

BSBWHS410

Contribute to work-related health and safety measures and initiatives



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ASSESSMENT FOR BSBWHS410

Student name	Samantha Bailey
Date of assessment submission	Click here to enter a date.

Trainer/Assessor's name	
Date of assessment marking	Click here to enter a date.
Outcome for unit	☐ Competent ☐ Not Yet Competent

TASK INSTRUCTIONS

- The assessment for this unit of competency consists of the following:
 - A series of activities:** Some of these activities will require you to provide a response within this document, others will require you to gather evidence to demonstrate your knowledge and skills (overview below)
 - Quiz:** You will be required to complete a series of questions to demonstrate your knowledge and skills.
 - Practical task:** You will be required to have an observer attest to your knowledge and skills and sign a report to this effect.
- At times, you will be provided with a specific business context to which you must respond, otherwise it is anticipated that you will use a workplace of your choosing (your own, or hypothetical) to provide the context to the task.
- At all times, the responses in your assessment must reference **Australian** (Queensland or Federal) documentation, including legislation, regulations, codes of practice, standards and guidance publications.

ACTIVITY OVERVIEW	REQUIRED FOR SUBMISSION
1. Legislative and non-statutory measures	• Workbook response (below)
2. Consultation	• Workbook response (below)
3. Establishing measures	• Workbook response (below)
4. Ensuring compliance	• Workbook response (below)
5. Reviewing and evaluating measures	• Workbook response (below)

ACTIVITIES

For the following activities, name a workplace that you wish to examine.

Name of workplace	The Landscape Construction Company Pty Ltd
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ACTIVITY 1

- a) Identify and describe one (1) chemical hazard and one (1) physical hazard that workers may be exposed to.
- b) Research, name and describe one (1) health monitoring measure/initiative for workers exposed to the dangerous chemical identified in (a).
 - The health monitoring measure/initiative must involve biological monitoring
 - The health monitoring measure/initiative must meet requirements for health monitoring under the *Work Health and Safety Regulation 2011* (Qld)
 - Summarise its benefits and how it addresses the chemical hazard effectively
- c) Research, name and describe one (1) non-statutory health promotion program
 - Summarise its benefits and how it addresses worker health and safety effectively
- d) Identify the differences between these measure/initiative and program.
- e) Identify who would be interested in receiving this information
 - How would you communicate such findings to them and in what timeframe?

Identify and describe chemical hazard

Respirable crystalline silica – Silica.

Silica is silicon-dioxide, a naturally occurring and widely abundant mineral that forms the major component of most rocks and soils.

Found in:

- i. most rocks, sands, and clays
- ii. products such as concrete, mortar, brick, blocks, pavers, tiles, natural and composite stone benchtops
- iii. cement-based materials such as fibre-cement sheeting and autoclaved-aerated concrete

The most common type of crystalline silica is quartz. Quartz sands are used in building construction and other civil engineering activities.

Solid products are not classified as hazardous, however, the dust in, on or made by processes (cut, abraded, crushed) to the supplied product is hazardous and some particles may be small enough to go into deep parts of the lung when breathed in.

Source(s) of information:

Safe Work Australia – Crystalline Silica and Silicosis

Identify and describe physical hazard

Heat and humidity

If the body has to work too hard to keep cool or starts to overheat a worker begins to suffer from heat-related illness.

Heat strain can arise from working in high air temperatures, exposure to high thermal radiation or high levels of humidity

Risks of heat strain include; dizziness, fatigue, headache, nausea, breathlessness, clammy skin or difficulty remaining alert. There have been instances where heat strain has caused fatalities

Occurs when a person's environment (air temperature, radiant temperature, humidity and air velocity), clothing and activity interact to produce a tendency for body temperature to rise.

Extreme heat can cause heat stroke, heat cramps, heat exhaustion, heat rash and other problems due to fatigue.

- Heat rash can be caused by the blockage of the pores and sweat can't escape.
- Heat cramps. Muscles can cramp as a result of heavy sweating without replacing salt and electrolytes. –
- Fainting. Can occur when workers stand or rise from a sitting position.
- Dehydration. Increased sweating can lead to dehydration if workers aren't drinking enough water. Heat exhaustion. Occurs when the body is working too hard to stay cool.
- Heat stroke. Occurs when the body can no longer cool itself. This can be fatal.
- Slips. A worker will sweat more in hot conditions which can increase the risk of slips - for example, a worker might slip when using sharp tools if their hands are damp.
- Reduced concentration. When working in heat it is more difficult to concentrate and a worker may become confused. This means workers may be more likely to make mistakes, such as forgetting to guard machinery

Source(s) of information:

Managing the Risks of Working in Heat – Guidance Material. Safe Work Australia

Identify and describe health monitoring measure/initiative for chemical hazard

WHS Regulation 368, states a person conducting a business or undertaking must ensure that health monitoring is provided to a worker who uses hazardous chemicals, including silica. The PCBU needs to review worker RCS exposure data to determine if there is a significant risk to health. This can include air monitoring or if known that the work involves regular and ongoing exposure to silica.

Baseline health monitoring is required for workers who undergo health monitoring for exposure to scheduled hazardous chemicals before they start work with that chemical.

Safe Work Australia states the minimum health monitoring requirements for crystalline silica include:

- ♣ collection of demographic, medical and occupational history
- ♣ records of personal exposure
- ♣ standardised respiratory questionnaire
- ♣ standardised respiratory function tests, for example, FEV1, FVC and FEV1/FVC, and
- ♣ chest X-Ray full PA view (baseline and high risk workers only).

The PCBU must arrange for health monitoring to be done by a registered medical practitioner with experience in health monitoring. Record keeping is important for

workers exposed to this RCS hazard where diseases may have long latency (e.g. two or three decades). Records need to be kept for a period of 30 years. Note that exposed workers must be able to readily access their exposure records and must be provided with a copy of their health monitoring report. Only large workplaces with significant resources or those with specialist in-house expertise will be able to conduct their own silica monitoring. Most monitoring is conducted by consultant laboratories, private consultants, or occasionally by Workplace Health and Safety Queensland Inspectors. Sections 369-372 on duties relating to health monitoring:

Administrative duties for the PCBU relating to:

- Informing workers about the need for health monitoring for silica
- Ensuring that health monitoring for silica is provided
- Engaging a registered medical practitioner to conduct the health monitoring
- Paying for the health monitoring

Benefits:

- Baseline monitoring is done to establish a baseline so changes to the worker's health can be identified during periods of potential exposure
- Periodic monitoring - Can be monitored during periods of exposure to silica, particularly where excessive exposure occurs
- Identifies before commencing work if a worker should not be exposed to silica
- Indicates if action is required

Safe Work Australia has put out a new national guide for Working with silica and silica contained products. (September 2019)

Source(s) of information:

Safe Work Australia – Crystalline Silica and Silicosis

Safe Work Australia – Guide for Persons Conducting a Business or Undertaking - Health Monitoring for Exposure to Hazardous Chemicals

WorkCover Queensland

Identify and describe non-statutory health promotion program

TLCC introduced a Quit Smoking initiative a few years ago as part of the Workplace Quit Smoking Program run by Quitline. TLCC developed a poster to help promote and advertise the program and provided registration forms that were created specifically for TLCC staff based on the original Quitline registration forms.

In addition to the Workplace Quit Smoking Program, TLCC implemented a Smoking Policy and implemented smoking rules and creating a smoke-free environment for all construction sites and the head office.

Benefits:

- Creating a smoke-free environment is essential to having a fully healthy workplace
- Provides employees with resources to help those who smoke quit or for employees to help others quit
- Anyone who has successfully given up smoking can be recognised
- Staff who are wanting to quit can support each other if they are involved in the same program

- Having site rules for smoking eliminates the possibility of anyone smoking as it reduces the areas available or allowed times
- Quitting is much easier if supported by the workplace
- Raises awareness
- Shows workplace support and encouragement

Source(s) of information:

Quitline

TLCC Network

Differences between measure/initiative and program

Measures are used to promote and manage the initiatives and can include:

- Management support
- Policies
- Procedures
- Reviews
- Inspections
- Health audits

Whereas, initiatives are health and safety programs developed by workplaces to promote a culture of health and well-being by the worker and aim to reduce the risk of injury or disease.

For silica:

Measure – baseline and periodic health monitoring

- Meet statutory obligations
- Comply with laws and legislations
- WHS Regulations – PCBU duty to provide health monitoring to workers if the worker is carrying out ongoing work at a workplace using, handling, generating or storing hazardous chemicals or asbestos
- Health assessment for workers
- Mandatory

Health promotion program:

- Developed specifically to encompass health and wellbeing
- Designed specifically to suit the workplace
- Holistic approach and not just directed at measuring or monitoring silica or other hazardous substances
- Voluntary

Communication of findings

Workers including site supervisors and management would be interested in the above findings.

I would deliver findings:

- Through presentations
- Toolbox talks
- Informal discussions
- Reports
- Providing them with information and also allowed for the opportunity to provide feedback and opinions

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Outcome for Activity 1	☐ Satisfactory ☐ Not satisfactory
Trainer/Assessor comments	

ACTIVITY 2

For each of the following matters, identify two (2) individuals and/or parties who you would consult with and outline why you would consult with them:

- a) To assist with identifying and evaluating factors impacting on work-related health and safety
- b) To assist with determining appropriate measures and initiatives to address factors impacting on work-related health and safety
- c) To assist with designing measures and initiatives that either meet specific legislative requirements and obligations or support non-statutory health promotion programs.

	Identify two (2) individuals and parties	Why you would consult with them
a)	Individual/Party 1: Workers and site personnel	Reliable data on hazards Affected by hazards in the workplace It is a requirement to consult with workers under WHS Act & Regulation To gain effective and consistent feedback throughout the process.
	Individual/Party 2: HR, HSQ Advisor	Identify trends in workplace incidents/sicknesses Worker files – history Access health management system
b)	Individual/Party 1: Managers	Create WHS awareness and culture Allow for measures/ initiatives opinions and views to achieve success Feedback and views on what they believe will work as a whole within the company Overall perception on past and future WHS within the company
	Individual/Party 2: Worker/ site personnel	To ensure ownership of the measure/initiative Create WHS awareness and culture Allow for measures/ initiatives opinions and views to achieve success To achieve an agreed method for implementation Section 371 – WHS Regulations – must consult with the worker in relation to the selection of the registered medical Practitioner (if required)
c)	Individual/Party 1: Health care professionals and external expert (	Allow for measures/ initiatives opinions and views to achieve success WHS Regulation 370 – a PCBU must ensure health monitoring of a worker that is recommended by registered health medical practitioner with experience in health monitoring. To ensure and assist with complying with legislation
	Individual/Party 2: Workers/ committees/ managers/ site personnel	Allow for measures/ initiatives opinions and views to achieve success To improve worker morale, performance and participation This will result in better implementation and continuous improvement

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Outcome for Activity 2	☐ Satisfactory ☐ Not satisfactory
Trainer/Assessor comments	

ACTIVITY 3

To assist with the planning and development of the health monitoring measure/initiative measure you identified in Activity 1(b) undertake the following tasks (refer to organisational policies, procedures, processes and systems as required):

- a) Identify resourcing requirements
 - Outline the involved cost and how it should be implemented in the workplace
 - How would you be involved in organising the resources?
- b) Identify timelines for implementation
 - How might you assist with timetabling?
- c) Identify parties who would be involved and their responsibilities
 - How would you liaise with and coordinate parties?
- d) In what ways would you provide communication about the measure?
 - Who would you need to seek permission from according to workplace policies, procedures and processes (or under the Work Health Management System)?
 - In what timeframes would you communicate this information?

	Response
a)	Health monitoring – silicosis Silica dust Section 372 WHS Regulation outlines a person conducting a business or undertaking must pay all expenses relating to health monitoring. Costs will include: • Doctor's fees • Testing and analysis costs • Travel costs • And any costs for time off work to attend medical appointments for any testing If monitoring and testing is required for workers, I would research the above costs and present to management in a spreadsheet comparing the prices and quality of testing. TLCC IMS states that directors have delegated the responsibility for purchasing for the efficient operation of the business and all costs involved will be approved by management before purchasing. I would also: • Check TLCC Safety Management Plan and safety documentation for all company procedures, processes, systems and policies • Check WHS Act, Regulations, standards, codes of practices and guides in relation to planning and development of the health monitoring measure/initiative • Seek expert advice or research for information on requirements Resources for health monitoring of silica would include: • PPE – including respirators and or dust masks to be used when working with silica to monitor workers health to determine controls • Silica SDS • Workers, management, site supervisors and all site personnel • HR and HSQ department • Legislation and guidelines • TLCC safety documentation • Engaging a registered medical practitioner experienced in health monitoring to do the health monitoring • Obtaining records of worker and/ or silica exposure from previous work • The health monitoring will then include:

	• X-rays • Gathering information from medical and occupational history • Standard respiratory function test	
b)	Identify silica exposure exists on site	Workers Project Managers Site Supervisors HSQ Department
	Ask site supervisors and workers to complete a HOIN report to raise a HOIN on the register for tracking progress and implementation of measure and controls	Workers Site supervisors
	May require to conduct air monitoring or sampling of workplace to determine significant hazard – must be done immediately and results presented in a timely manner	Occupational hygienists Workers Site supervisors Management HSQ
	As soon as workplace silica determined if it a significant hazard - health monitoring would be put forward to management for approval	HSQ to present to management
	Research: • Legislation • previous workplace and/ or company silica history • obtain worker records • costs involved • resources required • guidelines	HSQ department HR Department Management
	Present above information to management for approval	HSQ and management
	Obtain permission to do health monitoring	HSQ, HR Workers
	Engage medical practitioner and information presented to them	HSQ and medical practitioner
	Conduct health monitoring	All stakeholders
	Reports	Medical Practitioners Workers HSQ Department WHSQ and WorkCover
	Monitoring implementation – all stakeholders to be consulted when monitoring to gain views and feedback	HQ department Medical practitioners Workers Medical practitioners Site personnel
	Reviews all stakeholders to be consulted when reviewing and	HSQ Department Management

	evaluating to gain views and feedback	Workers Medical practitioners Site personnel
c)	Workers/ site personnel	Stakeholders being monitored Must seek permission from workers before monitoring Workers will provide information on exposure and other hazards Allow for measures/ initiatives opinions and views to achieve success Feedback and views on what they believe will work as a whole within the company
	Site Supervisors	Can provide information on exposure and other hazards Assist with the monitoring and on-site organisation Monitoring implementation Provide feedback and opinions
	Managers	Responsible for approving funds involved Responsible for approving monitoring and assist with consultation Feedback and views on what they believe will work as a whole within the company
	HR Department	To obtain worker information Assistance with consultation with workers assist with worker records and filing confidential information
	HSQ Department	To obtain worker information and records Obtain stats and other history regarding silica in the company Assist with legislation requirements Assist with the monitoring and on-site organisation Assistance with consultation with workers Assist with worker records and filing confidential information Assist with reporting Regular reviews of roll out and any controls used
	Medical Practitioners	To conduct the health monitoring

	External Experts	Seek advice from external experts – equipment, monitoring, legislation requirements, controls, guidance
	WHSQ	Require health monitoring report
d)	In what ways would you provide communication about the measure? - Who would you need to seek permission from according to workplace policies, procedures and processes (or under the Work Health Management System)? In what timeframes would you communicate this information? I would provide communication about the measure by: - Following TLCC policies, procedures, processes and systems - Checking law and regulation requirements - Toolboxes or a group presentation - initial communication and introduction to measure - Followed by site meeting – site specific pre-starts - Present a reports and/ or presentation to show progress, and provide opportunity for ongoing feedback and opinions – keeping in mind to not disclose any confidential information re workers results Gain permission and approval: - For monitoring from workers as well as management - For costs and resources involved from management - For obtaining worker information and company history from HR and management as well as workers - From all site personnel Communication will need to be done in a timely manner to all stakeholders involved with the hazard, implementing risk controls, any management in control of approving funds. Health Monitor Report: - provided to the worker at all times - Regulator (WHSQ) if the report contains i) Any advice that test results indicate worker may have contracted a disease, injury or illness as a result of carrying out work with the hazardous chemical ii) A recommendation that the PCBU take remedial measures - Submitting reports – WHSQ requires a copy of the health monitoring report even if WorkCover Queensland has been notified.	

Outcome for Activity 3	☐ Satisfactory ☐ Not satisfactory
Trainer/Assessor comments	

ACTIVITY 4

For the following points, identify and outline the obligations according to legislation and explain how they will be addressed for the health monitoring measure described in Activity 3:

- a) Required consultation and participation with individuals and parties about all aspects of the health monitoring measure
- b) Health monitoring reporting
- c) Maintaining confidentiality of health monitoring results

Required consultation**Legislation name and relevant section**

WHS Regulations
Sections 369 – 372 on duties relating to health monitoring

Section 369 – Duty to inform of health monitoring

Section 371 - Duty to ensure health monitoring is supervised by registered medical practitioner with experience

Obligations

You must talk with your workers and their elected Health and Safety Representative (HSR) (if represented) about health and safety at your workplace. This includes talking about all matters relating to silica dust.

Workers must be consulted on health and safety matters including (but not limited to):

- identifying risks of silica dust exposure
- developing a silica dust control plan
- making changes to processes or procedures that generate silica dust
- improving controls put in place to protect workers from silica dust
- resolving health and safety issues
- health monitoring
- monitoring the conditions at the workplace, and
- providing information and training for workers.

Guidance material – Working with Silica and Silica Containing Products

Section 369 Duty to inform of health monitoring

A person conducting a business or undertaking who is required to provide health monitoring to a worker must give information about the health monitoring requirements to— (a) a person who is likely to be engaged to carry out work using, handling, generating or storing a hazardous chemical; and (b) a worker for the business or undertaking, before the worker commences work using, handling, generating or storing a hazardous chemical.

371 Duty to ensure health monitoring is supervised by registered medical practitioner with experience

(1) A person conducting a business or undertaking must ensure that the health monitoring of a worker mentioned in section 368 is carried out by or under the supervision of a registered medical practitioner with experience in health monitoring.

(2) The person must consult the worker in relation to the selection of the registered medical practitioner.

How legislative obligations will be addressed

- informing workers about the need for health monitoring for silica
- providing workers with all information regarding silica and the health monitoring measure

- ongoing updates even after the initial communication – may be done via toolboxes, presentations, informal discussions and emails
- encouraging participation of workers in discussions, as they will most likely know the risks more and also help build worker commitment

Health monitoring reporting

Legislation name and relevant section

WHS Regulation 375 - 377– PCBU has a duty to provide health monitoring report to worker, WHSQ and any other PCBU who employs the worker in work which involves silica exposure

Obligations

Regulation 375 - PCBU has a duty to provide health monitoring report to worker
 Regulation 376 - A person conducting a business or undertaking for which a worker is carrying out work for which health monitoring is required must give a copy of the health monitoring report relating to a worker to the regulator as soon as practicable after obtaining the report.

How legislative obligations will be addressed

- Registered medical practitioner will provide a Hazardous Chemical Health Monitoring Report to the PCBU
- Report provided to worker and also readily available on request at all other times
- Form completed – Hazardous Chemical Health Monitoring Report by registered medical practitioner
- Report to be provided to WHSQ if:
 - the report contains advice that the worker has a silica related disease or illness; or
 - the registered medical practitioner has made a recommendation for remedial measures to be taken in the workplace (e.g. improve ventilation, provide better respiratory protection), including whether the worker should continue in work exposed to the silica. It may contain information such as a recommendation that particular chronically over-exposed workers should refrain from further dust exposure

Confidentiality of health monitoring results**Legislation name and relevant section**

Privacy Act

WHS Regulation 378 – Health Monitoring Records

Obligations

WHS Regulation 378 – 1) A person conducting a business or undertaking must ensure that health monitoring reports in relation to a worker carrying out work for the business or undertaking are kept as a confidential record—

(a) identified as a record in relation to the worker; and

(b) for at least 30 years after the record is made

2) The person must ensure that the health monitoring report and results of a worker are not disclosed to another person without the worker's written consent.

How legislative obligations will be addressed

Hard copy files kept in locked up filing cabinet

Electronic files kept in a folder on a network that has limited access and locked with a password

All records and discussions are kept confidential

Conversations and/ or interviews done in private

TLCC Privacy policy, procedures and processes developed and followed

Outcome for Activity 4☐ Satisfactory☐ Not satisfactory**Trainer/Assessor comments**

ACTIVITY 5

Explain how you would engage in review and evaluation of the health monitoring measure/initiative described in Activity 3:

- a) Identify methods you would use to review and evaluate the measure
 - How would you be involved in the review process?
- b) Explain how you might assist with preparing reports (and communicating) about the outcomes of your review
 - What would be the purpose of the report?
 - Who would be included in the target audience?
 - How would digital systems and tools assist with completing record-keeping tasks?

	Response
a)	Methods for reviewing and evaluating: • feedback survey • toolbox talks • consultation • informal discussion on sites • comparison tables and presentations • review company registers – sick leave, HOIN register for comparing stats • review monthly safety stats • Regular review of progress and rollout of the initiative • Discussions/ meetings with workers and site personnel as well as management and project managers • Monitoring or site inspections • Check records such as workers compensation, sick leave and absences I would also check TLCC's IMS and all safety documentation for policies, procedures, process and systems regarding reviewing. The above methods would be used to: • track stats to identify changes • identify any changes to hazards or any new hazards • evaluate if the risk has been reduced or eliminated • paint a truer picture of how the measures and initiatives are progressing • consultation will create WHS awareness, allow opportunities for feedback and identifying any areas which may need extra training or information, etc.
b)	Target audience – workers, PCBU's, site personnel, HSQ department and management. These stakeholders will include people who work in the hazard, involved in the collection of data, responsible for implementing risk controls, who are managers responsible for funds approval and any worker representatives The purpose of the report would be to: • present results • compare stats • explain the purpose of the monitoring and what was done • interprets the findings and results • shows evidence that monitoring was performed, and results have been achieved • allow for further discussion • conclude with whether the program should be continued, be modified, substituted for another method/ initiative or ended.

	Digital systems and tools would assist with completing record-keeping tasks by: • maintaining registers • site documents – truer statistics coming from site • easily retrievable, legible and appropriate • shows accurate and current company stats
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Outcome for Activity 5	☐ Satisfactory ☐ Not satisfactory
Trainer/Assessor comments	

QUIZ

QUESTIONS	CORRECT
1. Which of the following factors may impact on work-related health and safety? Select all that apply. ☒ Non-work related health and safety problems ☒ Legislative requirements and obligations ☒ Lifestyle factors ☒ Psychosocial factors (e.g. stress, bullying, fatigue)	☐
2. Development and planning of work-related health and safety measures and initiatives may require you to consult with which of the following parties? Select all that apply. ☒ Health and wellbeing specialists ☒ Government bodies ☒ Human Resources Department within your workplace ☒ Unions	☐
3. When reviewing and evaluating a work-related health and safety measure, which of the following might you refer to? Select all that apply. ☒ WHS legislation ☒ Exposure standards ☒ Privacy legislation ☒ Common law rights and duties	☐
4. When implementing a work-related health and safety measure/initiative, a workplace must elect to implement a measure to address specific legislative requirements or a non-statutory health promotion program. They cannot implement both. ☐ True ☒ False	☐
5. Non-statutory health promotion programs may make reference to privacy legislation, but are not obliged to follow such legislative requirements. ☒ True ☐ False	☐

Outcome for Quiz	☐ Satisfactory ☐ Not satisfactory
Trainer/Assessor comments	

PRACTICAL TASK

You are required to have a suitable observer verify your ability to complete the following tasks. These tasks may be simulated (using the handouts provided) or real.

TASKS	VERIFIED
A. Consult with others about a WHS measure/initiative designed to meet legislative requirements and a non-statutory health promotion program: • Differentiate between the legislative measure/initiative and non-statutory program • Identify the WHS issues that the legislative measure/initiative and non-statutory health program address • Determine effectiveness of measure/initiative/program, considering costs and benefits	☐
B. Consult with others about how to modify and implement the legislative measure/initiative and non-statutory program to meet the requirements of the workplace. Identify processes for: • Coordinating resource requirements • Timetabling and timelines • Consulting and communicating with others • Encouraging participation of workplace members	☐
C. In group interactions, play an active role in facilitating effective group interaction, influencing direction and taking a leadership role on occasion.	☐
D. Review/evaluate measures/initiatives to ensure they are compliant with legislation (WHS and other), and workplace policies and processes. • Highlight required changes and how they can be implemented	☐
E. Present findings in electronic report for various parties in the workplace (e.g. workers, health and safety committees, health and safety representatives, managers, supervisors and PCBUs or their officers), using correct vocabulary and grammar.	☐
Name of observer	
Role of observer (Confirm their suitability to sign)	☐ Trainer/Assessor ☐ Other (specify):
Phone number of observer	
Email address of observer	
Signature of observer	
Date	Click here to enter a date.
Comments	

Outcome for Practical Task	☐ Satisfactory ☐ Not satisfactory
Trainer/Assessor comments	