BSBWHS410

Contribute to work-related health and safety measures and initiatives

ASSESSMENT FOR BSBWHS410

Student name	Jacquelene Liew Mei Hui
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	

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

Substances or wastes liable either to cause death or serious injury or to harm human health if swallowed or inhaled or by skin contact

The hazard classification of a chemical determines what information must be included on labels and Safety Data Sheets to comply with the WHS Regulations. If the classification of a hazardous chemicals changes or new information comes to light, the label and SDS must be reviewed and revised..

Source(s) of information:

Identify and describe physical hazard

Hazards are things or situations which have the potential to cause harm including psychological injury.

Workers' psychological and physical health can be adversely affected by exposure to a poorly designed or managed work environment, a traumatic event, workplace violence, fatigue, bullying or harassment and excessive or prolonged work pressures. Any of these factors can increase the likelihood of workers experiencing a stress response.
Stress responses describe the physical, mental and emotional reactions which arise when workers perceive that their work demands exceed their ability to cope. Job stress is not in itself a disorder, illness or psychological injury. If job stress is excessive or prolonged it may lead to psychological or physical injury.
Increased frequency or duration of stress responses have been linked with high levels of unplanned absences including sick leave, staff turnover, withdrawal and presenteeism and more task errors. It can be a significant cause of injury or illness which may lead to depression and anxiety in the long term.

Source(s) of information:

Identify and describe health monitoring measure/initiative for chemical hazard
The procedures must provide for the following additional matters, as are appropriate, having regard to the nature, size and complexity of the blasting— (a) keeping air blast, air overpressure, dust generation, fly rock, ground vibration and noise within acceptable limits; (b) keeping the effect on ground stability to as low as practicable; (c) keeping blast times within worker and community expectations for blasting; (d) finalising blast design and firing sequence; (e) recording the results of blast monitoring at the mine, including the monitoring of ground vibration. Source(s) of information:
Identify and describe non-statutory health promotion program
A number of factors contribute to the overrepresentation of small businesses within workplace illness and injury statistics. Small businesses often have a recurrent presence in high fatality-rate industries such as construction (MacEachen et al. 2010; Lingard and Holmes 2001), there are higher frequencies of physical, ergonomic and chemical hazards associated with small business workplaces (MacEachen et al. 2010), and small business workforces are often younger, less educated and less experienced (Champoux and Brun 2003). This point has been reiterated in a recent Australian study which highlighted the relationship between firm size and the probability of structured work-related training occurring, particularly in areas such as health and safety (Waddoups 2011). This research found that SMEs typically provide significantly less training than in larger businesses, particularly in the area of WHS. Other research indicates that smaller businesses are less likely to adopt workplace health promotion programs (McCoy et al. 2014) or workplace safety activities (Sinclair and Cunningham 2014).. Source(s) of information:
Differences between measure/initiative and program
The measurement and analysis of WRII is a challenging task because injuries and illnesses are not homogenous outcomes. Instead, they are driven by a diverse range of causes and contributing factors and can differ significantly in their physical, mental, social and economic consequences.11 Consequently, a single measure of WRII occurrences is far too aggregated to inform the various decisions that policymakers, boards, managers, employees and other stakeholders seek to make. The dissection of WRII outcomes into meaningful and decision-relevant subsets, categories or classifications is a subjective exercise. 12 The same data may need to be classified in different ways (e.g. according to frequency, severity, bodily location or agency) so as to provide useful information for different end-users. Further, the boundaries between different categories are often difficult to define, thus leaving classifications contested and poorly understood. This is partly attributable to choices about boundaries being framed by the available knowledge and experience at the time. Categories must therefore be reviewed and reassessed as knowledge advances. Accordingly, there is no single, scientifically ‘correct’ classification system or approach for the organisation of WRII into meaningful categories capable of informing strategy, programs or other

issues of interest. Instead, as with all information gathering exercises, particular classification and
measurement choices must be tailored to ensure each of the resulting measures provides high quality
data that is 'fit for purpose'. The over-riding requirement is that measures are:13
• Valid: actually measure what they purport (claim) to measure
• Relevant: meet their intended purpose (i.e. are useful for informing decision(s), noting that different information may be relevant to different users and decisions), and
• Reliable: are complete, free from omission, bias and error.
Anecdotal evidence points to a lack of reliability and comparability in WRII reporting and invalid
conclusions drawn from inappropriate selection of WRII data. In turn, this suggests a poor level of
understanding of both the history of WRII measurement and the principles that underpin current
measurement practices.
14 Issues arising from the safety triangle may contribute to this confusion.

Program for Health and safety capabilities is one of seven key Action Areas under the Australian Strategy. Every person requires the capabilities – the knowledge, skills and resources – to fulfil their role in relation to work health and safety

Communication of findings

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	The way to eliminate or minimise risks
	Individual/Party 2: Engineer	Identifying hazards and assessing risks arising from work
b)	Individual/Party 1: supervisor	Adequacy of facilities for workers' welfare at work.
	Individual/Party 2: Site worker	To monitoring the health of workers or workplace condition
c)	Individual/Party 1: worker	Provide procedures for resolving health and safety issues
	Individual/Party 2: worker	Provide procedure for monitoring the health of workers or workplace conditions, and to provide health & safety information and training to workier

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)	-Complying with work health and safety laws. -Reporting a workplace incident. -Renewing or applying for licences. -Injury and workers' compensation claims. -Workers' compensation insurance and premiums. -Registration and notification of plant and plant designs. -Health and safety representative training. -Work health and safety training and assessment .
b)	To be plan and log in yearly plan, will be following by implementation by quarterly. Process to be update in weekly HSE meeting on action plan and etc.
c)	HSE team member including HSE assistant, HSE executive, HSE Engineers Planning to be separate in few part and distribute by each different HSE person to get in charge and update the progress on the development of the health monitoring measure/initiative measure..
d)	Information to be place on thelink and advertise in tv showing in Technip building. Once planning proposal has done, final review and approver to be approve by TPGM HSE Management & VP HSE APAC.

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

http://www.safeworkaustralia.gov.au/sites/SWA/about/Publications/Documents/754/Guide-PCBU-Health-Monitoring-Exposure-Hazardous-Chemicals.pdf
Section 3.1 Consultation with the workerf

Obligations

The Safe Work Australia publication Health Monitoring for Exposure to Hazardous Chemicals:
Guide for Workers provides general information about health monitoring for exposure to hazardous chemicals. This publication is suitable for use by workers and it is recommended
it is provided to workers who may require health monitoring.
Workers must be consulted regarding the selection of the registered medical practitioner who will supervise or perform the health monitoring.
Workers should also be told:
possible health effects from exposure*
health monitoring is a legal requirement in the WHS Regulations
what a program of health monitoring aims to achieve and its benefits*
what is involved in the health monitoring program, for example the frequency of testing and which tests, such as blood tests and respiratory tests, may be needed*
any requirement for them to see a doctor or specialist
how a registered medical practitioner is chosen and their qualifications
how to report symptoms
who pays for the health monitoring
if and how monitoring results may affect their work tasks, for example explaining circumstances where the worker may need to move to other tasks
the record keeping requirements
health monitoring results are confidential and can only be disclosed to the regulator, the business or undertaking they work for, other PCBUs who have a duty to provide health monitoring for the worker, or another registered medical practitioner involved in the health monitoring, unless their consent is otherwise given.

How legislative obligations will be addressed

Health monitoring must be carried out by or be done under the supervision of a registered medical practitioner with experience in health monitoring. Other than the medical practitioner having experience in the provision of health monitoring, there are no restrictions on who the medical practitioner is or by whom they are employed. For instance, practitioners may be single practitioners in a medical practice, occupational physicians who work for specialist occupational health organisations or they may provide specialist services and testing in certain areas of health monitoring like respiratory screening and chest X-rays.

The medical practitioner should prepare a program of health monitoring and either carry out the health monitoring program themselves or supervise the program undertaken by another suitably qualified person like an occupational health nurse. The medical practitioner has the overall responsibility for health monitoring, however, they may need to seek advice from other professionals like an occupational physician, and may

need to consult with other workplace health and safety professionals.

Health monitoring reporting
Legislation name and relevant section
http://www.safeworkaustralia.gov.au/sites/SWA/about/Publications/Documents/754/Guide-PCBU-Health-Monitoring-Exposure-Hazardous-Chemicals.pdf Section 4.1 Content of health monitoring report
Obligations
On receiving the health monitoring report, you should check it contains: the name and date of birth of the worker the name registration number and signature of the registered medical practitioner name and address of the business or undertaking the date health monitoring was carried out any test results that indicate whether or not the worker has been exposed to a hazardous chemical; for lead – any test results that indicate the worker has reached or exceeded the relevant blood lead level for that worker under regulation 415 of the WHS Regulations any advice that test results indicate the worker may have contracted a disease, injury or illness as a result of carrying out the work that triggered the requirement for health monitoring any recommendation that remedial measures be taken, including whether the worker can continue to carry out the type of work that triggered the requirement for health monitoring whether medical counselling is required for the worker in relation to the work that triggered the requirement for health monitoring. The report should also contain: the date of sampling if blood, urine or other samples are taken results of biological monitoring and other tests carried out; for inorganic lead, the report must also contain the details of the pathology service used to carry out tests
How legislative obligations will be addressed
The health monitoring report should only contain information relating to the health monitoring program for the chemical(s) being used. It should not contain other confidential health information on workers, unless there is an obligation the PCBU should know. The report will not contain details of medical conditions disclosed to or diagnosed by the medical practitioner conducting the health monitoring if these have no relevance or bearing on the work being performed. If the worker has a pre-existing medical condition which may exacerbate the health effects of chemicals, it may be useful if this is brought to your attention so appropriate measures can be put in place. However, details of pre-existing medical conditions can only be included in the health monitoring report with the worker's written permission. The medical practitioner will inform you of pastimes to be avoided, like tobacco smoking, or dietary intakes which may exacerbate the effects of hazardous chemicals being used.

Confidentiality of health monitoring results
Legislation name and relevant section
http://www.safeworkaustralia.gov.au/sites/SWA/about/Publications/Documents/754/Guide-PCBU-Health-Monitoring-Exposure-Hazardous-Chemicals.pdf 4.3 Record of health monitoring reports
Obligations
Health monitoring reports for workers must be identified as a record in relation to that worker. These records should be kept separate from information obtained for other purposes, for example records of examinations that are not connected with health monitoring.
How legislative obligations will be addressed
CONFIDENTIALITY Health monitoring reports and results must be kept as confidential records and must not be disclosed to another person without the worker's written consent, except where the records are required to be given under the WHS Regulations to any of the following: the regulator another PCBU who has a duty to provide health monitoring for the worker a person who must keep the record confidential under a duty of professional confidentiality. Note: health monitoring may include longer-term epidemiological studies. Health monitoring reports should be kept separate from normal workers' records like payroll or human resources data, to prevent the reports being accessed inadvertently by unauthorised people. The report cannot be used for any purpose other than for health monitoring. Similarly, blood or tissue samples, X-rays, questionnaires or other materials taken for health monitoring must not be used for any other purpose.

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)	Health monitoring means monitoring of a person to identify changes in the person's health status because of exposure to certain substances. Health monitoring must be carried out by or be done under the supervision of a registered medical practitioner with experience in health monitoring. There are different types of health monitoring procedures used to assess exposure to hazardous chemicals, including **Interview questions:** This involves asking the worker questions about previousoccupational history, medical history, lifestyle (for example dietary, smoking and drinking habits), and about symptoms related to exposure. It may also involve simple questions about how workers carry out their work, their personal hygiene at work or where they eat in the workplace. All of these questions provide information to assess current or previous exposure to hazardous chemicals. **Medical examination** This involves the use of standard clinical and medical assessments, tests and techniques to assess the presence of early or long term health effects, often at set intervals. It can include an assessment of medical history, occupational and previous exposure history, and a clinical examination. This can also include tests like spirometry (for testing lung function) and radiography, for example, a chest X-ray. **Biological effect monitoring** This is the measurement and assessment of early biological effects before health impairment occurs in exposed workers, for example measurement of reduction of cholinesterase activity levels in workers exposed to organophosphate pesticides. **Biological exposure monitoring** This involves measurement and evaluation of the levels of a hazardous chemical or its metabolites (break-down products) in body tissues, body fluids like urine or blood —for example blood lead levels, urinary cadmium—or in exhaled breath of an exposed person. :
b)	You must take all reasonable steps to obtain a health monitoring report from the practitioner who is carrying out or supervising the monitoring as soon as practicable after the completion of the monitoring program, or at regular intervals for longer-term or ongoing health monitoring programs. 4.1 Content of health monitoring report On receiving the health monitoring report, you should check it contains: the name and date of birth of the worker the name registration number and signature of the registered medical practitioner name and address of the business or undertaking the date health monitoring was carried out any test results that indicate whether or not the worker has been exposed to a

	hazardous chemical; for lead – any test results that indicate the worker has reached or exceeded the relevant blood lead level for that worker under regulation 415 of the WHS Regulations any advice that test results indicate the worker may have contracted a disease, injury or illness as a result of carrying out the work that triggered the requirement for health monitoring any recommendation that remedial measures be taken, including whether the worker can continue to carry out the type of work that triggered the requirement for health monitoring whether medical counselling is required for the worker in relation to the work that triggered the requirement for health monitoring. The report should also contain: the date of sampling if blood, urine or other samples are taken results of biological monitoring and other tests carried out; for inorganic lead, the report must also contain the details of the pathology service used to carry out tests. The workers, all PCBUs who a duty to provide health monitoring for the worker are involved would be included in the target audience. Health monitoring reports should be kept separate from normal workers' records like payroll or human resources data, to prevent the reports being accessed inadvertently by unauthorised people. The report cannot be used for any purpose other than for health monitoring. Similarly, blood or tissue samples, X-rays, questionnaires or other materials taken for health monitoring must not be used for any other purpose.

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	Nhakhorn Somchit
Role of observer (Confirm their suitability to sign)	☐ Trainer/Assessor ☒ Other (specify): Project HSE Manager
Phone number of observer	+603 21186298
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Signature of observer	Technip Checked by Nhakhorn Somchit 2016.10.27 14:26:47 +08'00'
Date	Click here to enter a date.
Comments	

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