

## **SCOPE**

This Procedure relates to all activities under the management and control of Monash University and applies to all affected workers; including staff, students, contractors and visitors.

For the purpose of this procedure, references to 'the University' includes activity at Monash University Australia, Monash University Malaysia, Monash University Indonesia, Monash Suzhou, the Monash University Prato Centre and World Mosquito Program Ltd (and its subsidiaries), unless indicated otherwise.

## PROCEDURE STATEMENT

The purpose of this procedure is to ensure all requirements associated with identifying and responding to hazards and incidents that occur as a result of Monash University activities are followed.

## Abbreviations

HSR	Health and Safety Representative	
OH&S	Monash Occupational Health and Safety team, led by the Health, Safety and Wellbeing Manager	
OHS	Occupational Health and Safety	
mSv	Millisievert	
MUOHSC	Monash University Occupational Health and Safety Committee	
S.A.R.A.H.	Computer software with the title acronym "Safety and Risk Analysis Hub"	

# 2. Reporting a Hazard or Incident

- 2.1 All persons engaged in activities that relate to Monash University must report, as soon as practicable, any hazards likely to present a risk of harm to any person via S.A.R.A.H. as outlined in Section 6. If there is an immediate risk of harm promptly notify as relevant:
  - Supervisor of impacted workers / emergency contact person for students;
  - Safety Officer of the area;
  - Health and Safety Representative (if elected);
  - OH&S; or
  - Monash Security.
- 2.2 All persons engaged in activities that relate to Monash University must immediately report any incidents (including near-misses) to:
  - Supervisor of impacted workers / emergency contact person for students;
  - Safety Officer of the area;
  - Health and Safety Representative (if elected);
  - OH&S:
  - Monash Security, where relevant; and
  - BPD, where relevant.



- 2.3 All persons engaged in activities that relate to Monash University must report, as soon as practicable, any incidents (including nearmisses) via S.A.R.A.H. as outlined in Section 6.
- 2.4 Any medical concerns or any form of unacceptable behaviour must be treated as confidential until the affected party indicates otherwise.
- 2.5 If the matter relates to an emergency incident, follow the <u>Emergency Management Procedure</u>.
- 2.6 If the matter relates to a security or serious behavioural incident, follow the Safety and Security Incident Reporting Procedure.
- 2.7 If the matter is not being adequately addressed or responded to in a reasonable time frame, follow the <u>Health and Safety Issue</u> Resolution Procedure.
- 2.8 Where the concern arises from the behaviour of the supervisor, the concern must be directed to a more senior member of staff.

## 3. Responding to a Hazard

- 3.1 Workers that have identified or have been notified of a hazard that presents an immediate risk of harm must:
  - Prevent any harm (e.g. evacuate people from the area, cease activities and isolate the affected area/s);
  - Directly neutralise the source of the hazard if safe to do so (e.g. use extinguisher on fire (if trained), use a spill kit etc.); and
  - Notify all relevant persons as noted in Section 2.1 and 2.2.
- For hazards that have been reported in S.A.R.A.H., the Person Responsible must develop an appropriate Action Plan, using the Hierarchy of Controls to determine a set of actions to address the hazard and prevent possible harm as noted in Section 7.2.

## 4. Responding to an Incident

- 4.1 Workers supervising activities must promptly evaluate potential hazards and the level of risk to themselves and those in the vicinity, and take immediate steps to:
  - 4.1.1 Address any immediate health and safety risk by:
    - Directly neutralising the source of the hazard if safe to do so (e.g. use extinguisher on fire, use a spill kit); and/or,
    - Preventing any further harm (e.g. providing first aid, evacuating people from the area, ceasing activities and isolating the affected area/s).
  - 4.1.2 Escalate control to the highest appropriate authority (e.g. Monash Security or Emergency Services).
  - 4.1.3 Secure (e.g. prevent unauthorised entry, post a "Keep Out" sign) and preserve the scene of any incident (e.g. prevent disturbance), that may subsequently require:
    - Incident notification to a Regulator; and/or
    - Police investigation.
  - 4.1.4 Notify all relevant persons as noted in Section 2.1 and 2.2.
- 4.2 Gather evidence to support any subsequent investigation (e.g. photographs, measurements, witness details).
- 4.3 Offer counselling if needed.

## Notifiable Incidents

- 5.1 Incident notification to a Regulator
  - 5.1.1 For hazards and incidents that may require notification to a Regulator (for example, WorkSafe Victoria), the Health, Safety and Wellbeing (OH&S) Manager or their delegate must be notified.
    - In Australia, where an incident occurs which may be notifiable to a Regulator, the Health Safety and Wellbeing (OH&S) Manager must be immediately notified by phone on 990 20222 or after hours by contacting Monash Security 990 27777.
    - At overseas locations, the local OH&S Manager or Chief Operations Officer should be notified immediately, who will subsequently notify the Health Safety and Wellbeing (OH&S) Manager.
- 5.2 Health or safety incident notification to WorkSafe Victoria (Victoria, Australia)

In the event of an incident occurring in Victoria, Australia, being notifiable under the Occupational Health & Safety Act 2004 (Vic) it is the responsibility of the Health, Safety and Wellbeing (OH&S) Manager to ensure that the Regulator (WorkSafe Victoria) has been notified of:

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- 5.2.1 A hazard or incident at a Monash controlled workplace which results in:
  - The death of a person
  - Medical treatment within 48 hours of exposure to a substance
  - Immediate treatment as an inpatient in a hospital
  - Immediate medical treatment for:
    - Amputation;
    - Serious head injury;
    - Serious eye injury;
    - Separation of skin from underlying tissue (degloving or scalping);
    - Electric shock;
    - Spinal injury;
    - Loss of bodily function, including loss of consciousness; or
    - Serious lacerations.
- 5.2.2 A situation that exposes a person to a serious risk to the person's health or safety emanating from an immediate or imminent exposure to:
  - The collapse, overturning, failure or malfunction of, or damage to, items of plant which are prescribed by the regulations or for which design registration is required;
  - The collapse or failure of an excavation or the shoring supporting an excavation;
  - The collapse or partial collapse of a building or structure;
  - An implosion, explosion or fire;
  - The escape, spillage or leakage of substances;
  - Objects or substances falling from a height; or
  - Electric shock.

## 5.3 Electrical incident notification to EnergySafe Victoria (Victoria, Australia)

In the event of an incident occurring in Victoria, Australia, being notifiable under the Electrical Safety (General) Regulations 2019 it is the responsibility of the Health, Safety and Wellbeing (OH&S) Manager to ensure that the Regulator (EnergySafe Victoria) has been notified where:

- 5.3.1 A serious electrical incident occurs (in consultation with Building Services Manager Electrical) that did or had the potential to cause:
  - Death or injury of a person;
  - Significant damage to property;
  - Serious risk to public safety;
  - Involves accidental contact with any electrical installation; or
  - Electric shock as a result of direct or indirect contact with any electrical installation.

#### 5.4 Gas incident notification to EnergySafe Victoria (Victoria, Australia)

In the event of an incident occurring in Victoria, Australia, being notifiable under the Gas Safety Act 1997 it is the responsibility of the Health, Safety and Wellbeing (OH&S) Manager to ensure that the Regulator (EnergySafe Victoria) has been notified where:

- 5.4.1 A serious gas incident occurs (in consultation with Building Services Manager Plumbing/Gas) that did or had the potential to cause:
  - The death or injury of a person;
  - Involves a transmission pipeline;
  - Significant disruption to the community;
  - Significant damage to property; or
  - An explosion.

## 5.5 Radiation incident notification to the Department of Health, Victoria (Victoria, Australia)

In the event of an incident occurring in Victoria, Australia, being notifiable under the Radiation Act 2005, it is the responsibility of the Health, Safety and Wellbeing (OH&S) Manager to ensure that the Regulator (Department of Health, Victoria) has been notified where:

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- 5.5.1 An incident involving Ionising Radiation results in:
  - An unplanned exposure of person to >1mSv;
  - The loss of control of a source;
  - A damaged or malfunctioning source;



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- An uncontrolled contamination; or
- A loss or theft of a source.

## 5.6 Environmental incident notification to the Environment Protection Authority, Victoria (Victoria, Australia)

In the event of an incident occurring in Victoria, Australia, being notifiable under the Environment Protection Act 2017, it is the responsibility of the Health, Safety and Wellbeing (OH&S) Manager to ensure that the Regulator (Environment Protection Authority, Victoria) has been notified where:

An incident results in an adverse effect on human health or the environment.

## 5.7 Incident notification in locations other than Victoria, Australia

In the event of an incident occurring at a workplace not located in Victoria, Australia, the local Regulator/Authority is to be notified as per the legislation in place for the jurisdiction. The local OH&S Manager, or where there is no local OH&S Manager, the Chief Operations Officer has the responsibility for ensuring notification occurs.

# 6. Reporting in S.A.R.A.H.

## 6.1 Hazard and Incident Report Entry

- 6.1.1 All hazards and incidents must be reported in the S.A.R.A.H. software system, accessed via the <a href="OH&S website">OH&S website</a> or through the <a href="my.monash">my.monash</a> portal, as soon as possible.
- 6.1.2 People who do not have access to S.A.R.A.H. must report through their Monash Supervisor, who must complete the S.A.R.A.H. report on their behalf.
- 6.1.3 Any person reporting a hazard or incident must:
  - Ensure that any descriptive information:
    - Is factual unless otherwise stated as purported, believed, or inferred;
    - Does not include personal information, including names and other personal identification, in any descriptive fields
      other than those explicitly requested (e.g. personal details when reporting on behalf of someone else) or integral to
      the completeness of the report;
  - Incidents containing issues of a confidential nature (e.g. private medical issues, unacceptable behaviour, unsafe driving on campus) must be listed as confidential when entered into S.A.R.A.H.; and
  - Provide relevant supporting documentation.
- 6.1.4 It is the responsibility of the Health, Safety and Wellbeing Manager to ensure that duplicate reports for the same incident are cancelled.

## 6.2 Assigning a 'Person Responsible'

- 6.2.1 Except for confidential reports, S.A.R.A.H. automatically assigns the Person Responsible to the Supervisor or Manager of the person entering the report. The Supervisor or Manager can transfer the report to a more suitable Person Responsible at any time.
- 6.2.2 If the assigned person anticipates a period of absence from the workplace, they must delegate to a suitable alternative.
- 6.2.3 A report may be assigned to the BPD role account (search for First Name: BPD) if the report relates to services and infrastructure managed by the Monash University Buildings and Property Division.
- 6.2.4 If the report is marked as "confidential", it is automatically forwarded directly to the Health, Safety and Wellbeing Manager, bypassing any other party, for triaging and transferring to the appropriate area for management.
- 6.2.5 The Person Responsible has one (1) week to submit an Action Plan after the report was submitted. A reminder with a grace period of another week is emailed to the Person Responsible if an Action Plan is not entered. Unless an action plan has been submitted within two weeks of the date the report was sent, it escalates to the performance manager of the Person Responsible. Subsequent escalation will continue every two weeks until an action plan has been submitted.

### 6.3 Granting Additional Access to View Reports

- 6.3.1 The person assigned responsibility for the report, the relevant OHS Consultant/Advisor, or the Health, Safety and Wellbeing Manager may invite relevant stakeholders to have view only access to any report except confidential reports. Health and Safety Representatives (HSRs) may be invited by the affected person to view the report if the affected person consents.
- 6.3.2 Except for confidential reports, all reports can be viewed by any manager or supervisor of the current Person Responsible and their appointed Safety Officers and Local OHS Committee Chairs.

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## 7. Incident Investigation

## 7.1 Initial Investigation

- 7.1.1 All incident reports must be investigated by the Person Responsible with the assistance of the Safety Officer and Health and Safety Representative (when applicable), who must ensure that:
  - All information gathered is treated as confidential until otherwise stated by the person providing the information.
  - So far as is reasonable, information contained within the report is a true and accurate reflection of the incident.
  - Any significant changes to an investigation report are confirmed with stakeholders in accordance with the requirements of the OHS Consultation Procedure.
  - A risk assessment (refer to <u>OHS Risk Management Procedure</u>) is completed if:
    - A hazard arising from an activity presents an unacceptable level of risk; or,
    - An incident occurs that identifies inadequacies in the existing control measures for an activity.
- 7.1.2 The Health, Safety and Wellbeing Manager must monitor information provided through hazard or incident reports; and they, or their delegate, may update any information that is incorrect or unclear.
- 7.1.3 All Monash- engaged workers must cooperate with an OHS investigation.

#### 7.2 **Develop Action Plan**

- 7.2.1 The Person Responsible must ensure that the findings of the initial investigation are documented in the hazard or incident report's Action Plan. Actions (tasks) must be assigned to a person with the capacity and authority to take action in accordance with the <a href="Management of OHS Actions Procedure">Management of OHS Actions Procedure</a>. As part of the Action Plan, consideration should be given to including a task to review the effectiveness of the actions once these have been implemented.
- 7.2.2 Actions that directly relate to infrastructure and services performed by the Monash University Buildings and Property Division may be assigned to the BPD role account (by searching for 'BPD' in the first name).

## 7.3 Further investigation – basic incident investigation

- 7.3.1 If the inherent risk of the hazard is rated high or extreme, then further investigation needs to be undertaken as soon as possible. This can be achieved by selecting the "Investigate" icon in S.A.R.A.H.
- 7.3.2 The Person Responsible must ensure that an additional investigation is conducted.
- 7.3.3 The Health, Safety and Wellbeing (OH&S) Manager or their delegate may request a further investigation be conducted.
- 7.3.4 Where any stakeholder feels that there has been an insufficient level of investigation, that person may choose to follow the Health and Safety Issue Resolution Procedure.

#### 7.4 Conducting a basic investigation

- 7.4.1 A basic investigation must be led by an investigator with Safety Officer training certification, with the assistance of the OHS Consultant/Advisor for the area and the Health and Safety Representative, as appropriate.
- 7.4.2 The investigator may establish a team that includes persons with relevant knowledge and experience. The sequence of events that occurred prior, during and after the hazard or incident should be identified, along with:
  - Any corresponding hazards;
  - The nature of any injury or affliction that was sustained as a result;
  - Identification of any contributing factors and any procedural non-conformity or deficiency;
  - Consulting with stakeholders to ensure information is consistent within the workplace in line with <a href="OHS Consultation">OHS Consultation</a> <a href="Procedure">Procedure</a>; and

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Recommended controls to address any identified non-conformity or deficiencies.

Recommendations must be addressed in accordance with the Management of OHS Actions Procedure.

- 7.4.3 Any incident that is caused by a hazard that is deemed to present a significant risk, or where an external investigation is undertaken, shall be investigated by the Health, Safety and Wellbeing Manager or their delegate.
- 7.4.4 The findings of any additional investigations must be recorded by the investigator in S.A.R.A.H. using the investigate function.



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## 7.5 Further investigation – major incident investigation

- 7.5.1 The Health, Safety and Wellbeing (OH&S) Manager may initiate an additional investigation of an incident, including in situations where the incident is of significant complexity, is notifiable to a Regulator, is in a specialist area or has organisational wide relevance or consequence.
- 7.5.2 This investigation may be completed by a member of the OH&S team with appropriate training and experience or an external investigator.
- 7.5.3 Where any stakeholder feels that there has been an insufficient level of investigation, that person may choose to follow the Health and Safety Issue Resolution Procedure.

#### 7.6 Hazard alerts

7.6.1 The Health, Safety and Wellbeing (OH&S) Manager will determine if a Hazard Alert or other communication to the University community is relevant to impart learnings or provide education regarding a particular hazard or incident that has organisation-wide application or relevance.

## 7.7 Closing Reports

- 7.7.1 Recommendations can continue to be developed throughout the investigation process.
- 7.7.2 The report is considered closed once all recommendations have been addressed and identified risks mitigated in accordance with the requirements of the Management of OHS Actions Procedure.
- 7.7.3 The report may be reopened if additional information is found or additional recommendations are made.

# 8. Monitoring the Effectiveness of Controls/Actions

- 8.1 An important part of the process of investigating hazard reports, incidents or near misses is to ensure that the action(s) put in place to control the hazards or risks are effective and maintained.
- 8.2 OHS Spot checks, Workplace inspections and OHSMS self-assessments are used to check that actions/controls have been maintained and are effective in reducing the likelihood or consequence of the risks identified in the investigation.
- 8.3 In particular, the Safety Officer and local OHS committees must periodically review the control effectiveness of actions, following any significant incident or the identification of high-risk activities.

## 9. Tools

9.1 The following tool is associated with this procedure:

How to report an OHS hazard or incident - guidance material

## 10. Records

#### 10.1 Database

- OH&S is responsible for ensuring that all hazard and incident reports involving Monash University workers, students or
  property, or other persons or property for which the University has a legislative responsibility are maintained in the
  S.A.R.A.H. software system.
- In accordance with the OHS Records Management Procedure, hazard and incident reports will be retained indefinitely.
- OH&S will use the data to:
  - Plan health and safety programs and initiatives;
  - Monitor the effectiveness of corrective/preventive actions;
  - Produce reports and dashboards, including hazard and incident statistics and trends;
  - Disseminate information relating to hazards and incidents and their prevention to MUOHSC and other relevant sections
    of the University community;

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Meet statutory record-keeping requirements.



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# **DEFINITIONS**

A comprehensive list of definitions is provided in the <u>Definitions tool</u>. Definitions specific to this procedure are provided below.

Key word	Definition	
Acceptable Risk	A level of risk that under the circumstances, is reasonably practicable to accept.	
Emergency Incident	A significant event arising from an internal or external source, which poses a high level of risk to the health and safety of persons and requires immediate response.	
Hazard	A source with a potential to cause injury and ill health.	
Hazard report	Documented evidence of the identification of a hazard, the background and details of how the hazard was identified, and any subsequent action taken to subsequently reduce risk.	
Incident report	Documented evidence of an injury or near-miss, the background and details of the incident, and any subsequent action(s) taken to prevent a recurrence.	
Incident	Occurrence arising out of, or in the course of, work that could or does result in injury and ill health. Incidents are categorised as:	
	<ul> <li>Near Miss: A near miss is defined as any occurrence that might have led to injury or illness to a person.</li> </ul>	
	<ul> <li>Injury and ill health - Adverse effect on the physical, mental or cognitive condition of a person.</li> <li>Injuries and ill health are further classified as:</li> </ul>	
	1.1 <b>No lost time</b> : Less than a complete day was lost from work as a result of the injury;	
	1.2 <b>Lost time</b> : A complete day or more was lost from work as a result of the injury.	
Operational Manager/Supervisor	A worker assigned to manage a set of activities grouped around an operational requirement (e.g. laboratory manager, event manager, course convener).	
Notifiable Incident	Serious incidents, which, in accordance with legislative obligations, are required to be reported to the Regulator.	
Person Responsible	A person assigned the responsibility of ensuring that a hazard or incident report has been appropriately managed.	
Performance Manager/Supervisor	A worker assigned to manage the performance of a worker or group of workers.	
Reasonably Practicable	Reasonably practicable is defined in OHS legislation as having regard to the following:	
	<ul> <li>The likelihood of the hazard or risk concerned eventuating;</li> <li>The degree of harm that would result if the hazard or risk eventuated;</li> <li>What the person concerned knows, or ought to reasonably know, about the hazard or risk and any ways of eliminating or reducing the hazard or risk;</li> <li>The availability and suitability of ways to eliminate or reduce the hazard or risk; and</li> <li>The cost of eliminating or reducing the hazard or risk.</li> </ul>	
Unacceptable behaviour	Behaviour that has created or has the potential to create a risk to a staff member's health and safety. Examples of unacceptable behaviour include, but are not limited to:	
	<ul> <li>Bullying</li> <li>emotional, psychological or physical violence or abuse</li> <li>occupational violence</li> <li>coercion, harassment and/or discrimination</li> <li>aggressive/abusive behaviour</li> <li>unreasonable demands and undue persistence</li> <li>disruptive behaviour.</li> </ul>	

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# **GOVERNANCE**

Parent policy	OHS&W Policy	
Supporting procedures	Monash University OHS documents  Emergency Management Procedure Health and Safety Issue Resolution Procedure Management of OHS Actions Procedure Managers and Supervisors Guide to Online Hazard & Incident Reporting OHS Consultation Procedure OHS Records Management Procedure OHS Roles, Responsibilities and Committees Procedure	
Supporting schedules	N/A	
Associated procedures	Australian and International Standards ISO 45001:2018 Occupational Health and Safety Management Systems	
Related Legislation  Electrical Safety (General) Regulations 2019  Environment Protection Act 2017  Gas Safety Act 1997  Occupational Health and Safety Act 2004 (Vic)  Radiation Act 2005		
Category	Operational	
Approval	Chief Operating Officer & Senior Vice-President 14 December 2022	
Endorsement	Monash University OHS Committee 1 December 2022	
Procedure owner	Health, Safety and Wellbeing Manager	
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Review date	December 2025	
Version	9.0	
Content enquiries	ohshelpline@monash.edu	



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# **DOCUMENT HISTORY**

Version	Date Approved	Changes made to document
5	August 2013	Hazard and Incident Reporting, Investigation and Recording Procedure
5.1	February 2015	<ol> <li>Removed all references and links to the Hazard and Incident report form and replaced with "online hazard and incident report in S.A.R.A.H.</li> <li>Added S.A.R.A.H. to Abbreviations section</li> <li>Removed all reference to maintaining hardcopies of incidents, as all will be retained in S.A.R.A.H. indefinitely.</li> <li>Added link to Definitions tool.</li> <li>Added "Compliance section"</li> <li>Updated "Tools section"</li> </ol>
5.2	July 2015	Updated hyperlinks throughout procedure to new OH&S website.
6	September 2017	<ol> <li>Added investigation requirements if risk is rated as high or extreme</li> <li>Replaced reference to VWA with 'the Regulator' throughout the document.</li> </ol>
6.1	May 2018	Changed Director, Audit & Risk Management to Director, Internal Audit.
7.0	July 2020	<ol> <li>Renamed procedure to 'Managing OHS Hazards and Incidents Procedure'.</li> <li>Added sections outlining the procedure to raise an alarm and respond in the event of a hazard being identified or an incident occurring.</li> <li>Replaced supervisor with Person Responsible for the purposes of managing hazard and incident reports</li> <li>Clarified what information is required when submitting a report</li> <li>Clarified how reports are submitted for workers without access to S.A.R.A.H.</li> <li>Added section outlining how to allow additional access to view reports.</li> <li>Split investigation into initial and further investigation and detailed the appropriate process to follow for each.</li> <li>Added section outlining the procedure to close a hazard or incident report.</li> <li>Added notification requirements for Energy Safe Victoria and Department of Health and Human Services</li> </ol>
7.1	July 2021	<ol> <li>Updated certification logo in footer to ISO 45001</li> <li>Updated the Standard to ISO 45001 under "Associated procedures" in the Governance table</li> <li>Updated OHS Policy under 'Parent Policy' to OHS&amp;W Policy</li> </ol>
7.2	October 2021	Updated Scope statement to include Monash University Malaysia, Monash University Indonesia, Monash Suzhou and the Monash University Prato Centre.
7.3	December 2021	<ol> <li>Updated Scope statement to include World Mosquito Program Ltd (and its subsidiaries).</li> <li>Changed "Manager, OH&amp;S" to "Health, Safety and Wellbeing Manager" throughout.</li> <li>Updated title of Procedure owner in Governance table.</li> </ol>
8.0	October 2022	<ol> <li>Clarified reporting requirements for hazards and incidents (2.1-2.3).</li> <li>Added reference to 'Safety and Security Incident Reporting Procedure' (2.6)</li> <li>Added separate sections for 'Responding to a Hazard' (Section 2) and 'Responding to an Incident' (Section 3).</li> <li>Changed contact methods following a notifiable incident and added information regarding non-Victorian locations (5.1)</li> <li>Updated incident notification requirements to reflect current legislative requirements in OHS Act (5.2)</li> </ol>



Version	Date Approved	Changes made to document
		<ol> <li>Added incident notification to the EPA (5.6)</li> <li>Added note regarding incident notification in locations other than Victoria (5.7)</li> <li>Re-titled Section 6 to 'Reporting in S.A.R.A.H.' and re-structured subsequent sections (6.1-6.3).</li> <li>Re-titled 7.2 to 'Develop Action Plan' and added reference to including a task to review the effectiveness of the actions once these have been implemented.</li> <li>Introduced 'basic' and 'major' incident investigation types (7.3-7.6)</li> <li>Added hazard alert section (7.6.1)</li> <li>Included dashboard as a use for information (9.1).</li> <li>Updated Related Legislation in Governance table.</li> </ol>
9.0	December 2022	<ol> <li>Added Section 8 – Monitoring the effectiveness of controls/actions.</li> <li>Changed 'staff' to 'workers' throughout, where appropriate.</li> <li>Clarified in 3.1 and 4.1.4 that all relevant persons as noted in Section 2.1 and 2.2 must be notified.</li> </ol>

