

**FACULTY OF HEALTH AND MEDICAL SCIENCES  
HEALTH SAFETY & WELLBEING COMMITTEE**

**MINUTES OF MEETING 4/2022  
HELD ON THURSDAY 17 NOVEMBER 2022**

<b>Committee Role</b>	<b>Name</b>	<b>Attendance</b>
Chair	Tony Cambareri	Present
Management Representative, School of Allied Health Science & Practice	Rachel Gibson	Present
Management Representative, School of Biomedicine	Corinna Van Den Heuvel	Present
Management Representative, Adelaide Dental School	Richard Logan	Apology
Management Representative, Adelaide Medical School	Danny Liew	Apology
Management Representative, Adelaide Nursing School	Frank Donnelly	Apology
Management Representative, School of Psychology	Elaine Fox	Present
Management Representative, School of Public Health	Tracy Merlin	Apology
Management Representative, SAiGENCI	Kathryn Hudson	Apology
Faculty HSR, (Faculty Office)	Marita Broberg	Present
Staff Representative, School of Allied Health Science & Practice	Deb Wadham	Apology
Staff Representative, School of Allied Health Science & Practice	Stav Manafis	Apology
Faculty HSR (School of Biomedicine)	Simran Sidhu	Apology
Staff Representative, Adelaide School of Medicine	Libby Kentish	Apology
Faculty HSR (Adelaide School of Nursing)	Denise Tucker	Apology
Faculty HSR (School of Public Health)	Sharyn Gaskin	Present
Faculty HSR (School of Public Health)	Isaiah Luc	Apology
Staff Representative, SAiGENCI	Sandii Constable	Apology
Health Safety & Wellbeing Advisory Manager	Paul Roberts	In attendance
Senior HSW Advisor	Anthony Parletta	Apology
Health Safety and Wellbeing Advisor	Jessica Gilson	In attendance
Executive Officer	Nguyen Matthias	In attendance

**1. WELCOME**

The Convenor welcomed members to the meeting.

**2. CONFIRMED MINUTES**

The minutes of Q3 2022 meeting were accepted.

\*See 3.10 – action added. Documents provided after meeting – Action not tabled.

**3. BUSINESS ARISING**

**Actions from previous meeting**

Item	Action Details	Person(s) Responsible	Status/Notes
3.1	Send direct communication regarding the requirement for individuals to update relevant training information in SSO (e.g. first aid, warden, working with children etc) and to ensure their University phone book entries are up to date.	Jessica/Paul	Item completed 7 July; Information was provided via Health Core.  Communications were also provided to Heads of School 19 July detailing data from SSO with areas requiring action.

			<p>HSW Central team have taken on two interns to work on a project to update the first aid register and a system of first aid access points. There is hope for a medium to long term fix for this issue.</p> <p>Action: Paul Roberts to provide further updates at the next meeting.</p> <p><u>17/11 - Update</u></p> <p>HSW Central team managing the Warden register featuring chief wardens and wardens – updating details with the aim to alert them to the processes moving forward.</p> <p>A standard emergency management email address now created to be issued. The warden network will be updated with any changes.</p> <p>Monthly reminder sent out for people listed on the First Aid register – request featured in Staff News for staff to update details in SSO and phone directory.</p>
3.2	Consult with Tony regarding first aid hubs.	Jessica	<p>This item remains open per item 3.1.</p> <p><u>17/11 – Update / linked to 5.3</u></p> <p>First Aid register Current posters feature QR code – users will be directed to building group or zone, and provided with a) nominated First Aid contact, and b) the closest/convenient First Aid location/access point with First Aid kit.</p> <p>Currently, there are many First aid kits that aren't accessible. *Staff card needed to access areas. Not practical for students/public.</p> <p>Still confirming first aid access points = with first aid kits. Warden network will have knowledge where all kits are in restricted and general accessible areas. AHMS and Helen Mayo – currently establishing an area for First Aid kits, and to label this area as First Aid access point.</p> <p>There's no change to High risk areas (Lab and workshops) – first aid kits will still immediately be available.</p> <p>Lab AHMS L8 &amp; L9 – Local areas manage/stock First Aid Kits. Additional kits need to be purchased through Procurement from St John (Preferred supplier) Action: Jess to provide a link to Jessie and Marita.</p>

			<p>Completed 18/11/22.</p> <p>In 2023, Allied Health will be taking on teaching spaces in Johnson and Hughes, Engineering /Santos building. A Hub will need to be established. Zones are established for Hughes and Engineering building. No zone established for Johnson building. AH – will need to purchase a local First Aid kit.</p> <p>Aim for general public and students to access. Staff who can be called at that access point. Each building to have a level of First Aid staff contacts.</p> <p>Carol Devizio and Lisa Laws to be nominated to manage with school admin to oversee process.</p>
3.3	There has been a change of program coordinator which requires communication to Security to amend the after-hours contact	Frank	Action: Update Security with new after-hours contact information
3.4	Further to the placement incident documented within the Advisory Report, Appendix B incident 0002297, Frank Donnelly requested further investigation as to the precursor of the fainting episode. As the report stands, it appears the student nurse has identified an incorrect body part.	Jessica	<p>Action: Discuss incident 0002297 dated 20 May 2022 with Frank Donnelly</p> <p>Completed 17<sup>th</sup> October, 2022</p>
3.5	Elaine advised that evening research participation has been approved within the school. As a safety measure, two researchers will be present at all times and a duress alarm is fitted within the lab space. She queried whether these measures were adequate. Paul Roberts advised the measures are appropriate and added that the Security Manager Mark Kennedy should be informed so that the officers on duty can be advised of the situation	Elaine	<p>Action: Advise Mark Kennedy when after-hours research is undertaken</p> <p>Completed 17<sup>th</sup> November, 2022</p>
3.6	A recent fire drill identified emergency exit doors which do not open automatically. Staff without proximity cards during an emergency could not exit. It also became apparent there is a generalised lack of knowledge in the use of the break glass panel.	Jessica/Paul	<p>Action: Follow up issue of emergency exit doors within Public Health and procedures for tagging out damaged equipment</p> <p><u>17/11 – Update – see 3.7</u></p>
3.7	It was also noted that electrical items should be tagged in advance of inspection to alert users of possible danger. The building manager was responsible for arranging of electrical testing and that RCD protection is installed within this building.	Jessica	<p>Action: Follow up communications between HSW Officer who dealt with water damage and School personnel</p> <p><u>17/11 - Update</u> Working with property manager and the incident's still open for an end result. FHMS can only go through Infrastructure to communicate with the RMP Building Manager.</p>

			<p>Currently working with Infrastructure. RMP – Level 4 = there are 2 x modes for the fire panel. To avoid confusion, we are now requiring infrastructure to communicate to management, building occupants, floor wardens and floor coordinators the 2 x types of modes in re: to Level 4 doors not opening. James Rivett managing this now, and the action won't be closed until resolved.</p> <p>In order for both incidents 3.6 and 3.7 to be closed off – Infrastructure will need to release the comms to then be uploaded to UoA Unisafe Incident reporting system.</p>
3.8	As staff within the Institute are all new to the university it was requested that any requirements be expressed proactively.	Jessica	<p>Action: Jessica to meet with Kathryn to provide further information about the SAiGENCI traffic light report</p> <p>Completed 12<sup>th</sup> September, 2022</p>
3.9	Unisafe posters have been updated. Members were advised the old app needs to be removed as it is no longer working. The new app has been widely advertised and included in the Health Core. A download issue was reported and Jessica will assist with this off-line.	Jessica	<p>Action: Assist Tracy Merlin with app download</p> <p>Completed 28<sup>th</sup> September, 2022</p>
3.10	Send out Roles and responsibilities document after this meeting to utilise (standalone document)	Jessica	<p>Send out after today's meeting.</p> <p>Completed 17/11/22.</p>
3.11	Testing and Tagging	Marita	Marita to contact Roshini to check all FHMS areas are managed/covered.

#### 4. Items for information (taken as read unless questions raised)

##### 4.1 Faculty of Health and Medical Sciences HSW quarterly report from HSW Advisor (document attached) (HR/HSW) – including traffic light report, incident register etc

###### Highlighted

This quarter = low incident reporting

Other issues were raised after this report was finalised. Last month, there were hazard ID reports – submitted by emails, conversation or phone call which will be included in the next report. The reports were uploaded to UniSafe by the HSW Advisory team. Either because the people couldn't locate the UniSafe posters/or know about the new app or report on the desktop app. If areas don't have UniSafe poster – contact Jessica.

How to access HSW advice – links created and encourage to share with teams;

- [Supervisors toolkit](#) link – HSW procedures for shortcuts/reference.
- [HSW advice](#) and [Hazard alerts](#) link

Traffic light report – An open action with a supervisor from a significant incident, and have met with the supervisor to guide through process - tasking the group with actions. Still open and hopefully resolved soon.

## 5. Any other business (pre-vetted agenda items)

### 5.1 Workplace Inspection Program commencing 2023 (HR/HSW)

Currently in the final trials with Workplace Inspection program, working with a list of supervisors who are in control of inherently high - risk activities/or supervisors in control of an areas responsible of controls in that area. Supervisors comprise of academics and technical /research staff.

Inspection program addresses the essential questions to meet enforceable undertaking by SafeworkSA, with inspections taking 20-30 mins to complete. Some supervisors may take longer if they may have multiple areas to inspect. There's a desktop component and assurance process where questions can take less time to answer. Inspection program will be sent to supervisors with an email link, with supporting documentation to guide them through the task. Supervisors can enter their actions directly into UniSafe - unlike before when the system would only allow the safety team to enter them. When completed, supervisors can upload evidence and close off rather than work through safety team. Process will be supported by the HSW advisory team – similar operations to ITDS desk.

There are 350 x Supervisors across the university, with the program to be launched on 1 Feb 2023. Inspections will run each month - 35 x supervisors per month will be contacted to do workplace inspections. Where there is a business need – inspection can be postponed for up to 3 x months. We are meeting a requirement, to avoid a prosecution from SafeworkSA. In addition, there's a short presentation available to see the processes and what is involved.

The person to contact HSW Advisory team directly if they are 'unsure' when answering the questions.

### 5.2 HSW tasks and activities for the End of Year (EOY) (document attached) (HR/HSW)

1. Finalisation of the 2022 SPE's and 2. Undertaking the 2023 Annual Hazard reviews.

If Faculty, each School and SAiGENCI need support; please contact Jess, to provide advice and go over the tasks required at the end of each year. Jess will share information to HoS and BSMS to prompt tasks and activities – First Aid Assessments and Restocking First Aid Kits.

#### Electrical testing and tagging

Testing ceased in low risk areas for 3 x years and now reintroduced due to a change in the legislation.

Local area pay flat rate for each item tested.

Document can be found on the HSW webpage - anything electrical plugged in can be tested/tag.

Low risk – tested every 5 x years.

Leased items – tested only once.

Anything new – to be test and tagged.

Hazardous environment / portable ie. cord subjected to flex and stress – tested annually

Local areas to be aware – technician may mix up identifying items for either 5 year tag than 1 year tag or vice/versa.

CRF – require different testing and tagging for medical equipment i.e. touching patients. ESafe instructed not to remove tags or test the items. Marita's team managing Research Area. Roshini working on Faculty.

Asset register system – how is this managed.

Action: Marita to follow up and check with Roshini all FHMS areas are being supported.

### 5.3 First Aid register and First aid point/hub (HR/HSW)

Covered

**5.4 Update Chief Warden/Warden Arrangements (HR/HSW)**

Workplace Warden and Network Proposed Draft out for consultation - closes 18/11. Paul's discussed with Chief Wardens and covered any questions. HSW Central to provide better support, management and coordination of the Warden network moving forward. Any questions about the Draft HSW procedure – please contact Paul or use the Governance framework to provide feedback. Jess happy to talk to anyone today/tomorrow.

**6. Confirmation of next meeting and close**

Next meeting February 2023