MANAGING OHS HAZARDS AND INCIDENTS PROCEDURE

SCOPE

This Procedure relates to all activities under the management and control of Monash University and applies to affected 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 and the Monash University Prato Centre, 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.

1. Abbreviations

<table>
<thead>
<tr>
<th>Abbreviation</th>
<th>Description</th>
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<tbody>
<tr>
<td>HSR</td>
<td>Health and Safety Representative</td>
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<tr>
<td>OH&amp;S</td>
<td>Monash Occupational Health and Safety</td>
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<td>OHS</td>
<td>Occupational Health and Safety</td>
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<tr>
<td>MUOHSC</td>
<td>Monash University Occupational Health and Safety Committee</td>
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<td>S.A.R.A.H</td>
<td>Safety and Risk Analysis Hub</td>
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2. Raising an Alert regarding a Hazard or Incident

2.1 All persons engaged in activities that relate to Monash University must alert, as soon as practicable, the activity supervisor about hazards arising from work practices that present or are likely to present an unacceptable risk of harm to any person. Reports about hazards should emphasise the facts, as they are known to the person(s) reporting.

2.2 Any medical concerns or any form of unacceptable behaviour must be treated as confidential until the affected party indicates otherwise.

2.3 If the alert relates to an emergency incident, follow the Emergency Management Procedure.

2.4 If the matter is not being adequately addressed or responded to in a reasonable time frame, follow the Health and Safety Issue Resolution Procedure.

2.5 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 Incidents

3.1 Staff supervising activities must promptly evaluate the level of risk to themselves and those in the vicinity, and take immediate steps to:

3.2 Address any immediate welfare concerns by:
a) Directly neutralising the source of the threat (e.g. use extinguisher on fire, use a spill kit); and/or,

b) Preventing any further harm to workers (apply first aid, evacuating people from the area, ceasing activities and isolating the affected area/s).

3.3 Escalate control to the highest appropriate authority;

3.4 Secure (e.g. prevent unauthorised entry) and preserve (e.g. prevent disturbance) the scene of any incident that may subsequently require:
   a) Incident notification to the Regulator (See 4.2);
   b) Police investigation.

3.5 Gather evidence to support any subsequent investigation (e.g. photographs, witness details);

3.6 Offer counselling if warranted.

4. Reporting Hazards and Incidents

4.1 Hazard and Incident Report Entry
   4.1.1 For hazards and incidents that may require notification to the Regulator (WorkSafe), the Manager, OH&S or their delegate must be notified by contacting the ohshelline@monash.edu, or phone 990 20222.
   4.1.2 All hazards and incidents must be reported in S.A.R.A.H., accessed via the OH&S website or through the my.monash portal, as soon as possible.
   4.1.3 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.
   4.1.4 Any person reporting a hazard or incident must:
      ● Ensure that any descriptive information:
        o Is factual unless otherwise stated as purported, believed, or inferred;
        o 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.
   4.1.5 It is the responsibility of the Manager, OH&S to ensure that duplicate reports for the same incident are cancelled.

4.2 Notification to the Regulator
   It is the responsibility of the Manager, OH&S to ensure that the Regulator (WorkSafe) has been notified where:
   4.2.1 A hazard or incident at a Monash controlled workplace in:
      ● Immediate treatment for:
        o amputation;
        o serious head injury;
        o serious eye injury;
      ● Separation of skin from underlying tissue (de-gloving or scalping);
      ● Electric shock;
      ● Spinal injury;
      ● Loss of bodily function, including loss of consciousness;
      ● Serious lacerations; and
      ● Dangerous occurrences.
   4.2.2 A situation that exposes a person in the immediate vicinity to an immediate health and safety risk through incidents including:
      ● Collapse, overturning, failure or malfunction of, or damage to, items of plant required to be licensed or registered;
      ● Collapse or failure of an excavation or the shoring supporting of excavation;
● Collapse or partial collapse of a building or structure;
● Implosion, explosion or fire;
● Escape, spillage or leakage of substances; and
● Objects or substances falling from a height.

It is the responsibility of the Manager, OH&S, to ensure to ensure that EnergySafe Victoria has been notified where:

4.2.3 A serious electrical incident occurs (in consultation with Building Services Manager - Electrical) that did or has the potential to:
● death or injury to a person
● significant damage to property
● serious risk to public safety
● involves accidental contact with any electrical installation
● electric shock as a result of direct or indirect contact with any electrical installation.

4.2.4 A serious gas incident occurs (in consultation with Building Services Manager - Plumbing/Gas)
● the death or injury to a person
● involves a transmission pipeline
● causes significant disruption to the community
● significant damage to property
● an explosion.

4.2.5 It is the responsibility of the Manager, OH&S, to ensure to ensure that the Department of Health and Human Services (Victoria) has been notified where 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;
● An uncontrolled contamination; or
● A loss or theft of a source.

5. Assigning a ‘Person Responsible’

5.1 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.

5.2 If the assigned person anticipates a period of absence from the workplace, they must delegate to a suitable alternative.

5.3 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. If the report is marked as “confidential”, it is automatically forwarded directly to the Manager, OH&S, bypassing any other party, for triaging and transferring to the appropriate area for management.

5.4 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. Granting Additional Access to View Reports

6.1 The person assigned responsibility for the report, the relevant OHS Consultant/Advisor, or the Manager, OH&S 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.

6.2 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.

6.3 For reports marked as “confidential”, The Manager, OH&S may grant additional access only upon the consent of the affected person.

7. Investigation
7.1 Initial Investigation

7.1.1 All reports must be investigated by the Person Responsible, 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 OHS Risk Management Procedure) 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 Manager, OH&S 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 Recommendations

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. Recommendations must be assigned to a person with the capacity and authority to take action in accordance with the Management of OHS Actions Procedure.

7.2.2 Recommendations 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 Determining whether to investigate further

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 if deemed necessary.

7.3.3 The Manager, OH&S or their delegate may request 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 an additional investigation

7.4.1 Additional investigations must be led by an investigator with safety officer training certification.

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.

- Any corresponding hazards.
- The nature of any injury or affliction that was sustained as a result.
- Identify any contributing factors and any procedural non-conformity or deficiency.
- Consult with stakeholders to ensure information is consistent within the workplace in line with OHS Consultation Procedure.
- 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 deemed to present a significant risk, or where an external investigation is undertaken, shall be investigated by the Manager, OH&S 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.

7.5 Closing Reports

7.5.1 Recommendations can continue to be developed throughout the investigation process.

7.5.2 The report is considered closed once all recommendations have been addressed in accordance with the requirements of the Management of OHS Actions Procedure.

7.5.3 The report may be reopened if additional information is found or additional recommendations are made.
8. **Tools**

8.1 The following tool is associated with this procedure:

Managers and Supervisors Guide to online Hazard & Incident reporting

9. **Records**

9.1 **Database**

- OH&S is responsible for ensuring that all hazard and incident reports involving Monash University staff, students or property, or other persons or property for which the University has a legislative responsibility are maintained in S.A.R.A.H.
- 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 quarterly reports on hazard and incident statistics and trends for management and local OHS committees;
  - Disseminate information relating to hazards and incidents and their prevention to MUOHSC and other relevant sections of the University community;
  - Meet statutory record-keeping requirements.

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### DEFINITIONS

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

<table>
<thead>
<tr>
<th>Key word</th>
<th>Definition</th>
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<tbody>
<tr>
<td>Acceptable Risk</td>
<td>A level of risk that under the circumstances, is reasonably practicable to accept.</td>
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<tr>
<td>Emergency Incident</td>
<td>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.</td>
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<tr>
<td>Hazard</td>
<td>A source with a potential to cause injury and ill health.</td>
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<tr>
<td>Hazard and Incident reports</td>
<td>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.</td>
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</table>
| 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:
- Near Miss: A near miss is defined as any occurrence that might have led to injury or illness to a person.
- Injury and ill health - Adverse effect on the physical, mental or cognitive condition of a person. Injuries and ill health are further classified as:
  - No lost time: Less than a complete day was lost from work as a result of the injury;
  - Lost time: A complete day or more was lost from work as a result of the injury. |
| Operational Manager | 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 | 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:
- The likelihood of the hazard or risk concerned eventuating;
- The degree of harm that would result if the hazard or risk eventuated; |
● 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;
● The availability and suitability of ways to eliminate or reduce the hazard or risk; and
● The cost of eliminating or reducing the hazard or risk.

**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:

- Bullying
- Emotional, psychological or physical violence or abuse
- Occupational violence
- Coercion, harassment and/or discrimination
- Aggressive/abusive behaviour
- Unreasonable demands and undue persistence
- Disruptive behaviour.

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**GOVERNANCE**

<table>
<thead>
<tr>
<th>Parent policy</th>
<th>OHS&amp;W Policy</th>
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| Supporting procedures | Monash University OHS documents  
  Emergency Management Procedure  
  Health and Safety Issue Resolution Procedure  
  OHS Roles, Responsibilities and Committees Procedure  
  Management of OHS Actions Procedure  
  OHS Consultation Procedure  
  OHS Records Management Procedure  
  Managers and Supervisors Guide to Online Hazard & Incident Reporting |
| Supporting schedules | N/A |
| Associated procedures | Australian and International Standards  
| Related Legislation | Occupational Health and Safety Act 2004 (Vic) |
| Category | Operational |
| Approval | Chief Operating Officer & Senior Vice-President  
  13 July 2020 |
| Endorsement | Monash University OHS Committee  
  23 June 2020 |
<p>| Procedure owner | Manager, OH&amp;S |
| Date effective | July 2020 |
| Review date | 2023 |
| Version | 7.2 (Minor amendments effective 4 October 2021) |
| Content enquiries | <a href="mailto:ohshelpline@monash.edu">ohshelpline@monash.edu</a> |</p>
<table>
<thead>
<tr>
<th>Version</th>
<th>Date Approved</th>
<th>Changes made to document</th>
</tr>
</thead>
<tbody>
<tr>
<td>5</td>
<td>August 2013</td>
<td>Hazard and Incident Reporting, Investigation and Recording Procedure</td>
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</tbody>
</table>
| 5.1     | February 2015| 1. 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.”  
2. Added S.A.R.A.H. to Abbreviations section  
3. Removed all reference to maintaining hardcopies of incidents, as all will be retained in S.A.R.A.H. indefinitely.  
4. Added link to Definitions tool.  
5. Added “Compliance section”  
6. Updated “Tools section” |
| 5.2     | July 2015    | 1. Updated hyperlinks throughout procedure to new OH&S website. |
| 6       | September 2017| 1. Added investigation requirements if risk is rated as high or extreme  
2. Replaced reference to VWA with ‘the Regulator’ throughout the document. |
| 6.1     | May 2018     | 1. Changed Director, Audit & Risk Management to Director, Internal Audit. |
| 7.0     | July 2020    | 1. Renamed procedure to ‘Managing OHS Hazards and Incidents Procedure’.  
2. Added sections outlining the procedure to raise an alarm and respond in the event of a hazard being identified or an incident occurring.  
3. Replaced supervisor with Person Responsible for the purposes of managing hazard and incident reports  
4. Clarified what information is required when submitting a report  
5. Clarified how reports are submitted for workers without access to S.A.R.A.H.  
6. Added section outlining how to allow additional access to view reports.  
7. Split investigation into initial and further investigation and detailed the appropriate process to follow for each.  
8. Added section outlining the procedure to close a hazard or incident report.  
9. Added notification requirements for EnergySafe Victoria and Department of Health and Human Services |
| 7.1     | July 2021    | 1. Updated certification logo in footer to ISO 45001  
2. Updated the Standard to ISO 45001 under “Associated procedures” in the Governance table  
3. Updated OHS Policy under ‘Parent Policy’ to OHS&W Policy |
| 7.2     | October 2021 | 1. Updated Scope statement to include Monash University Malaysia, Monash University Indonesia, Monash Suzhou and the Monash University Prato Centre. |