

**DIVISION OF ACADEMIC AND STUDENT ENGAGEMENT
HEALTH, SAFETY AND WELLBEING COMMITTEE
MEETING 01/19**

A meeting of the Divisional Health, Safety and Wellbeing Committee will be held in the **Cog, Meeting Room 704**, L7, Hughes Building on **Monday 18 February 2019 at 1:00 pm**

AGENDA

- 1. Welcome and Apologies – Kurna Acknowledgement**
- 2. Confirmation of Minutes**
- 3. Outstanding Actions**
- 4. Safety Performance of the Division**
 - *Report from central HSW Team*
 - *Safety Review's (noting that safety reviews are only undertaken for inherently high or very high risk activity to review how the controls are being implemented and the safety processes adhered to)*
- 5. Questions or issues arising from item 4**
- 6. Effectiveness of safety processes in the Division**
 - *Divisional HSW Plans - (including whether the Training Plans and SPEs are on track)*
- 7. Monitoring Divisional safety processes that need noting or discussion**
- 8. Key incidents for noting**
- 9. Are there any safety concerns that staff representative want to raise?**
- 10. Key changes to Divisional safety processes that need noting or discussion?**
- 11. Is there anything that we need to communicate to the wider Division?**
- 12. Next Meeting**

The next meeting will be held on Tuesday 21 May at 2:00pm in the Hub Central Seminar Room, L3 The Hub.

ROSEMARY GIBBON
Executive Support

Distribution:

Mr Dave Lamb, Executive Director, Division of the DVC&VP(A) Convenor)
Ms Jill Allen, Student Life
Mr Augustine Bhaskarraj, Student Life (International Student Support)
Ms Linda Brook, Student Recruitment and Admissions Services
Ms Janette Carter, Learning and Quality Support
Ms Maxine Coffey, Ask Adelaide
Ms Joanne Corbett, Elder Music Library
Mr Jorge Contreras, Accommodation Services
Ms Eleanor Di Guglielmo, Pro Vice-Chancellor (SL)
Ms Phoebe Huang, Careers Service
Ms Lauren Morand, PCE
Ms Toni Norris, Children's University
Mr Rod O'Brien, Wirtu Yarlou
Mr Paul Roberts, Faculty / Divisional HSW Manager
Mr Fred Rochler, Student Administration
Ms Rose-Marie Vasiljuk Barr Smith Library

For Information only

Mr Ray Ash, Director, Student Recruitment and Admissions Services
Mrs Clara Barbieri, Director, Learning & Quality Support
Ms Teresa Chitty, University Librarian
Mr Geoff Denison, Associate Director, Accommodation Services
Ms Siobhan Guy, Manager, Student Administration
Ms Kiri Hagenus, Director, Children's University Australia
Prof Shane Hearn, Dean Indigenous Research and Education
Ms Susan Hervey, Manager, Careers Service
Prof Phil Levy, Pro Vice-Chancellor, Student Learning
Ms Colleen Lewig, Manager, Counselling, Disability & Elite Athle Service
Ms Mel Officer, Acting Manager, Ask Adelaide
Ms Jo Simpson, Director, PCE
Mr Ian Thomson, Associate Director, Student Experience Improvement & Manager Hub Central

Mr Nick Vozzo, Student Recruitment and Admissions Services
Ms Tuila Wells, Counselling & Disability Service

FOR APPROVAL

MINUTES OF MEETING 04/18

A meeting of the Divisional Health, Safety and Wellbeing Committee was held in the **Student Services Seminar Room** at **2:00pm** on **Tuesday 23 October 2018**.

Present:

Mr Dave Lamb, Executive Director, Division of the DVC&VP(A) (Convenor)
 Ms Jill Allen, Student Life
 Mr Augustine Bhaskarraaj, Student Life (International Student Support)
 Ms Linda Brook, Student Recruitment and Admissions Services
 Ms Maxine Coffey, Ask Adelaide
 Mr Cameron Day, Wirritu Yarlur
 Ms Eleanor Di Guglielmo, Pro Vice-Chancellor (SL)
 Ms Lauren Morand, PCE
 Mr Paul Roberts, Faculty / Divisional HSW Manager
 Ms Rose-Marie Vasiljuk Barr Smith Library

Apologies Received:

Ms Janette Carter, Learning and Quality Support
 Ms Joanne Corbett, Elder Music Library
 Mr Jorge Contreras, Accommodation Services
 Ms Toni Norris, Children's University
 Ms Carmel Parsons, Counselling & Disability Service
 Mr Fred Rochler, Student Administration
 Mr Nick Vozzo, Student Recruitment and Admissions Services
 Ms Tuila Wells, Careers Service

Proxies: Nil

In Attendance: Amy Barnett, EA

1 Welcome and Apologies

Apologies and proxies were noted as above.

2 Confirmation of Minutes

Minutes of the meeting held on 14 August were accepted.

3 Outstanding Actions

All outstanding actions from previous meetings have been completed.

4 Safety Performance of the Division

Paul advised of changes to performance under the new UniSpace system as opposed to RMSS. Under RMSS reported incidents were recorded against the individual that reported them and assigned to that individual's work area. Now, with UniSpace, incidents are assigned to the work areas responsible for the relevant issue. As such, DASE incidents have gone down as they are being assigned to the responsible area. However, reporting of incidents from DASE staff has risen.

5 Questions or issues arising from item 4

No items or questions were raised.

6 Effectiveness of safety processes in the Division

Rose-Marie raised that reporting in UniSafe does not give staff confirmation of their submitted report or allow them to view reports they've made. This was flagged as an issue due to the lack of confirmation that something has been successfully reported. Paul explained that in the current reporting process they do not automate confirmations but it is expected that a HSWO should contact the reporter of each incident. Within 48 hours, reporters should be receiving a follow up phone call from a HSWO.

7 Monitoring Divisional safety processes that need noting or discussion

Paul advised that items to monitor in SPE and training plans include; that first aid certificates are valid, that first aid kits are checked, that there are enough fire wardens for the area, and if any specialist/local training needs attention. Paul noted that the upgrade to credential management in SSO is nearly complete.

Rose-Marie enquired about process when staff first aid certificates have expired. Paul advised that while there is no legal consequences for that person to render first aid, it is advisable to take them off first aid duties until a valid certificate is obtained. Paul also explained that the University has an obligation to provide first aid representatives for each area.

8 Key incidents for noting

Paul noted that there had been previous issues with lighting and stairways. Paul advised the group that Infrastructure Branch does not conduct a regular audit on lighting or stairways and as such they are reliant on staff to report any issues to them. UniSafe allows for the submission of photos with reports which will give further clarity to the location and nature of issues.

9 Are there any safety concerns that staff representative want to raise?

Augustine advised of issues with dust remaining after the level five and six restroom upgrades. Dust from these building works has not been cleared since construction finished and is causing health issues such as allergies for staff. Augustine advised that the issue has been raised with maintenance and is expected to be resolved; either by maintenance or by the construction.

Dave asked the group if they have observed any issues with pathways being obstructed due to the restroom upgrades. The group advised that pathways are narrower but that staff and volunteers are using alternate paths via elevators to avoid the area. Maxine explained that Helen Halliday is happy to take calls on issues with construction if needed (helen.halliday@adelaide.edu.au). Paul added that project managers rely on staff to report back issues/concerns and that all reports are welcome.

Linda noted that level 4 of the Wills/Hughes where the toilet is being refurbished was gritty and slippery as well.

Augustine noted that in their workspace there is a sliding glass door that is difficult to see during the day which could be a safety issue. Augustine explained that they are looking into getting visual indicators added to the glass door and enquired about how this should be managed. Paul advised that maintenance services has guidelines for these signs and should be able to assist.

10 Key changes to Divisional safety processes that need noting or discussion?

Dave noted that the Royal Croquet Club will be coming onto campus for the Fringe. Paul explained that they are working with the RCC to ensure that University safety standards are met during the time that RCC is on campus.

11 Is there anything that we need to communicate to the wider Division?

No communications were noted.

12 Next Meeting

Dates for next year to be advised. Dave thanked the group for their continued effort in the HSW space.



DASE HSW Report

Human Resources
Division of University Operations

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To Prof. Pascale Questor, Deputy Vice Chancellor & President

Cc Dave Lamb Chair DASE HSW Committee

From Paul Roberts, Senior HSW Advisor

Subject 1st HSW Report – 2019

Date 7th January, 2019 Ref

This report is prepared by the Senior HSW Advisor for the Divisional HSW Committee based on the data within UniSafe, HSW Internal Audit outcomes and workers compensation data. The intention of the report is to enable discussion by the Divisional HSW Committee of the safety outcomes for the Division.

1. UniSafe Safety Reporting Data

DASE had a low HSW incident reporting rate for 2018 which was comparable to DRI, VC&P, Arts and Professions. This is in line with the hazard profile for the Division. The only Branch that reported multiple HSW incidents was Learning & Quality Support.

Table 1

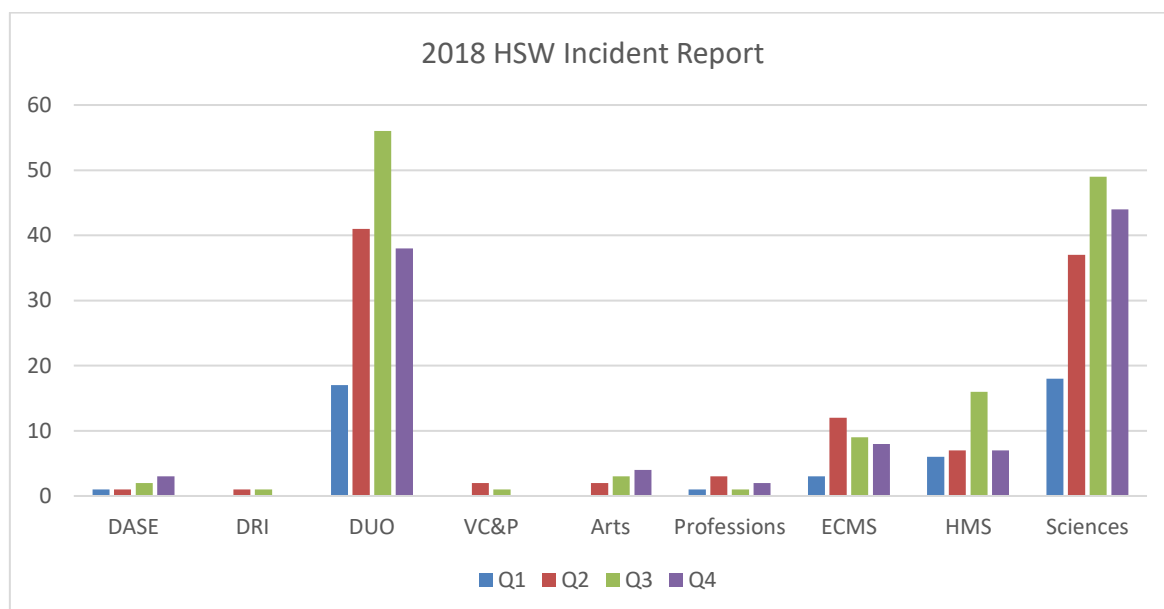
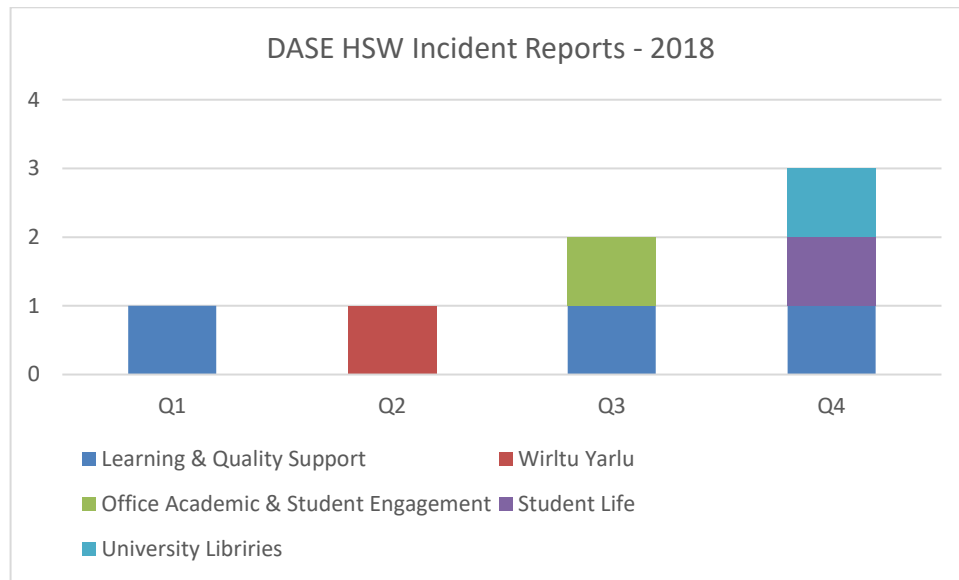


Table 2



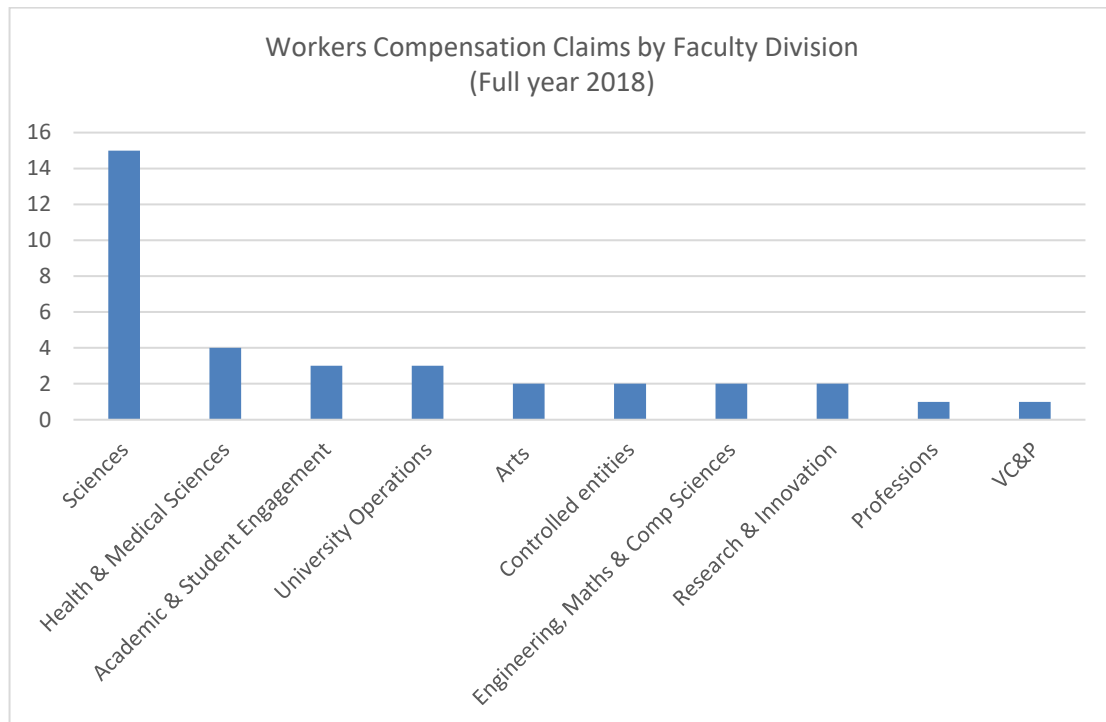
There were no significant incidents that related to failures to have safe systems of work. From the 7 HSW incidents reported over 2018, 4 related to injuries staff received while moving about their workplace i.e. falls and knocks to body parts.

2. UniSafe Overdue Corrective Actions Data

No assigned actions are currently overdue in UniSafe for DASE.

3. Workers Compensation Data

There were three new claims received for DASE in 2018. All three claims arose from slips/trips/falls while walking around the University campus.



4. HSW Internal Audit Outcomes

Q4 Audits were performed on Radiation Premises and Radiation X-Ray Apparatus. No areas in DASE are engaged in this task/activity and were therefore not included in the audits.

5. HSW Handbook chapters revised in the last quarter

The following table is provided to allow a discussion how required implementation is progressing.

New/Revised Handbook Chapter	Policy as at Date	Notes
HSW Action Planning	Dec 2018	Key change – status reports to be via Due Diligence report not through the disbanded UHSC Option for the Exec Dean/Div Head to assess the need for a targeted plan – where HSW risk/trends are identified through Health and Safety committee reports, Workplace monitoring (safety review) activities, Workers compensation claims profiles
Asbestos	Dec 2018	The requirement for Schools to have their own Asbestos Management Plan for NOA has been removed as it is included in the Infrastructure Asbestos Management Plan. (This will assist Schools to meet legislative compliance and reduce administration.) Service Delivery will manage every aspect of Asbestos from discovery; to management of content; to removal; to records management.
Corrective Actions	Oct 2018	The actions and responsibilities align with the new on-line system " UniSafe ". Responsibilities are assigned to the Supervisor who is in control of the activity/area to determine the appropriate and achievable actions in consultation with the HSWO and workers (or their elected representatives); Monitoring of overdue corrective actions is still a requirement, however the Faculty/Division has the option of monitoring through a Faculty/Division management forum or committee, to provide flexibility.
Injury Management	Oct 2018	Minor edits relating to position title changes and minor admin/clerical changes within the chapter
Noise and Sound Safety Management		Out for consultation until the 28th January 2019 <ul style="list-style-type: none"> A new action has been included for all workers (Refer 3.1 within the chapter) to report any work related noise and sound safety hazards/issue(s), in addition to the Supervisor/person in control of the area/activity. Supervisor responsibilities have been clarified. A new Appendix C has been provided, to assist Supervisors in the selection of appropriate measures to eliminate/minimise the risk of exposure; Monitoring of overdue corrective actions is still a requirement, however the Faculty/Division has the option of monitoring through a Faculty/Division management forum or committee, to provide flexibility

6. Draft DASE Traffic Light Report (Q3/4 2018)

The traffic light report (attached) is based on the information recorded by the Division HSW Officers in UniSafe and the findings from HSW internal audits. Where actions are undertaken to address breaches of a HSW handbook chapter - and are completed - the traffic light report will be flagged as Green A. However, outstanding actions will be recorded as Amber or Red depending on the due date of the action. This does not include Safety Reviews undertaken by the HSWO's. Therefore, it is important that the traffic light report is discussed within the safety meeting, to ensure that the correct colours have been identified for the respective branches.

The DASE HSW Traffic Light Report is a three colour Traffic Light with the key below, the report is used by the Divisional Health and Safety Committees to monitor compliance with 13 chapters of the HSW Handbook.

Ref	Requirement	Executive Director	Pro-VC International	Pro-VC Student Learning	Dean IRES	University Librarian
1	Schedule of Programmable Events	Green	Green	Green	Green	Green
2	Training Plan	Green	Green	Green	Green	Green
3	Biological	N/A	N/A	N/A	N/A	N/A
4	Chemical	N/A	N/A	N/A	N/A	N/A
5	Contractor	Green	N/A	N/A	N/A	N/A
6	Emergency Management	Green	Green	Green	Green	Green
7	First Aid	Green	Green	Green	Green	Green
8	Hazard Management	Green	Green	Green	Green	Green
9	Incident Reporting & Investigation	Green	Green	Green	Green	Green
10	Noise and Sound	Green	Green	N/A	N/A	N/A
11	Plant/Equipment	Green	Green	Green	Green	Green
12	Radiation	N/A	N/A	N/A	N/A	N/A
13	HSW Information, Instruction & Training	Green	Green	Green	Green	Green

Note below all exceptions to "Green" appearing in the Traffic Light report

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GREEN	No compliance issues with the HSW Handbook
Green 'A'	In the last quarter action had to be taken to rectify an issue of non-compliance with the HSW Handbook that was identified reactively through either an incident investigation or an HSW audit (Do not indicate an A for proactively identified issues)
AMBER	Action is required to address a compliance issue that is expected to be rectified by the next HSW Traffic Light Report.
RED	Action is required to address a compliance issue that is unlikely to be rectified by the next HSW Traffic Light Report.
N/A	Not applicable

