there should be designated first aid kits located in areas readily accessible to employees.

3.3. The kits shall be kept unlocked and be readily available to all employees while being under the supervision of a designated employee.

3.4. The location of the first aid kits should be appropriately identified by signs.

3.5. The contents of the kit shall reflect the hazards in The Village Baxter and likely injuries, while also being stocked in accordance with state requirements.

3.6. Work injuries requiring treatment shall be recorded on the Accident / Incident Report Form by either injured or treating Staff.

3.7. According to the severity of the injuries and state legal requirements, additional records may also need to be generated.

3.8. The Department Head shall be notified of any illness, injury or first aid treatments.

3.9. The Accident / Incident Report Forms should be held in confidence with monthly summarised reports provided to the WHS committee by the WHS Convenor.

4. RELATED POLICIES AND DOCUMENTS

- Nil

WORKPLACE HEALTH & SAFETY

Policy Number:	772
Title:	Fire and Other Emergencies
Owner:	Executive Manager
Review Date: July 2018	**Policy Risk Rating:** Low

1. PURPOSE

1.1. Aged care facilities are subject to the same range of emergencies that are encountered in commercial and residential buildings. However, preventing and coping with fire and other emergencies in aged care facilities is more complex due to the 24 hour operation and the presence of frail, confused and disabled people.

1.2. Management of fire risk requires attention to prevention and to minimisation of the damage once a fire occurs.

1.3. The Village Baxter also has procedures in place for other emergencies such as security (bomb threat, intruders) building damage and other external emergencies that may require evacuation of buildings.

2. POLICY

2.1. Safety procedures and work practices shall be designed and implemented to minimise the risk of fire. The Emergency Procedures Manual shall cover:

- fire
- security threat (personal threat, intruder, bomb threat)
- internal emergencies (building damage, or interruption to water or oxygen supplies)
- external emergencies that may affect the facility (for example chemical spill, bush fire)
- evacuation

2.2. Copies of the procedures shall be located in readily accessible places.

2.3. All employees shall be required to attend training Emergency Procedure training biannually. Training may include practical training, exercises and simulated evacuation.

2.4. Staff that fail to attend compulsory Emergency Procedure training may be subject to disciplinary action.

2.5. The effectiveness of emergency procedures should be evaluated following each emergency drill and corrective actions taken as appropriate.

3. RELATED POLICIES AND DOCUMENTS

- Emergency Procedures Manual

Policy Number:	773
Title:	Maintenance of Emergency Equipment
Owner:	Executive Manager
Review Date: January 2018	**Policy Risk Rating:** Low

1. PURPOSE

To ensure that all fire detection and fire-fighting installations be maintained in optimum condition by regular inspection and maintenance.

2. POLICY

2.1. A range of fire detection systems and fire-fighting equipment will be installed at The Village Baxter.

2.2. The Village Baxter contracts out all of the fire systems checks as required by Australian Standards.

2.3. With each part of the fire systems/equipment to be inspected and serviced, a service agreement should be arranged between The Village Baxter and the service organisation. The service agreement should specify:

- the system/equipment to be inspected
- the frequency of inspection
- items to be checked at each level of service
- that the level of service will be as laid down in the relevant Australian Standard
- any checks allocated to Company Staff.

2.4. The service organisation must provide, and complete at each inspection, a log book which outlines all items to be checked, maintenance required or carried out, verification that the system/equipment is in working order and provide a written report on any sub-standard equipment.

2.5. The Infrastructure Manager should regularly inspect logbooks and reports to ensure the level of service is as outlined in the service agreement, especially the regularity of service.

3. PROCEDURE

3.1. Refer to the ESIS system maintained by the Infrastructure Manager to monitor and report on systems maintenance.

4. RELATED POLICIES AND DOCUMENTS

- Emergency Procedures Manual

WORKPLACE HEALTH & SAFETY

Policy Number:	774.1
Title:	Village Baxter Bushfire Plan
Owner:	Executive Manager
Review Date: January 2018	**Policy Risk Rating:** Low

<p style="color:red; text-align:center; font-weight:bold;">

Irrespective of any guidelines contained in this document,

Always follow the directions of Emergency Services such as

Fire, Police, SES or Ambulance Services.
</p>

1. PURPOSE

Risk reduction in the event of a bushfire.

2. CFA IDENTIFIED RISKS

The Village Baxter is located on the fringe of the City of Frankston. Consultation with the local CFA has identified the following bush fire risks for the Village:

2.1. Ember attack from fires in

    a. Langwarrin Flora and Fauna Reserve

    b. Frankston Reservoir Bushland

    c. Frankston Private Golf Course in Robinsons Road

2.2. Fire or Flames from a fire at the Brahma Kuris retreat in Stotts Lane spreading to vegetation behind the 400s and 900s units.

3. PROCEDURE

3.1. To reduce the risks from "Ember Attack" the Village recommends Residents do the following

    a. Keep vegetation away from windows

    b. Avoid 'clutter' around units and on verandas

    c. Be prepared to hose down roof tops and gutters

    d. Be aware of large trees around your unit

3.2. The Victorian Government has released new categories for Fire Danger. The 'worst' or highest ratings are CODE RED (Catastrophic) and Extreme.

3.3. The Village is located in the "central" fire ban district. If our region "Central" has been declared a CODE RED (Catastrophic) or Extreme fire danger, the Village very strongly recommends that Residents living South of Entrance 7 or in the area surrounding the

wildlife corridor (900's units) evacuate and leave their units early in the morning and either spend the day and evening with family and friends, at a local shopping centre or in the Clarke Centre, Robinsons Centre, or the Grant Centre. DO NOT use Parkside Centre as an evacuation point as this building backs onto the same Bushland as the 900s units.

3.4. The significant danger to these areas is from a weather change that sees fires fanned by strong southerly winds, history has shown that these types of weather changes are more likely to occur late in the afternoon and at these times Administration will be closed and Independent Living Residents are expected to have made proper preparations for their own safety. The decision to evacuate must be made early because once the fire is close, there will be a lot of smoke in the area; visibility will be poor and road travel will be hazardous and roads may be blocked by fallen trees.

3.5. Residents who do not have their own transport should make plans for how they can evacuate and ensure that the people they will call upon for assistance are available and aware of the plan.

3.6. Residents should be prepared throughout the fire danger period (October to March) and during days Fire Ban or Fire Danger in the Central district, Residents should be prepared for unexpected weather changes and tune into ABC radio 774 on the AM dial and monitor the CFA website and can call the Victorian Bushfire Information Line : 1800 240 667 if required. Residents who use social networking sites can also monitor Twitter and newspaper sites for breaking news.

4. SPECIAL INFORMATION FOR RESIDENTAIL CARE FACILITIES

4.1. The coordination of the care or evacuation of Residents in the Aged Care Facilities will be entirely at the discretion and direction of the Manager or Supervisor working in conjunction with the relevant emergency services. All Aged Care Facilities have a sprinkler system and fire panel linked directly to the local fire brigade. It is important to protect Residents from smoke and heat by taking the following steps:

   a. All windows and external doors are to be closed

   b. Automatic doors switched to manual

   c. Visitors are to be discouraged from coming or asked to leave to prevent vehicles from obstructing roadways within the village.

   d. Relevant documentation, medication, and medical supplies are to be prepared in the event that evacuation is likely.

5. RELATED POLICIES AND DOCUMENTS

- Village Baxter Bushfire Policy 774.1

- CACPs Heat / Code Red / Bushfire Policy 774.3

- Heatwave Information for Clients

- Bushfire response Planning tool

- Heatwave Client Checklist

WORKPLACE HEALTH & SAFETY

Policy Number:	774.2
Title:	Daycentre Bushfire Policy
Owner:	Executive Manager
Review Date: January 2018	**Policy Risk Rating:** Low

Irrespective of any guidelines contained in this document,

Always follow the directions of Emergency Services such as

Fire, Police, SES or Ambulance Services.

1. PURPOSE

To identify the procedures to be taken by the Village Baxter Daycare Centre in the event of bushfire threat in the local area.

2. PREAMBLE

2.1. The Village Baxter Daycare Centre is part of the Village Baxter site. The Village Baxter is an aged care retirement village comprising ILU and RACF on 75 acres in Frankston South.

2.2. Discussions with CFA indicate that bushfire threat is likely to be limited to the "900" series units on the southern side of the Village some 200 metres from the Day Centre. The Day Centre is surrounded by ILUs and RACF to the east, north and west and Frankston South residential areas (Bartlett St) to the south. As such the Day Centre is at very little risk of direct bushfire attack.

2.3. Nonetheless, the Day Centre is part of the overall Village and will respond in accordance with the Village Baxter Bushfire Plan. This policy serves as an addition to that plan.

3. POLICY

3.1. In the event of Bushfire threat, or the declaration of Central District "Code Red", the Day Centre will cease operations until the emergency has passed. Should the Village become aware that a "Code Red" is to be declared the following day, or that bushfire threat is likely, clients will be contacted and advised that the service will be closed on the day/s in question.

3.2. Should the Village come under bushfire threat whilst in operation, the Day Centre will be immediately closed and clients returned to their homes if safe to do so. If not safe, clients will be cared for within the Village in accordance with the Village Bushfire Plan.

4. PROCEDURE

4.1. Village under immediate Bushfire threat:

    a. Staff shall assess if it is safe to return clients to their homes. Staff shall contact the bushfire advice line (see below) to determine the location of the fire / Check driving conditions / Check air quality - to determine if it is safe to drive bus.

    b. Clients which are able to be safely taken to their homes will be taken home.

    c. Remaining clients shall be taken to a safe refuge in the Village Chapel.

    d. Next of Kin will be contacted to pick up clients if safe to do so.

    e. If unsafe, clients will be given accommodation within the Village until the danger has passed, or evacuated with other Village residents.

    f. The client listing shall be maintained by staff and a head count shall be performed prior to, and after relocation / evacuation.

4.2. Central region "Code red" declared for following day, or bushfire threat likely:

    a. All clients will be contacted and advised that the Day Centre service is closed until further notice.

    b. Next of kin / Case Managers shall also be notified.

    c. The client listings will be checked to identify "at risk" clients. (E.g. isolated clients with no NOK who may be exposed to bushfire danger).

    d. The relevant authority will be notified of all "at risk" clients.

5. FURTHER INFORMATION

Further information can be obtained from the **Victorian Bushfire Information Line: 1800 240 667** or the **ABC Radio 774** on the AM frequency.

6. RELATED POLICIES AND DOCUMENTS

- Policy 774.1 - Village Baxter Bushfire Policy
- Policy 774.3 - CACPs Heat / Code Red / Bushfire Policy
- Heatwave Information for Clients
- Bushfire response Planning tool
- Heatwave Client Checklist

WORKPLACE HEALTH & SAFETY

Policy Number:	774.3
Title:	Community Care Home Care Package Clients – Heat / Code Red / Bushfire Policy
Owner:	Executive Manager
Review Date: October 2019	**Policy Risk Rating:** Low

1. PURPOSE

To provide guidelines for the support of Village Baxter Case Managed Home Care Package clients during extreme heat / Code Red / Bushfire events.

2. POLICY

Village Baxter Case Manager will work with at risk clients to ensure they have a Bushfire Plan, and support during extreme heat events.

3. PROCEDURE

3.1. The Village Baxter Case Manager or nominee will liaise with clients to determine their level of risk during a bushfire event.

3.2. Where the client is assessed as being at risk during a bushfire the Case Manager will provide assistance to the client in developing a bushfire / emergency plan.

3.3. All clients will be provided with information on extreme heat events.

3.4. During extreme heat events the Case Manager or nominee will make telephone contact with clients to check on health status.

3.5. Should the Case Manager or nominee become concerned as to the health of the client they will advise the appropriate support person who is in a position to provide assistance. This may be the next of kin, nominated emergency contact person or emergency services at the Case Managers discretion.

4. RELATED POLICIES AND DOCUMENTS

- Policy 774.1 - Village Baxter Bushfire Policy
- Policy 774.2 - Daycentre Bushfire Policy
- Heatwave Information for Clients
- Bushfire Response Planning Tool
- Heatwave Client Checklist

WORKPLACE HEALTH & SAFETY

Policy Number:	775
Title:	Heat Wave Policy – Aged Care Facilities
Owner:	Executive Manager
Review Date: January 2018	**Policy Risk Rating:** Low

1. DEFINITION

1.1. Heatwaves are brief periods of unusually high temperatures which can impact on human health, infrastructure and services.

2. HEATWAVE EFFECTS

2.1. Older people have a reduced ability to adapt to summer heat and are more prone to heat stress. They are more likely to have a combination of factors, including the effects of ageing, chronic medical conditions and disability, taking prescribed medication, and social factors. Age-related changes can reduce the sweating response to hot weather, and older people may not drink enough to keep themselves hydrated.

2.2. Heatwaves can cause fatigue, heat rash, heat cramps, heat exhaustion, dehydration and heat stroke. The most common causes of death seen through heatwaves are cardiac, asthma and other respiratory illness, diabetes, nervous system diseases and cancer.

2.3. Heatwaves are most dangerous if they occur early in the summer season, if they last for several days, and if they include hot nights.

2.4. The following symptoms may indicate heat exhaustion which can lead to heat stroke which can be fatal:

Rapid breathing	Nausea	Dizziness
Fatigue / Weakness	Dry Swollen Tongue	Muscle Cramps / Aches
Vomiting	Confusion	Rapid Pulse
Throbbing Headache	Skin – Red, hot, dry, rash	Pale Complexion

Please watch for signs of the above symptoms in residents, staff, volunteers and visitors and report them to your supervisor immediately.

3. POLICY

The Village Baxter is focused on ensuring the health and safety of residents, staff, contractors and visitors during period of excessive heat. During these periods the Villages RACF Heatwave Plan will be implemented.

4. PROCEDURE

Baptist Village Baxter Policies & Procedures

4.1. Staff education regarding heatwaves, equipment use, prevention / management of heat related illnesses will occur September/October each year.

4.2. Information will be provided to Resident / family regarding heatwaves in September/October each year.

4.3. Maintenance to ensure servicing of air conditioners + fridges has occurred prior to the warmer months. (Refer ESIS)

4.4. Heatwave plan to be discussed at resident and staff meetings.

5. HEATWAVE PLAN

5.1. Heatwave confirmed.

5.2. Staff notified via memo and at handovers.

5.3. Residents notified via noticeboards and by care staff.

5.4. Heatwave flyer information made available to staff and residents.

5.5. Ensure that air conditioners are turned on.

5.6. Monitoring of internal/external temperatures to occur.

5.7. Lights off during the day whenever possible.

5.8. Recommend to residents that their bedroom curtains are closed if receiving direct sunlight.

5.9. Close curtains in communal areas.

5.10. Liaise with catering to arrange additional drinks, icy-poles etc

5.11. Staff are to monitor residents location.

5.12. Egress points / courtyards are to be monitored.

5.13. Discourage families from taking residents for outside trips, walks and visits.

5.14. Restrict the use of fans to blow air directly onto a resident when the indoor air temperature is above 35ºC.

5.15. Encourage and assist residents with sipping cool water or other drinks.

5.16. Staff are encouraged to keep their own water bottle on shift and drinking regularly.

6. POWER OUTAGE

6.1. In the event of power outage residents should be encouraged to reside in the main lounge area. This area remains the coolest in the building.

6.2. Catering will monitor fridge temperatures to ensure food safety. Nurses will monitor medication fridges to ensure medication remains at appropriate level. The opening and closing of fridge doors should be minimised during power outages.

7. **STAFF RESPONSIBILITIES**

7.1. Executive Manager

Monitoring of weather forecasts and alerting the relevant areas of The Village of a heatwave is the responsibility of the Executive Manager. Identification of a heatwave will occur through the media, from the Department of Health www.health.vic/gov/au/chiefhealthofficer/ and www.bom.gov.au/australia/heatwave/

7.2. Directors of Nursing

Notification of a heatwave will be communicated to the Directors of Nursing via The Executive Manager. The Directors of Nursing will notify the RACF staff and Village Nurses by a memo. Additional communication of a heatwave will occur at handovers by Registered Nurses.

7.3. Infrastructure Manager

The Infrastructure Manager will receive communication of a heatwave by the Executive Manager. The Infrastructure Manager will ensure external blinds are placed in the low position and ensure all equipment is functioning as intended.

7.4. Nurse Unit Manager (NUM) / Registered Nurse

Residents taking diuretic medication will be monitored to ensure adequate level of hydration is maintained during heatwave periods.

Residents taking medication with a narrow therapeutic index will be monitored for signs of adverse reactions. In certain circumstances, the NUM/RN will refer residents to a dietician, occupational therapist or speech pathologist where difficulties in consuming fluids are noted.

7.5. Catering

Catering Department will ensure that during the warmer months that adequate supply of water, other drinks, icy poles, ice-cream, jellies, custards or ice are available for residents and staff. Adequate variety of drinks will be available for staff and resident to make a selection of choice.

7.6. Lifestyle staff

Lifestyle are to record the temperature both internally and externally of the building 4 times per day during a heatwave. External monitoring must include areas that are accessed regularly by staff and residents (courtyards)

Lifestyle will ensure on days of extreme heat that signs are placed on resident noticeboards notifying of heatwave.

7.7. Care Staff

Care staff are to monitor the location of residents during heatwaves. Close monitoring of external courtyards and residents who have remained in their suites is required. Care staff are to dress resident appropriately and provide residents and families with heatwave information:

8. **RELATED POLICIES AND DOCUMENTS**

- http://www.health.vic.gov.au/agedcare/publications/racsheatwave/downloads/myths.doc

- http://www.health.vic.gov.au/agedcare/publications/racsheatwave/downloads/heatwave_residents.doc

- http://www.health.vic.gov.au/agedcare/publications/racsheatwave/downloads/heatwave_carers.doc

Policy Number: 781	
Title: Workplace Health & Safety Training	
Owner: Executive Manager	
Review Date: June 2018	**Policy Risk Rating:** Low

1. PURPOSE

The purpose of this document is to facilitate compliance with legal responsibilities and also to ensure that all people whose decisions and actions affect WHS within The Village Baxter are equipped with the appropriate knowledge and expertise.

2. POLICY

The Village will seek to ensure that appropriate training is provided to staff members with WHS responsibilities within the Village.

3. PROCEDURE

3.1. An organisational training needs analysis should be conducted taking into account:

- the training requirements of each procedure in this manual

- any proposed changes to work organisation, roles or responsibilities

- other risks or requirements that may be identified in consultation with managers and employees

3.2. A training needs analysis should be conducted for each department taking into account:

- legislative requirements

- knowledge and skill requirements of their work roles

- responsibility statements and position descriptions

- needs and skills of the current employees

3.3. A training program should be developed taking into account training providers and training programs currently available. The training plan should consider one-off training and refresher training.

3.4. Training records shall be kept to demonstrate legislative compliance and enable monitoring of the training plan both for the Company and for individual employees covering:

- who has attended training

- when the training course took place

- who provided the training

- a brief outline of the objectives, duration, content and evaluation

3.5. The WHS committee should review the effectiveness of the training program annually.

3.6. A budgetary allowance should be provided to enable achievement of training targets.

3.7. Development of the training programs and selection of the training provider(s) should take into account the needs of any employees with Non-English Speaking Backgrounds.

3.8. WHS Committee Members

   3.8.1. All employee representatives should be entitled to relevant training as soon as possible after election.

   3.8.2. Employee representatives should have the opportunity to keep up to date with standards and developments in WHS through refresher and update training.

   3.8.3. All employees and specific work groups should receive relevant training.

3.9. Capable Residents And Family Members

   3.9.1. Resident Information kits, newsletters and meetings can inform Residents and their families as to how they may assist in creating a healthy and safe work environment.

4.   RELATED POLICIES AND DOCUMENTS

- Nil

Policy Number:	782
Title:	Management Training
Owner:	Executive Manager
Review Date: January 2018	**Policy Risk Rating:** Low

1. PURPOSE

WHS is a management responsibility. These responsibilities are detailed in WHS Policy 722, Roles and Responsibilities. To meet these responsibilities, individual managers and supervisors must have an understanding of their legal responsibilities, basic knowledge of how to manage WHS, and the principles of hazard management.

2. POLICY

The Village will seek to ensure that appropriate training is provided to Management with WHS responsibilities within the Village.

3. PROCEDURE

3.1. Managers and supervisors have a joint responsibility to take action to develop WHS skills and knowledge, through establishing professional development plans.

3.2. Matters such as time availability and training costs should be addressed as part of the agreed plan.

3.3. Managers and supervisors should receive appropriate WHS training.

4. RELATED POLICIES AND DOCUMENTS

- Attachment 1 – Training Needs of Managers and Supervisors

Policy Number:	791
Title:	Claims Administration, Rehabilitation and Return to Work
Owner:	Executive Manager
Review Date:	January 2018 **Policy Risk Rating:** Low

1. PURPOSE

Management of claims and effective return to work is vital to contain workers compensation costs, to meet moral and legal obligations, and for efficient running of The Village Baxter. Appropriate claims management and return to work are also important in retaining skilled employees and maintaining employee morale.

2. PROCEDURE

2.1. Claims Management

2.1.1. The management of The Village Baxter shall designate a person to manage claims administration.

2.1.2. All claims for workers compensation shall be processed through this person.

2.1.3. All claims for workers compensation shall be reported as per Attachment 1 of Doc 5.1, Hazard and Incident Reporting and Investigation. This means that there should also be a Workplace Incident and Investigation Report for all claims.

2.1.4. Claims should be managed in accordance with the guidelines in Attachment 1, Guidelines for Administration of Claims.

2.1.5. Current compensation files should be reviewed at least monthly with costs estimated at least quarterly.

2.2. Workplace Rehabilitation and Return-To-Work

2.2.1. The management shall designate a person as the 'Rehabilitation/Return-to-work co-ordinator'. A responsibility statement is given in Attachment 2

2.2.2. Contact and communication with an injured worker shall be maintained during the period of total incapacity and absence from work.

2.2.3. The workplace rehabilitation/return-to-work process shall begin as soon as practicable after the injury and/or, as soon as medical opinion agrees it is possible.

2.2.4. Where possible, suitable work shall be made available when an employee's injury does not allow an immediate return to pre-injury duties. These duties shall be made available on a temporary basis, where such duties are available as part of the normal running of the facility.

2.2.5. Taking account of the limitations in item 2.9, where possible and appropriate, modifications shall be made to equipment, work practices and duties to assist the return to work of the injured worker.

2.2.6. A return-to-work plan shall be developed jointly by the Rehabilitation/Return-to-work Co-ordinator, the injured employee and the injured employee's supervisor. This plan shall be made as soon as possible after the worker has been injured, refer Form 9.1.1 for a format for a return-to-work plan.

2.2.7. The return to work shall be monitored and reviewed at least fortnightly and in accordance with legislated requirements. The return-to-work plan shall be adjusted to reflect any changes in the employee's condition and capacity to work.

2.2.8. Confidentiality of the employee's information during return to work and workplace rehabilitation shall be maintained. Records shall be stored securely and access limited to those who need to know. Information shall not be released without the employee's written consent.

2.2.9. Participation in a return-to-work program will not, of itself, prejudice any employee.

2.2.10. Management shall appoint one or more external rehabilitation provider to coordinate the 'treatment' aspects of rehabilitation as required for return to work.

2.2.11. The Village Risk Management & Workplace Rehabilitation Program – Injury Management Procedure will be displayed on Staff Notice Boards.

3. **TRAINING**

3.1. Person Handling Claims Administration

This person shall be provided with ongoing training on the current legislative requirements for claims administration, including entitlement and payment.

3.2. Rehabilitation/Return-To-Work Coordinator

The rehabilitation/return-to-work coordinator should receive training in their role and responsibilities including:

3.2.1. legislative requirements

3.2.2. role of the coordinator

3.2.3. record keeping

3.2.4. liaison with doctors and other providers

3.2.5. developing alternative duties, preparation of return-to-work plans

3.2.6. communication skills

3.2.7. multicultural perspectives

3.2.8. identifying and overcoming barriers to return to work

4. RELATED POLICIES AND DOCUMENTS

- Attachment 1   Guidelines for Administration of Claims

- Attachment 2 – Responsibilities of RTW Co-Ordinator

- Attachment 3   Requirements for Claims Administration

- Attachment 4 – Requirements for Claims

- Attachment 5 – Risk management & Workplace Rehabilitation Program – Injury Management Procedure.

WORKPLACE HEALTH & SAFETY

Policy Number:	791.1
Title:	Attachment 1 – Guidelines for Administration of Claims
Owner:	Executive Manager
Review Date:	January 2018 **Policy Risk Rating:** Low

1. PROCEDURE

1.1. Receive the claim.

1.2. Check:

     1.2.1. Time lost, or medical expenses only?

     1.2.2. Documentation complete? (Look for signed claim form, and medical certificate).

1.3. If the documentation is complete, date the claim form on the day it was received, and return a copy of the claim form to the worker.

1.4. Complete the Employer Report.

1.5. If the claim is complete, make copies of all documents and send the Claim Form, medical certificate and Employer Report to your licensed insurer/fund manager/claims agent within the time limits.

1.6. Ensure confidentiality of information.

1.7. If uncertain about any aspect of the claim, talk to licensed insurer/fund manager/claims agent.

1.8. Procedures for making claims administration easier.

     1.8.1. Keep a separate file for each and every Workers Compensation claim.

     1.8.2. Photocopy everything connected with the claim so that there is a complete copy (in date order) of all certificates, medical accounts, letters, rehabilitation plans, job offers etc.

     1.8.3. Make file notes of all conversations in connection with the claim.

     1.8.4. Keep a copy of the Workplace Incident and Investigation Report in the file.

     1.8.5. Keep a copy of the worker's pre-injury job description in the file–this may be needed later by the licensed insurer/fund manager/claims agent and/or the rehabilitation provider).

2. RELATED POLICIES AND DOCUMENTS

- 791 - Claims Administration, Rehabilitation and Return To Work

- Attachment 2 - Responsibility Statement for Rehabilitation/Return To Work Coordinator

- Attachment 3 - Requirements for Claims Administration

- Attachment 4 - Requirements For Claims

- Attachment 5 - Risk management & Occupational Rehabilitation Program – Injury Management Procedure.

Policy Number:	791.2
Title:	Attachment 2 - Responsibility Statement for Rehabilitation/Return To Work Coordinator
Owner:	Executive Manager
Review Date:	January 2018 **Policy Risk Rating:** Low

The Rehabilitation/Return-to-work Co-ordinator has a responsibility to:

5. develop and maintain a coordinated and systematic approach to Workplace rehabilitation

6. provide Workplace rehabilitation advice and assistance

7. report on overall aspects of Workplace rehabilitation to the WHS committee

8. liaise as appropriate with all relevant parties in the Workplace rehabilitation process, including the injured employee, approved rehabilitation providers, supervisors, departmental managers and employee representatives

9. maintaining reasonable and sensitive contact with employees who are off work, to provide support and encouragement for their return to work

10. liaise with the injured workers' doctor and other professionals involved in the treatment of the injured worker

11. develop a return-to-work plan in liaison with injured worker, supervisor and workplace representative and, where appropriate, rehabilitation providers

12. meet with supervisors and co-workers to discuss the return-to-work program prior to, and at the time of, return to work

13. monitor an individual's return-to-work program to ensure it is effective, and to revise as necessary in consultation with the treating doctor and/or approved rehabilitation provider

14. make regular visits to the workplace, to support employees on a return-to-work program, and to counsel supervisors and other employees on the job to achieve their co-operation in ensuring the effectiveness of the injured person's return to work

15. in liaison with WHS Convener and senior managers, take steps to, as far as is practicable, prevent recurrence or aggravation of the injury on return to work

16. ensure confidentiality of personal information

17. RELATED POLICIES AND DOCUMENTS

- 791 - Claims Administration, Rehabilitation and Return To Work

- Attachment 1 - Guidelines for Administration of Claims

- Attachment 3 - Requirements for Claims Administration

- Attachment 4 - Requirements For Claims

- Attachment 5 - Risk management & Occupational Rehabilitation Program – Injury Management Procedure.

Policy Number:	791.3
Title:	Attachment 3 - Requirements for Claims Administration
Owner:	Executive Manager
Review Date:	January 2018 **Policy Risk Rating:** Low

1. **DEFINITIONS**

    1.1. **Minor Claim:** is a claim that has no more than $610 in medical expenses and/or no more than 10 working days absence from work. (current as at 23/8/2011)

    1.2. Standard Claim: has more than $610 in medical expenses and/or more than 10 days of lost time.

    1.3. Time Limits: an employer has 10 days from receipt of a valid claim to send the claim into the insurer. The insurer has 28 days from receipt of the claim to accept or deny the claim. (A worker could wait 38 days to know whether the claim is accepted.)

    1.4. Ordinary Time Earnings: the basic pay rate without allowances, overtime or penalty rates averaged over the 12 months prior to the injury.

2. **REQUIREMENTS**

    2.1. Minor Claim

        2.1.1. Employers are required to notify their insurer of all claims within 10 days of receipt of the claim. The minor claim form (pink copy) must be forwarded regardless of whether the excess limits ($610/10days) have been reached.

        2.1.2. It is the employer's responsibility to pay for the first $610 of medical expenses, and the first 10 days lost wages. When paying medical expenses, the employer should keep copies of all invoices, and pay only on item numbers and the appropriate amount for the item numbers as specified in the WorkCover Authority booklet entitled Maximum Payments for Medical Services. This is available from the authorised insurer. (Many doctors and service providers charge in excess of these amounts, but WorkCover will only allow the set amount. The employer could find themselves paying considerably more than $610 before WorkCover will take over the claim). When costs reach $610, copies of all paid invoices should be sent to the insurer.

        2.1.3. Once these limits have been reached, the claim becomes a Standard Claim, subject to time limits.

2.2. Disputing a Claim

 2.2.1. If the employer wishes to dispute a claim, the insurer must be notified within 10 days of receipt of the claim. Thus, in the case of a disputed claim, the time limits apply to an under excess claim. If a claim is disputed, it should be forwarded immediately and help sought from the insurer.

2.3. Standard Claim

 2.3.1. WorkCover reimburses employers for weekly compensation payments, and pays all reasonable medical expenses associated with the claim. Once the first $610 of medical expenses have been paid, the employer should pay no further expenses but send the invoices directly to the insurer, clearly marked with the claim number and name of worker.

2.4. Rehabilitation and Return to Work

 2.4.1. If an injury occurs in the workplace which incurs more than 20 working days absence, an Workplace rehabilitation program shall be put into place.

 2.4.2. A return-to-work plan is required for all workers whose injury involves days of total incapacity. However, regardless of days off work, it is recommended that a return-to-work plan is developed for all injured workers at the time of injury.

 2.4.3. A return-to-work plan must include the following:

- the name of the injured worker
- an estimate of the date that the injured worker should be fit to return to work (if possible)
- an offer of suitable employment (if possible)
- the steps to be taken to facilitate the worker's return to work
- specify any Workplace rehabilitation services that are reasonably necessary for the return to work and maintenance at work of the injured worker

 2.4.4. Victorian legislation requires that the poster 'How to make a claim' is displayed in the workplace.

3. RELATED POLICIES AND DOCUMENTS

- 791 - Claims Administration, Rehabilitation and Return To Work
- Attachment 1 - Guidelines for Administration of Claims
- Attachment 2 - Responsibility Statement for Rehabilitation/Return To Work Coordinator
- Attachment 4 - Requirements For Claims
- Attachment 5 - Risk management & Occupational Rehabilitation Program – Injury Management Procedure.

Policy Number:	791.4
Title:	Attachment 4 - Requirements for Claims
Owner:	Executive Manager
Review Date:	January 2018 **Policy Risk Rating:** Low

A claim for the weekly payments of compensation must have the following components:

1. REQUIREMENTS FOR A CLAIM FOR WEEKLY COMPENSATION PAYMENTS

1.1. A properly completed workers' claim form for compensation signed by the worker. The medical release authority must also be signed. This is a legal requirement and if not signed, the claim is invalid.

1.2. A properly completed medical Certificate of Work Capacity. No other variations of medical certificates are acceptable. The medical certificate MUST show a diagnosis, and an expected period of incapacity, which cannot be longer than 14 days. (Terminology such as 'Medical Condition' is unacceptable). The initial medical certificate must be completed by a medical practitioner. Certificates from chiropractors, osteopaths and physiotherapists are not acceptable to start off a claim, although they will be accepted after initial certification by a medical practitioner. Subsequent certificates may cover periods of incapacity up to 28 days.

2. REQUIREMENTS FOR A CLAIM FOR MEDICAL EXPENSES ONLY

2.1. A properly completed Workers Claim for Compensation form, including the medical release authority. A medical certificate is NOT required for medical expenses only.

3. A CLAIM INVOLVING INJURY FOLLOWING A MOTOR VEHICLE ACCIDENT

3.1. May be for:

3.1.1.   Lost time only, or

3.1.2.   Medical Expenses

3.2. Must include evidence that the accident was reported to the police.

4. RELATED POLICIES AND DOCUMENTS

- 791 - Claims Administration, Rehabilitation and Return To Work
- Attachment 1 - Guidelines for Administration of Claims
- Attachment 2 - Responsibility Statement for Rehabilitation/Return To Work Coordinator
- Attachment 3 - Requirements For Claims Administration
- Attachment 5 - Risk management & Occupational Rehabilitation Program – Injury Management Procedure.