ANMF (Vic Branch) Policy

Occupational Health and Safety

1. Introduction
The Australian Nursing and Midwifery Federation (Victorian Branch) (ANMF (Vic Branch)) recognises that some nurses and midwives working in healthcare environments and other industries may be exposed to hazards during the course of their work, creating a risk to their health and safety.

2. Objective
The ANMF (Vic Branch) objective is to support the prevention and management of risks to the health and safety Victorian nurses and midwives, arising from exposure to blood-borne and body substances pathogens, during the course of their work.

3. Scope
This policy applies to all ANMF (Vic Branch) members and all nurses and midwives eligible for ANMF (Vic Branch) membership who are working in Victorian healthcare environments and other industries.

4. Definitions
OHS: Occupational Health and Safety

5. Policy
5.1 Under the Victorian Occupational Health and Safety Act 2004, all employees have a right to perform their work in an environment that is safe and without risks to health.
5.2 ANMF members have rights relating to occupational health and safety and these rights are supported by relevant occupational health and safety and associated legislation.
5.3 Prevention of injury, illness and disease must be the first occupational health and safety priority.
5.4 The ANMF (Vic Branch) will provide support for members exposed to unacceptable occupational health and safety risks.
5.5 The ANMF (Vic Branch) supports the legislative rights of nurses and midwives to expect that the most effective hazard control measures will be implemented by the employer, including that hazards are eliminated or controlled at their source before lower order measures, such as relying on training or providing personal protective equipment, are implemented.
5.6 The ANMF (Vic Branch) recognises that industrial relations and OHS issues are inextricably linked and supports the integration of OHS into mainstream union activities.

6. Key elements
6.1 Employers
Action by the ANMF (Vic Branch) at workplaces will be directed to implementation of employers' state legislated obligations to:

6.1.1 Provide employees with safely designed premises, work environments, facilities, fixtures, fittings, equipment and systems of work that do not create, contribute to or
6.1.2 Provide employees with safe plant and substances and facilitate the safe use, handling, storage and transport of plant and substances.

6.1.3 Develop and implement policies, programs and systems of work to identify hazards, to assess risk and to eliminate or appropriately control occupational risks so far as reasonably practicable.

6.1.4 Include occupational health and safety in all aspects of organisational planning, management, design and refurbishment, with adequate allocation of resources, both financial and human.

6.1.5 facilitate effective mechanisms for representation of employees, including:

i. the establishment of DWGs
ii. recognition of powers of HSRs
iii. meeting of obligations to HSRs; and
iv. active contribution to resolution of OHS issues.

6.1.6 Inform employees of the hazards they are or may be exposed to at work, the associated risks and the measures taken by the employer to protect their health and safety.

6.1.7 Implement the most effective hazard control measures, including that hazards are eliminated or controlled at their source before lower order measures, such as relying on training or providing personal protective equipment, are implemented.

6.1.8 Provide adequate information, instruction, education, training, staffing levels and supervision so that employees can perform their work safely.

6.1.9 Continuously evaluate risk management programs and risk control strategies for their effectiveness.

6.1.10 Allocate financial and other resources to support the promotion of occupational health and safety and facilitate continuous improvement in occupational health and safety practices.

6.1.11 Train managers in effective occupational health and safety management and their legislative obligations.

6.1.12 Encourage and support employees to report to management, any work related injury, illness or workplace hazard.

6.1.13 Employ or engage persons who are suitably qualified to provide advice to the employer on the OHS of employees.

6.1.14 Monitor the health of employees and workplace conditions.

6.2 Consultation

6.2.1 ANMF members have a right to appropriate representation on OHS issues by electing their own Health and Safety Representatives (HSR).

6.2.2 ANMF members have the right to request the ANMF to assist them in any negotiation of Designated Work Groups (DWG) and in the conduct of HSR elections.

6.3 Health and Safety Representatives (HSRs)

6.3.1 ANMF members should participate in ensuring their workplaces are safe and healthy, by becoming and/or supporting Health and Safety Representatives (HSRs) and workplace Health and Safety Committee members.

6.3.2 Active involvement of HSRs on OHS Committees is necessary to achieve improved workplace OHS policies and procedures.

6.3.3 The ANMF (Vic Branch) supports the exercise of the following legislated rights and powers by duly elected Health and Safety Representatives:
i. inspection of any part of a workplace relevant to their DWG members
ii. seeking assistance from any person whenever necessary, including ANMF or other union officials or other HSRs or persons from within or outside of the workplace
iii. accompanying an inspector during an inspection of a workplace
iv. requiring the establishment of a Health and Safety Committee
v. being involved in health and safety issue resolution processes
vi. attending interviews with a member of their DWG on health or safety matters (where so requested)

vii. accessing information relating to actual or potential hazards, or the health and safety of DWG members the HSR is authorized to represent
viii. being provided with appropriate facilities, time and other assistance as are necessary to exercise their powers
ix. issuing a Provisional Improvement Notice (PIN) in the event that a hazard is not properly addressed by the employer
x. contacting WorkSafe Victoria and/or requesting the involvement of inspectors; and
xi. directing that work ceases until adequate measures are taken to protect the health and safety of employees

6.3.4 HSRs do not have any legal obligations or duties as a part of their elected role as an HSR.

6.3.5 Consultation must occur with employee-elected HSRs in relation to all matters that have or could have health and safety implications, including:

i. in the planning processes for changes that may impact on the health and safety of employees, including redevelopment or refurbishment of existing facilities, or the building of new facilities, or proposed changes to conduct of work, including rostering and staffing arrangements

ii. when risk elimination and risk reduction strategies are proposed to be introduced, including health surveillance activities; and risk assessment and review processes, including workplace inspections

6.3.6 ANMF (Vic Branch) supports involvement of HSRs and members in OHS consultation consisting of:

i. sharing information with employees about the matter

ii. giving employees a reasonable opportunity to express views about the matter; and

iii. taking those views into account

6.3.7 We support and promote dual roles, cooperation and networking between HSRs and Job Representatives to deal with issues such as stress, workloads / staffing, fatigue, equipment, facilities and amenities.

1 Consultation on health and safety – A handbook for workplaces, WorkSafe Victoria, Edition No. 1, June 2007
6.4 HSR training
6.4.1 The ANMF (Vic Branch) will support the right of HSRs and Deputy HSRs to time off work with pay, to receive training to provide them with appropriate skills and knowledge to effectively represent the employees of their DWG, including to:

i. decide on the course of training which they wish to attend (after consultation with the employer)
ii. attend an initial course of training in OHS after being elected (a five-day, WorkSafe approved course of their choosing)
iii. undertake refresher training at least once in each year that they hold office after completing the initial training course (a WorkSafe approved course)
iv. have all costs associated with HSR training be paid by the employer (including course costs, any travel or accommodation etc)
v. be paid for the time that they are attending such training; and
vi. attend other approved training (only HSRs)

6.5 ANMF (Vic Branch) members
ANMF members as employees’ rights relating to occupational health and safety are supported by state occupational health and safety and associated legislation.

6.5.1 ANMF members have the right to work in a safe and healthy workplace environment and to perform their work without risks to their physical and psychological health and safety.

6.5.2 The ANMF (Vic Branch) supports the legislative rights of nurses and midwives to expect that the most effective hazard control measures will be implemented by the employer, including that hazards are eliminated or controlled at their source before lower order measures, such as relying on training or providing personal protective equipment, are implemented.

6.5.3 Nurses and midwives who are exposed to occupational health and safety risks have the right to:

i. a personal health examination at the employer’s expense by a medical practitioner of the individual nurse’s choice; and
ii. access their own health records if held by the employer

6.5.4 Nurses and midwives have a right to:

i. voluntary health screening and monitoring paid for by the employers – for example, in relation to infectious diseases, chemicals and shiftwork
ii. voluntary immunisation against infectious diseases at the employer’s expense; and
iii. confidential individual test results, not to be used to discriminate against nurses and midwives in their employment

6.5.5 Nurses and midwives making an occupational health and safety complaint or taking part in occupational health and safety activities, (including HSRs, Deputy HSRs and Job Representatives) have protection under criminal law and must not be dismissed, have their employment altered, nor be harassed or victimised as a result of their actions.
6.5.6 Nurses and midwives also have the right to create a civil course of action if they are discriminated against by an employer or prospective employer on grounds that relate to occupational health and safety.

6.6 OHS responsibilities of ANMF members as employees
6.6.1 ANMF members will take reasonable care of their own health and safety and the health and safety of other persons (employees and others) who may be affected by their acts or omissions at the workplace.
6.6.2 ANMF members will co-operate with the employer with respect to any action taken by the employer to provide a safe and secure workplace, and to assist the employer to fulfill their duties under occupational health and safety legislation.
6.6.3 ANMF members should report to management any work-related injury, illness or workplace hazard or incident as soon as they become aware of it in order to enable preventative/mitigating measures to be implemented.
6.6.4 ANMF members in management and supervisory positions should support, facilitate and give due regard to occupational health and safety in their decision making, incorporating consultative processes.

6.7 Legislation, regulations and other instruments
The ANMF (Vic Branch) supports:
6.7.1 Enforcement and improvement of the rights of nurses and midwives under OHS legislation, including through effective penalties.
6.7.2 Development of new regulations and codes where they are required for OHS hazards, including for violence, bullying, stress and fatigue.
6.7.3 Advancement of health and safety in awards/agreements, recognising that working conditions are integral to OHS.

6.8 Contracts and design
The ANMF (Vic Branch) supports:
6.8.1 Safe design of facilities and equipment as the highest order control to eliminate risks and hazards, and will continue to pursue a requirement for Government funded facilities to be OHS exemplars.
6.8.2 Inclusion of OHS in facility procurement/refurbishment/renovation policies, including improved Government procurement contracts.
6.8.3 WorkSafe Victoria involvement in reviews of OHS design guidelines and briefs for health and aged care facilities.
6.8.4 Opposition to the adverse OHS impacts of contract employment.

6.9 Other ANMF (Vic Branch) occupational health and safety priorities
The ANMF (Vic Branch) will continue to place priority on:
6.9.1 Building ANMF HSR capability by increasing representation, skills, confidence and effectiveness across all sectors.
6.9.2 Provision of OHS advice, resources and support to Organisers, HSRs and members.
6.9.3 Provision of advice on OHS impacts of:
   i. workforce changes, including the ageing nursing workforce, casualisation, work intensification; and community changes, such as increased obesity, rising levels of chronic disease and mental illness, substance abuse and violence, which affect nurses and midwives

6.9.4 Provision of training for HSRs.
6.9.5 Identification, pursuit and implementation of preventative strategies to reduce occupational injury and illness amongst nurses and midwives.

6.9.6 Pursuit of plans to prevent occupational diseases such as dermatitis, cancer and cardiovascular disease, and the assessment of hazard exposure and their consequences e.g. studies on nurses’ and midwives’ exposure to chemicals.

6.9.7 Pursuit of improvements in the collection and analysis of OHS data.

6.9.8 Co-operating with the ANMF Federal Office and other ANMF Branches on OHS issues.

7. **ANMF (Vic Branch) commitment**

7.1 The Australian Nursing and Midwifery Federation (Victorian Branch) will continue to promote and support the prevention of injury, illness and disease amongst nurses and midwives.

7.2 The Australian Nursing and Midwifery Federation (Victorian Branch) will continue to promote and conduct (and support others who wish to conduct) research into preventative strategies to reduce injuries and into the causes and prevention of occupational injury and illness, amongst nurses and midwives.

7.3 The ANMF (Vic Branch) will continue to support members in the prevention and reduction of injuries at the workplace level.

7.4 The ANMF (Vic Branch) will continue to increase the capability of the Organisation, especially Organisers, HSRs and Job Representatives, to respond effectively to OHS issues, and workplace disputes, and to recruit and support HSRs.

7.5 The ANMF (Vic Branch) will continue to support OHS education, including:

7.5.1 Standardisation of OHS education and training for nurses and midwives, and incorporation of OHS into professional and vocational education and training of nurses and midwives.

7.5.2 Provision of OHS training for Organisers.

7.5.3 Promoting and facilitating access of ANMF HSRs to education and resources, including ANMF conferences and seminars.

7.5.4 Increasing awareness, understanding and support of OHS and the HSR role amongst middle management, especially DONs and NUMs.

8. **Relevant legislation**

- Occupational Health and Safety Act 2004
- Occupational Health and Safety Amendment (Employee Protection) Act 2009
- Workplace Injury Rehabilitation and Compensation Act 2013
- Occupational Health and Safety Regulations 2007

9. **Relevant guidance**

- Compliance Code - Workplace amenities and work environment, September 2008
- Compliance Code - First Aid in the Workplace, September 2008
- ANMF (Vic Branch) Safe Patient Handling Policy
- ANMF (Vic Branch) Zero Tolerance (Occupational Violence and Aggression) Policy and Interim Guidelines
- ANMF (Vic Branch) Workplace Bullying Policy
- ANMF (Vic Branch) Glutaraldehyde Policy
- ANMF (Vic Branch) Building works and workplace design of healthcare facilities Policy
- ANMF (Vic Branch) On-site Decontamination Facilities Policy
- ANMF (Vic Branch) Smoke-Free Work Environment Policy