

Maintaining Workplace Health Procedure (1)





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1. PURPOSE

The purpose of this procedure is to create a safe and healthy work environment that promotes a workplace culture and environment that values, supports and promotes programs that improve the physical, mental health and wellbeing of all workers.

2. SCOPE

This procedure applies to all workers under the Catholic Church Endowment Society Inc. (CCES).

3. DEFINITIONS

Definitions can be found on the [Catholic Safety & Injury Management Website](#).

3.1. Information

For the purpose of this procedure section [5.3 Smoking](#) includes vaping.

4. RESPONSIBILITIES

Specific responsibilities for carrying out certain actions required by the CCES, have been allocated to particular position holders within the organisation. Such responsibilities are consistent with the obligations that the legislation places on officers, managers, supervisors, workers and others in the workplace.

Responsibility, authority and accountability processes have been defined in [Responsibility, Authority & Accountability Procedure \(12\)](#), and summarised in:

- [Responsibility, Authority & Accountability Matrix – Workers \(025G\)](#);
- [Responsibility, Authority & Accountability Matrix – Managers & Supervisors \(023G\)](#);
- [Responsibility, Authority & Accountability Matrix – Officers \(024G\)](#); and
- [Work Health & Safety and Injury Management Policy](#).

You are required to familiarise yourself with this procedure in order to understand the obligations that you may have in relation to its implementation and to carry out your assigned actions and responsibilities.

This Procedure is to be read in conjunction with your Organisational Policies and / or Procedures.

5. PROCEDURE

5.1. Health and Wellbeing

Workplaces are essential when it comes to influencing, educating and supporting health and wellbeing. Good health is good business. Promoting health and wellbeing is, and should be an extension of the approach to preventing harm to all workers. The worksite can play a critical role in slowing the acceleration of the risks associated with age and lifestyle related chronic diseases. Integrated workplace health and wellbeing programs can significantly



improve the health of workers, including preventing or delaying the onset of chronic disease and disability in older workers.

Health and wellbeing programs are associated with:

- improved work performance and productivity, reduced costs associated with absenteeism, presenteeism, disability, workers turnover and workers' compensation;
- improved workplace culture and attraction and retention of skilled workers.

Good work promotes good health. Good work is work that is meaningful to the worker and the work team. Consider how workers feel valued by the organisation and what may motivate them to perform well, without undue stress that may lead to poor health.

Evidence-based characteristics of a healthy work environment include:

- the worker is able to manage the demands of the work (e.g. workload, work patterns and working environment);
- individuals have control (e.g. a say in the way they do their work);
- workers receive support (e.g. encouragement, sponsorship and resources from the organisation, their managers and their colleagues);
- cohesive working relationships with effective communication practices (e.g. positive working relationships avoid conflict and deal with unacceptable behaviour);
- workers understand their role within the organisation;
- organisational change is communicated and well managed;
- create a supportive environment and a culture focused on wellness;
- embed health and wellbeing into the way things are done within the organisation.

Actions to achieve this include:

- aligning health and wellbeing programs with organisational strategies;
- integrating program elements into organisational systems;
- modifying the physical environment to support healthy lifestyle choices, such as healthy food choices and engaging in physical activity.

5.2. Fitness for Work

Fit for work means that an individual must be in a state (physical, mental and emotional) which allows them to perform their assigned duties effectively and in a manner which does not threaten their own or other's safety or health.

All concerns relating to worker's fitness for work should be resolved in an effective, constructive and inclusive manner. Sensitivity and confidentiality is to be maintained at all times and counselling will be offered.

Workers should be aware that many factors may affect fitness for work, and these can often interact with each other. These may include:

- general health and fitness;



- secondary employment or volunteer activities;
- recreational activities and sport;
- alcohol and drugs (prescription and / or illicit);
- insufficient sleep;
- excessive work hours / demands;
- injury or illness (e.g. work or non-work related);
- personal factors (e.g. psychological, psychiatric issues, family issues or illnesses).

If a manager / supervisor becomes concerned about a worker's ability to safely perform their work, either through direct supervision or report, they must take prompt action. Managers / supervisors are responsible for initial assessment of a worker's fitness for work, this can be when the worker presents or during the course of work.

There may be some warning signs including:

- lethargy;
- obvious struggle to complete tasks;
- out of character behaviour e.g. irritability / aggression, vagueness;
- apparent lack of attention or concentration;
- obvious illness or injury (e.g. flu symptoms, limping).

The worker should be stood down from duties and a private discussion should take place to determine the cause of the problem. The formality of this meeting will be dependent on the individual circumstances (e.g. if the illness or injury is obvious then a simple direction to take a break or go home on sick leave will suffice).

If a worker attends work when they are unwell or fatigued, generally they do so because they are conscientious not because they are trying to put anyone else at risk. The manager / supervisor needs to make a judgement call as to the correct response in the individual circumstance.

Appropriate actions may include:

- having the worker take a short break;
- sending (or driving) the worker home on approved sick leave;
- arrange transport for medical treatment;
- calling an ambulance if the severity of their condition warrants this.

5.2.1. When a worker is considered unfit for work

- if a worker is considered unfit for work, the worker should be removed from the workplace;
- the worker may be prohibited from driving a vehicle (e.g. dizziness, under the influence etc.);
- the worker will be prevented from returning to work until they are able to demonstrate they are fit for work. Reasonable proof will be required that the



concern has been satisfactorily resolved prior to the worker being permitted to return to work. This may include a fitness for work assessment conducted by a medical practitioner;

- seek assistance from relevant stakeholders depending on circumstances (e.g. human resources, school quality & performance (SQPC) consultants, governing authorities).

EDUCATION SECTOR

- Where an Officer suspects a physical or psychological impairment with a worker the Officer must contact their School Quality & Performance Consultant and / or the Catholic Education Office for advice on the appropriate process. The Officer must also consult with their WHS Consultant should a worksite assessment be required.

5.2.2. Work related injury or illness

All work related injury or illness will be managed by Catholic Safety & Injury Management.

5.2.3. Non-work related illness or injury

A non-work related injury or illness refers to an injury or illness (including physical, mental or psychological conditions) which does not arise out of the course of employment or that has been deemed not to be compensable under the Return to Work Act. The manager / supervisor will assist the injured worker to return safely to work as soon as possible and will ensure that they are not treated unfavourably because of their injury or illness. To assist with this process a [Non Work Related Medical Authority Form \(070F\)](#) may need to be completed to assist the worker in returning to their normal work duties.

5.2.4. Medical Clearance to return to work

If a worker experiences a serious non-work related injury or illness which may affect their ability to undertake the full duties of their position, they will require a medical clearance from a doctor before they will be permitted to return to work.

5.3. Smoking

Tobacco smoking is the leading cause of preventable disease and death in Australia. Workplace exposure to passive smoking is a significant occupational health and safety hazard. Exposure to passive smoking can produce symptoms of ill health, particularly for people with pre-existing medical conditions, such as respiratory or cardiovascular conditions. There is no recognised safe level of exposure to tobacco smoke.

It is recommended that all worksites are smoke free. Areas that are smoke free under legislation include:



- outdoor dining areas;
- vehicles when a child under sixteen (16) years is present;
- enclosed public areas and workplaces;
- playgrounds;
- public transport waiting areas;
- declared smoke free outdoor areas and events.

For information on a smoke free workplace refer to Department of Health [Tobacco Laws Website](#).

If a designated smoking area is to be located on the premises it must be determined by a documented risk assessment. The risk assessment process must be in consultation with workers to identify approved smoking areas.

Worksites must:

- provide appropriate signage indicating “designated smoking area” and / or “no smoking” as identified in the risk assessment;
- display signs in prominent positions;
- Person Conducting a Business or Undertaking (PCBU) may provide information regarding support programs (e.g. Quit SA).

Note: Smoking is not permitted in any vehicle used for work purposes, this includes CarCentra Fleet Vehicles, delivery vehicles at all times; private vehicles when transporting others for work purposes.

5.4. Sun Protection

Ultra Violet Radiation (UVR) is a known carcinogen. It is also the major cause of skin cancer in Australia and represents a major workplace hazard to workers who spend some, or all, of their working day outdoors. People who work outdoors receive up to ten (10) times more sun exposure than indoor workers.

PCBU can create a sun safe environment for their workers by controlling exposure to UVR. Ways of controlling exposure include:

- encouraging workers to move jobs to shaded areas;
- applying window tinting to work vehicles;
- modifying reflective surfaces;
- identifying and minimise contact with photosensitising substances;
- providing indoor areas or shaded outdoor areas for rest and meal breaks;
- scheduling outdoor work tasks to occur when levels of solar UV radiation are less intense (e.g. earlier in the morning or later in the afternoon);
- scheduling work to be indoors or in shaded areas when levels of solar UV radiation are strongest (e.g. in the middle of the day);



- encouraging workers to rotate between indoor, shaded and outdoor tasks to avoid exposure to solar UVR for long periods of time;
- providing daily access to the UV index.

5.4.1. Personal Protection

Avoiding overexposure to UVR is the best way to prevent skin cancer. Follow these simple steps:

- minimise time in the sun with UV is above 3;
- slip on clothing;
- slop on SPF 30+ sunscreen;
- slap on a hat;
- seek shade;
- slide on sunglasses.

5.4.2. Clothing

Clothing features that provide constant protection from UVR include:

- dark coloured fabrics such as greens, blues and reds that inhibit UV light penetration;
- close weave fabrics provide the best form of sun protection, as they block out most of the UV radiation;
- long sleeves, a collar and long loose trousers will increase the sun protection of clothing.

Choose a fabric with a high ultraviolet protection factor (UPF). The UPF rating is outlined in the AS / NZS 4399 Sun protective clothing – evaluation and classification. A fabric's UPF rating is based on how much UVR is transmitted through the fabric (e.g. 45+ is excellent protection).

5.4.3. Hats

- a hat with a broad brim (10-12 cm) or a flap at the back to shade both the face and back of the neck and a close weave;
- a hardhat with a flap and / or brim added.

5.4.4. Sunglasses

A wrap around style conforming to AS / NZS 1067 Sunglasses and fashion spectacles is best as it will reduce UVR entering the eye from the side of the face.

Check the UV protection rating. Some sunglasses can be labelled with an eye protection factor (EPF). This is a scale from 1 to 10 which indicates how well a lens blocks UV radiation. If a lens has been tested, it should have an EPF on the label. Sunglasses with an EPF of 9 and 10 provide the best protection.



Safety glasses can provide good UV protection but require tinting for use outdoors. Polarised lenses reduce glare, which is reflected visible light and makes it easier to see on a sunny day – however, this doesn't increase the EPF.

5.4.5. Sunscreen

Sunscreen is recommended as the last line of defence in addition to shade, clothing, hats and sunglasses.

When choosing a sunscreen look for the following:

- sun protection factor (SPF) of 30+;
- broad-spectrum (protects against UVA and UVB);
- water-resistant;
- check the use by date.

Sunscreen should be kept in easily accessible places such as workers rooms and site offices, and stocks replaced regularly to avoid deterioration. Sunscreen can go off, so always check the expiry date and store in a cool place preferably below thirty (30° C) degrees Celsius. Price is not always an indication of quality. Any broad-spectrum sunscreen with an SPF30+ rating, will if applied correctly, provides good sun protection.

Application:

- apply liberally to clean, dry skin at least twenty (20) minutes before going outside, about a teaspoon per limb and half a teaspoon to the face and neck;
- reapply sunscreen at least every two (2) hours;
- provide an adequate supply of sunscreen and zinc cream at the workplace at all times;
- select and apply zinc cream for lips, ears and nose for extra protection;
- select a gel-based or alcohol-based sunscreen when handling tools;
- use a clear lip balm that contains sunscreen, and apply it regularly.

5.5. Voice Care

The voice is made up of the same material as the rest of our anatomy – muscle, cartilage, tissue – and is as susceptible to illness, stress, strain and injury, just like other parts of our body.

Voice issues can be identified through strategies such as:

- conducting a workplace assessment;
- formal or informal surveys;
- discussions with workers during performance appraisals / meetings;
- hazard and incident reports;
- reporting results of the assessment to all workers to discuss the most appropriate methods of control;
- absenteeism records;



- visual inspection of the working space.

Consider the following:

- rest the voice whenever possible;
- maintain a high fluid intake to lubricate vocal cords (water recommended);
- changing communication methods e.g. non-verbal signals, group work rather than individual instruction, speakers, whistles, bells and handclaps;
- reviewing building design and use of space;
- modifying behaviour management techniques;
- engaging speech pathologists as required;
- ensuring workers meetings regularly include voice care on the agenda;
- provision of voice care training;
- using newsletters / flyers to raise awareness of voice care;
- providing appropriate equipment, for example a megaphone or Public Address System.

Refer to the guideline for [Practical Strategies for Minimising Voice Strain \(027G\)](#).

5.6. Fatigue

Fatigue is mental or physical exhaustion which stops a person's ability to perform work safely and effectively. Fatigue can adversely affect safety at the workplace. Fatigue can be caused by factors which may be work related, non-work related or a combination of both and can accumulate over time.

Potential causes of fatigue include:

- mentally and physically demanding work;
- long periods of time awake (e.g. long hours of work extended by long commuting times);
- inadequate amount or quality of sleep (e.g. when on call);
- regular work at night;
- work requirements or systems of reward (e.g. pay, recognition or promotion) that provide incentives to work longer and harder;
- poor work scheduling and planning.

Ensure workers aren't required to work extended hours by:

- arranging sufficient cover for workers who are on annual or sick leave;
- planning for necessary overtime so workers can schedule their activities around it;
- ensure shift work rosters provide for adequate sleep in a twenty-four (24) hour and seven (7) day period;
- avoid working arrangements that provide incentives to work excessive hours;
- include adequate rest breaks between shifts to allow workers enough recovery time (e.g. time needed for travelling, eating, sleeping and socialising);
- consult with workers and follow-up on issues raised;
- conduct regular audits to ensure controls are effective and are being used by workers.



5.7. Work Related Stress

Work related stress describes the physical, mental and emotional reactions of workers who perceive that their work demands exceed their abilities and / or their resources (such as time / help / support) to do the work. Stress responses occur when the worker perceives they are not coping in situations where it is important to them that they do.

The source of work related stress can be determined by evaluating:

- productivity levels;
- rates of absenteeism;
- separation rates / turnover;
- exit interviews;
- workers engagement / morale;
- client feedback;
- peak / seasonal demands;
- incident reports and data trends.

Stressors or risk factors for occupational stress may include:

- work demands (e.g. workloads or excessive demands from employers, clients or others at the workplace (physical, emotional, and cognitive);
- lack of role clarity (e.g. poorly defined job roles and reporting structures);
- low control of what work tasks are done and how they are performed;
- poor support from managers, supervisors, and / or peers (this may include working alone or in an isolated environment);
- poorly managed relationships (e.g. conflict or work relationship problems with supervisors and / or colleagues);
- exposure to emotionally distressing situations or incidents involving a threat to wellbeing (for example physical violence or the threat of physical violence);
- poorly managed change, low levels of recognition and reward;
- emotional attachment to a terminally ill client.

If conducting a documented risk assessment for work related stress, the risk factors listed above should be considered by:

- acknowledging and understanding worker complaints and where necessary investigating;
- observing interactions between workers, and between workers and clients;
- having one-on-one discussions with workers.

Controls that can be used to manage work related stress risks include:

- regularly reviewing staffing levels to ensure appropriate skills mix and numbers;
- providing each worker with clearly defined job descriptions (e.g. Position Information Document);



- Performance Appraisals to be conducted as determined by the worksite;
- Reviewing organisational and performance management systems;
- having policies and procedures for managing conflict and workplace bullying (refer to the [Bullying & Harassment Procedure \(21\)](#));
- providing workers with training and strategies on how to manage workloads, resolve conflict, job rotation, maintaining a balanced relationship and appropriate boundaries with client;
- refusing or modifying services to the client if an environment is too high risk.
- consulting with workers and follow-up on issues raised;
- offering wellbeing programs (e.g. stress management, resilience and fatigue management training);
- communicating and display contact details for the Employee Assistance Program (EAP);
- conducting exit interviews.

5.8. Information, Instruction and Training

Inform workers of this procedure at induction.

5.9. Records

Documents used to manage Maintaining Workplace Health as prescribed by this procedure will be produced in a format that allows tracking for verification and review and be in accordance with requirements detailed in [Document Control Procedure \(23\)](#).

5.10. Review

This procedure will be subject to a planned review by the document owner in accordance with the requirements outline in [Document Control Procedure \(23\)](#).

6. RELATED SYSTEM DOCUMENTS

6.1. Policies & Procedures

Audit Procedure (7)

Bullying & Harassment Procedure (21)

Consultation / Communication Procedure (5)

Document Control Procedure (23)

Hazard Management Procedure (14)

Incident & Investigation Procedure (2)

Personnel Protective Equipment (PPE) Procedure (31)

Responsibility, Authority & Accountability Matrix Procedure (12)

6.2. Forms & Tools

Non Work Related Medical Authority Form (070F)



Maintaining Workplace Health (1) Process Flow Chart (019T)

7. REFERENCES

Legislation and other requirements related to this procedure are defined in [Group Legal Register \(010T\)](#) which can be accessed via the Catholic Safety & Injury Management website.

7.1. Internal Resources

Practical Strategies for Minimising Voice Strain (027G)

Responsibility, Authority & Accountability Matrix – Managers & Supervisors (023G)

Responsibility, Authority & Accountability Matrix – Officers (024G)

Responsibility, Authority & Accountability Matrix – Workers (025G)

7.2. External Resources

[Beyond Blue – Heads Up](#)

[Cancer Council](#)

[Health, Safety and Wellbeing - Comcare](#)

[Look After Your Voice](#)

[Safework Australia - Drugs and Alcohol](#)

[Smoke Free Workplaces](#)

8. AUDITABLE OUTPUTS

The following examples of records will be used to verify implementation of this procedure:

- Performance Appraisals
- Health Programs established (i.e. quit smoking, sun smart)
- Risk Assessments – sunscreen, voice, PPE
- Personnel Protective Equipment Registers
- Training Records
- Incident reports & Investigations
- Employee Assistance Program displayed on Notice Boards



9. VERSION CONTROL & CHANGE HISTORY

Version	Approved by	Approved Date	Reason for Development of Review	Next Review Date
V1	Executive Manager CSHWSA	22/01/2021	Formerly Health and Wellbeing (1) renamed. Reformatted, combined procedures Smoking (3), Protection from Heat and UVR (12) Voice (21) Fitness for work (28).	2022
V1.1	Executive Manager CSHWSA	04/07/2023	Change section 5.2.2 to refer to Lawson Risk Management	2022

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