

Health, safety and wellbeing governance guideline

Human Resources Guideline (QH-GDL-401-6)

1 Statement

This document provides guidance on the *Health, safety, and wellbeing governance standard* and may be used to assist each **accountability area** to discharge legislative work, health and safety (WHS) duties and Queensland Health's health, safety and wellbeing (HSW) **governance** obligations.

2 Scope

This guideline supports implementation of the *Health, safety and wellbeing governance standard* within each Queensland Health accountability area, meaning the Department of Health (the Department) and hospital and health services (HHSs).

Reference to requirements are to those set out in the *Health, safety and wellbeing governance standard*.

Conformance with this guideline is not mandatory, but sound reasoning must exist for departing from the recommended principles within this guideline.

3 Acknowledgement

A decision maker has an obligation under the *Human Rights Act 2019* to act and make decisions in a way that is compatible with human rights. When making a decision under this Standard, the delegate is to give proper consideration to human rights.

Queensland Health is committed to supporting a reframed relationship with Aboriginal peoples and Torres Strait Islander peoples in accordance with Chapter 1 Part 3 of the *Public Sector Act 2022*.

Aboriginal and Torres Strait Islander workers have the right to a culturally safe workplace, free of racism and inequity, ensuring they are valued, respected and empowered in the delivery of world-class health services, each working to the top of their scope of practice.

The purpose of these principles will be achieved by ensuring active steps are taken to -

- recognise the importance to Aboriginal peoples and Torres Strait Islander peoples of the right to self-determination and promote the perspectives of Aboriginal and Torres Strait islander peoples; and
- foster a culturally capable workforce and a culturally safe workplace by developing cultural capability at all levels, to every day embed cultural practices across the health system in Queensland.

All delegates and employees have a responsibility to apply these principles when implementing the ***Health, safety and wellbeing management system framework***.

3.1 Diversity and inclusion considerations

When establishing a HSW governance framework, the specific needs and requirements of different diversity groups should be considered, to ensure WHS duties are fulfilled, taking into consideration factors including neurodiversity, gender identity, sexual identity, age and individual health factors; Aboriginal and Torres Strait Islander cultural safety and the cultural and linguistic requirements of the workforce.

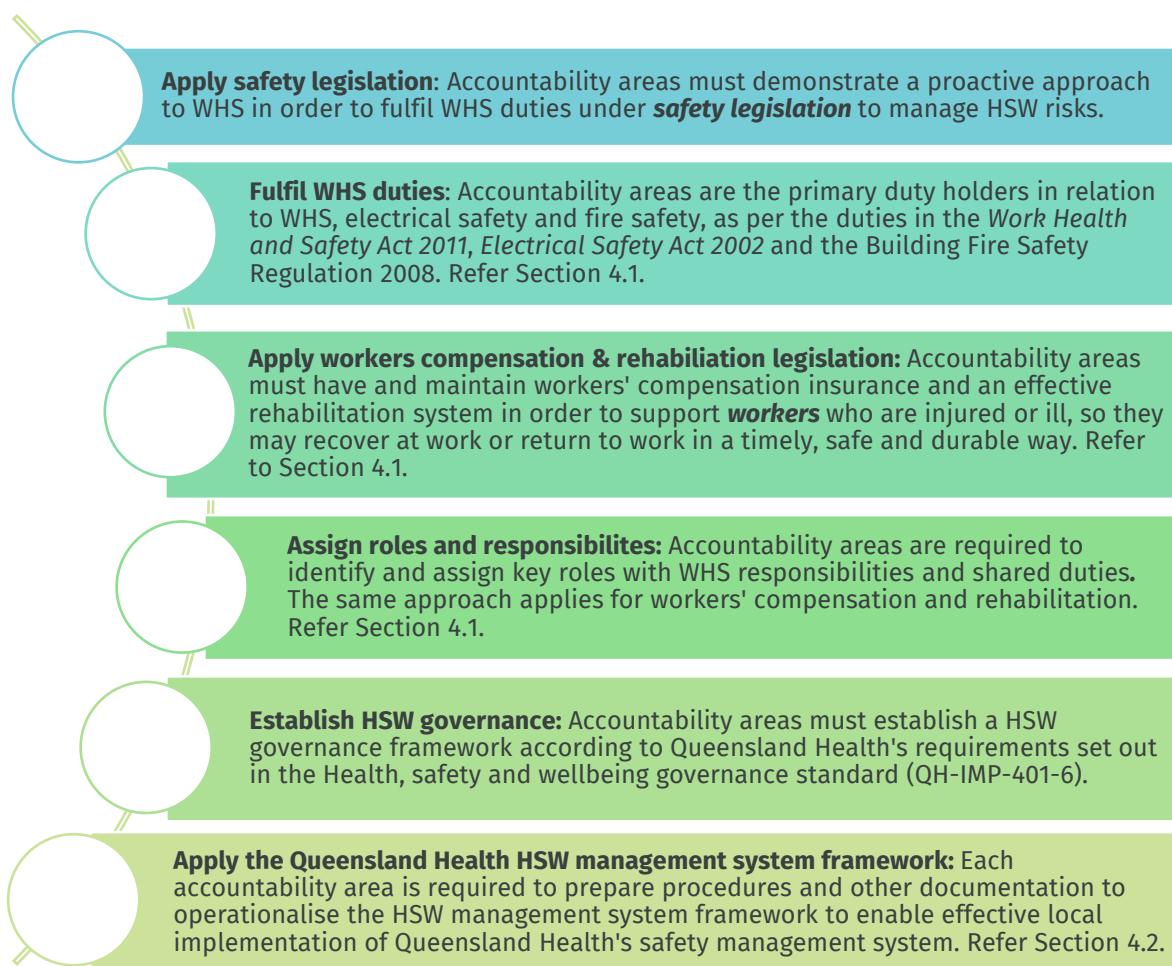
The cultural requirements of Aboriginal and Torres Strait Islander workers, accessibility requirements of people with disability and the cultural and linguistic requirements of workers from culturally and linguistically diverse (CALD) backgrounds, are all important to consider to facilitate worker participation in HSW governance. A HSW governance framework, inclusive of worker consultation committees, peak health and safety management committees and executive forums, will be most effective when designed to meet the specific needs and requirements of the different diversity groups represented in the workforce, who participate in decision making, consultation and compliance reporting.

Consideration must be given to ensuring that the HSW governance committees and any associated documentation take into account the characteristics of the workers, including language requirements and literacy levels.

4 Requirements

A summary of key actions to guide implementation of the *Health, safety and wellbeing governance standard* is set out in Figure 1.

Figure 1: Key actions for Health, safety and wellbeing governance



Further detail to Figure 1 is provided in sections 4.1 and 4.2 of this guideline.

4.1 Work health and safety duties

This section supports sections 4 and 5 of the *Health, safety and wellbeing governance standard*.

Work health and safety in Queensland is governed by a wide range of legislation, regulatory standards and codes of practice.

The scope of the Health, safety and wellbeing management system framework ensures Queensland Health workplaces focus on complying with the following **safety legislation**:

- Work Health and Safety Act 2011
- Work Health and Safety Regulation 2011
- Electrical Safety Act 2002
- Electrical Safety Regulation 2013
- Workers' Compensation and Rehabilitation Act 2003
- Worker's Compensation and Rehabilitation Regulation 2014

- Building Fire Safety Regulation 2008
- Hospital and Health Boards Act 2011
- Relevant Codes of Practice and Australian Standards

Additional WHS-related legislative compliance requirements are also outlined at Section 5 of this guideline and may also be identified by individual accountability areas, specific to local business operations, and implemented in the **safety management system** through local operating procedures.

Under the safety legislation, accountability areas have obligations in relation to ensuring the WHS of workers and **others**, so far as is reasonably practicable. Accountability areas must take proactive measures to comply with applicable WHS obligations required by safety legislation and actively identify, assess, monitor, review, and report on compliance with WHS obligations.

A summary of key WHS obligations or duties and examples of associated actions are set out in Tables 1 - 5 below. These tables do not reflect the entirety of WHS obligations contained in safety legislation. Each accountability area must refer to the applicable legislation to obtain a comprehensive and complete understanding of their legislative obligations.

Figure 2 outlines a critical reflection approach to exercising the elements of due diligence.

Actions set out in Tables 1 - 5 may generate records which must be retained in accordance with the *General Retention and Disposal Schedule*.

Table 1: Summary of primary WHS duty and examples of actions for accountability areas

Summary of WHS duty	Examples of how to action WHS duty
<p>WHS PRIMARY DUTY: PERSONS CONDUCTING A BUSINESS OR UNDERTAKING (PCBU) <i>(Work Health and Safety Act 2011 (WHS Act), Electrical Safety Act 2002 (ES Act))</i></p>	
<p>Accountability areas hold the duties of a PCBU.</p> <p>Accountability areas must ensure the physical and psychological health and safety of workers and others so far as is reasonably practicable by eliminating risks to health and safety. If this is not possible, risk must be minimised so far as is reasonably practicable using a risk management approach, prioritising the WHS hierarchy of risk control.</p> <p>There are specific duties that a PCBU must consider and comply with including but not limited to actions enabling the following:</p> <ul style="list-style-type: none"> • Providing a safe work environment including structures and buildings • Ensuring that all plant and equipment are electrically safe • Ensuring that a Qualified Technical Person (QTP) is available in each accountability area that employs electrical workers, in order that the QTP can undertake or supervise electrical work, ensure the safety, compliance and functioning of electrical safety systems and installations and oversee the training and competency of electrical workers • Ensuring that all plant and equipment are stored, handled and used safely • Ensuring that all substances are stored, handled and used safely • Ensuring the provision of adequate facilities for welfare of workers (toilets, lockers, eating areas) • Ensuring that adequate information, instruction, training, and supervision is provided to enable safe work • Ensuring that adequate systems are implemented to monitor the health of workers and conditions of the workplace to maintain health and prevent harm. 	<p>Identify, understand & maintain WHS legal obligations: Establish and maintain requirements in safety legislation listed in the reference section of this document.</p> <p>Establish a HSW governance framework in accordance with Queensland Health's requirements and apply the Health, safety and wellbeing management system framework to support legal obligations.</p> <p>Complete accountability area legislative compliance self-assessments and use available compliance management systems to identify and maintain legal obligations.</p> <p>Assign roles and responsibilities: Identify, assign, communicate and equip relevant roles to action their responsibilities under safety legislation but also requirements in the HSW standards framework.</p> <p>Assign delegation of authority to support legal duty holders: Delegation is a means by which a legal duty holder can gain assistance to discharge their duties and is supported by a delegation of authority document. Ensure those persons who have a legal duty are aware that a duty cannot be transferred. For example, within a Hospital and Health Service (HHS) tasks associated with discharging a WHS duty may be delegated to support functions including Building, Engineering and Maintenance Services, Patient safety, Health, safety and wellbeing, Infection Control, Qualified Technical Persons and Procurement.</p> <p>Monitor accountability: Ensure that HSW considerations are allocated to roles within the organisation and that people with these duties are taking action to fulfill those duties.</p> <p>External Parties: Ensure that external parties who supply goods or services (e.g. contractors, suppliers) fulfil their WHS legal duties by implementing systems of work to support this and monitor accountability.</p>

Summary of WHS duty	Examples of how to action WHS duty
<ul style="list-style-type: none"> • Ensure that, where necessary, workers are provided with safe accommodation /premises • Ensuring the implementation of effective incident management processes (including notifiable incident reporting to the WHS Regulator) <p>If accountability holders control the workplace, they must enable the following although not limited to:</p> <ul style="list-style-type: none"> • Safe access and egress • Safe fixtures, fittings, and/or plant • Emergency preparedness and response • Identify and coordinate shared WHS duties with other PCBUs or duty holders <p>Additional duties are listed in the <i>WHS Act</i> and <i>ES Act</i> and should be referred to and understood in context of each accountability area's HSW risks, operations, and services</p>	<p>Shared WHS duties: Identify duty holders with the same WHS duties and consult, cooperate and coordinate to enable the duties to be discharged. Consideration is given to each duty holder's capacity to influence and control the work (e.g. contracted services, shared responsibilities for emergency processes).</p> <p>Regular communications must be formally instituted between shared duty holders as they consult, cooperate and coordinate on the management of activities. The coordination of activities requires duty holders to work together so that each person can meet their duty of care effectively without leaving any gaps in health and safety protection. Accountability areas should plan and organise activities together with the other duty holders.</p> <p>Refer to the Health, safety and wellbeing planning standard (QH-IMP-401-1) and Health, safety and wellbeing consultation standard (QH-IMP-401-2).</p>

Table 2: Summary of Officer WHS duty and examples of actions to exercise due diligence

Summary of WHS duty	Examples of how to action WHS duty
<p>WHS DUTY: OFFICER WHS DUE DILIGENCE (WHS Act, ES Act)</p> <p>Executive leaders of each accountability area are required to behave as officers under the WHS Act and exercise WHS due diligence.</p> <p>Under the WHS Act, an Officer includes anyone who makes or participates in making, decisions that affect the whole, or a substantial part of the PCBU.</p> <p>All persons who hold Executive or Board level positions are expected to seek to comply with the officer duty under the WHS Act, even if they do not fall within the definition of an officer, to ensure the Department of Health and HHSs comply with safety legislation.</p>	<p>Assign roles and responsibilities for executive leaders: Each accountability area identifies, assigns, communicates and equips relevant roles to action the WHS due diligence obligations.</p> <p>Induction and training for executive leaders and Board members: Induct new executive leaders and Board members into their role and WHS due diligence obligations and support their ongoing competency to discharge the role (refer to Board Induction Information and Health, safety and wellbeing due diligence training (eLearning)).</p>

Summary of WHS duty	Examples of how to action WHS duty
<p>Others not identified as executive leaders could, in certain circumstances, be deemed officers under the <i>WHS Act</i>.</p> <p>WHS due diligence is required to ensure the accountability area meets its WHS duties to protect workers and others from HSW risk.</p> <p>Executive leaders have the following WHS due diligence obligations:</p> <ul style="list-style-type: none"> • Know - Acquire knowledge and keep up to date about HSW matters • Understand - Understand the business operations, its HSW hazards and risks • Resource - Ensure the accountability area has adequate and suitable resources, including physical, technological and people resources, and processes in place to manage HSW risks, they are communicated, used, and actively checked • Receive – Ensure the accountability area has appropriate reporting processes for HSW incidents, hazards and risks and responds in a timely way • Comply - Ensure the accountability area has processes to comply with legal duties for notifiable incident reporting, enforcement notice compliance, provision of WHS training and instruction to workers and consulting with workers • Verify - Verify/actively check processes and resources to manage HSW risks and comply with legal duties are available and used. 	<p>Ensure resources, processes and systems of work to manage HSW risks: Exercise due diligence to ensure the accountability area has processes and resources in place in order to comply with its PCBU duties to ensure the physical and psychological health and safety of workers and others by eliminating HSW risks.</p> <p>Delegate activities and assign tasks: Whilst an officer's due diligence duties cannot be transferred, executive leaders are able to gain assistance from others by delegating activities or assigning tasks to others, to assist to fulfil their responsibilities. Within Queensland Health, senior directors, line managers and supervisors are among those engaged to support executive leaders and it is their role to effectively implement the programs and systems that the executive leaders initiate. In turn, executive leaders must ensure that those responsible for implementing the systems or programs fulfil their role.</p> <p>Comply with each of the elements of due diligence: Putting the theory of exercising due diligence into practice requires continual application of a critical reflection cycle of:</p> <ul style="list-style-type: none"> • learning • understanding • implementing • refining • responding • verifying <p>Officers should take a systems-thinking approach to exercising due diligence and repeatedly move through the above critical reflection cycle. Systems thinking leads to experiencing more and more interconnections between the parts, including patterns and trends (see Figure 2).</p> <p>Oversight of the HSW management system: Each accountability area must support the HSW management system framework. Executive leaders are to actively monitor and verify its implementation in accountability areas, including through conducting a biennial senior management review of the HSW management system.</p> <p>Actively participate in HSW governance: Ensure each accountability area establishes a HSW governance framework to promote oversight and management decision making by executive leaders (refer to Section 4.2 of this guideline).</p>

Summary of WHS duty	Examples of how to action WHS duty
	<p>Undertake an officer self- assessment: Each accountability area executive leader may utilise the WHS due diligence planner template periodically to actively confirm they are carrying out their duties.</p>

Figure 2: The cycle of critical reflection when exercising due diligence

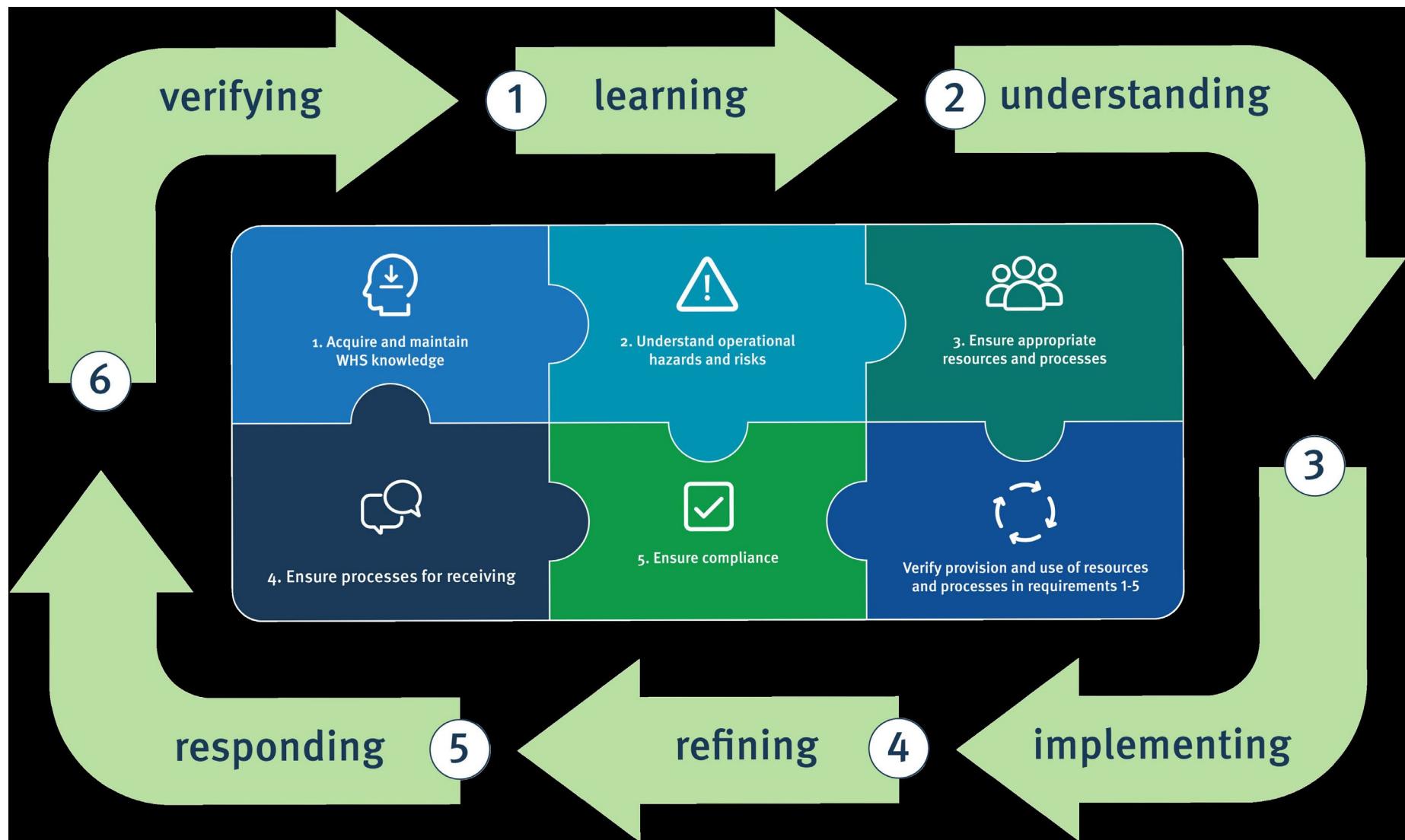


Table 3: Summary of WHS duty and examples of how to action duty

Summary of WHS duty	Examples of how to action WHS duty
<p>WHS DUTY: WORKER (WHS Act)</p> <p>Workers have a personal responsibility for their own health and safety.</p> <p>While at work, a worker must take reasonable care for their own health and safety and that of others including:</p> <ul style="list-style-type: none"> • To ensure that their acts or omissions do not adversely affect others health, safety, and wellbeing • To comply with reasonable instructions • To cooperate with reasonable policies and procedures of which they have been made aware. 	<p>Assign roles and responsibilities: Each accountability area to identify, assign, communicate and equip relevant workers to action their responsibilities under safety legislation and participate in programs and systems of work to implement the safety management system.</p> <p>Monitor accountability: Ensure workers are accountable for fulfilling their WHS responsibilities.</p> <p>Worker responsibility: Workers must inform themselves of HSW hazards, risks, and safe working methods through attendance at mandatory and role-based training, reporting HSW hazards and incidents and following the accountability area's HSW procedures and instructions.</p>

Table 4: Summary of WHS duty and examples of actions for accountability areas

Summary of WHS duty	Examples of how to action WHS duty
<p>WHS DUTY: EMERGENCY PREPAREDNESS AND BUILDING FIRE SAFETY (WHS Regulation 2011 (section 43), Building Fire Safety Regulation 2008)</p> <p>Each accountability area must prepare, maintain, and implement emergency preparedness and response plans. (Further detail is available in the Planning Standard QH-IMP-401-1).</p> <p>Each accountability area must have an Emergency Control Organisation (ECO) for each facility and assign and train ECO members in their responsibilities under the Queensland Health emergency codes.</p> <p>In preparing and responding to emergency situations, each accountability area shall reference local procedures and existing frameworks for managing site-based emergency response to emergency codes and accountability area-</p>	<p>Assign roles and responsibilities for emergency situations including emergency fire situations for buildings: Each accountability area identifies, assigns, communicates, and equips relevant roles to action their WHS responsibilities including Fire Safety Advisors (if required as per the Building Fire Safety Regulation 2008).</p> <p>Coordinate with shared duty holders to ensure compliance: Each accountability area identify, consult, and coordinate with shared duty holders ensure the compliance requirement is fulfilled. Refer to the Health, safety and wellbeing planning standard (QH-IMP-401-1).</p>

Summary of WHS duty	Examples of how to action WHS duty
<p>wide disaster and emergency incident management arrangements, irrespective of operational lead controller.</p> <p>Each accountability area who is a building owner, or a building occupier or managing a building has a legal obligation to ensure the safety of any person in that building in the event of a fire or other emergency.</p> <p>*Detailed requirements can be found in the Building Fire Safety Regulation 2008.</p>	<p>Establish, maintain, and verify emergency preparedness: Each accountability area identifies potential emergency situations. Followed by preparation of documented response procedures which are communicated, and tested for each premise/building owned and occupied by the accountability area. Ensure persons can evacuate buildings safely and quickly if a fire or hazardous materials emergency happens. Ensure prescribed fire safety installations for buildings are maintained (refer to the Building Fire Safety Regulation 2008).</p> <p>Mandatory training: Apply and monitor mandatory emergency related training described in Mandatory training HR Policy G6 (QH-POL-183).</p>

Table 5: Summary of WHS duty and examples of actions for accountability areas

Summary of WHS duty	Examples of how to action WHS duty
<p>WHS DUTY: WORKERS COMPENSATION & REHABILITATION <i>(Workers' Compensation & Rehabilitation Act 2003 & Workers Compensation and Rehabilitation Regulation 2014)</i></p> <p>Accountability areas must ensure workers are insured and remain insured with WorkCover Queensland for all work-related injuries and illnesses.</p> <p>Accountability areas must play an active role in assisting work-related injury recovery, through the identification and provision of suitable duties, appropriate rehabilitation support to stay at work or return to work and implementation of early intervention programs.</p> <p>Accountability areas must ensure adequate resourcing of appropriately qualified rehabilitation and return to work coordinators, taking into consideration the workforce size and geographical spread and work-related injury profile.</p> <p>Accountability areas must, on annual basis (and within 12 months of appointing a rehabilitation and return to work coordinator), ensure the details of all appointed rehabilitation and return to work coordinators (RRTWC) are provided to WorkCover Queensland, inclusive of :</p> <ul style="list-style-type: none"> • RRTWC's name and contact details 	<p>Assign roles and responsibilities for workers compensation and rehabilitation: Each accountability area identifies, assigns, communicates, and equips relevant roles to action their workers compensation and rehabilitation responsibilities.</p> <p>Promote collaboration between stakeholders: Promote collaboration and coordination between key roles/stakeholders that are assigned responsibility or involved to ensure compliance requirements are met and there are effective outcomes for injured/ill workers.</p> <p>Apply the Queensland Health Workplace Rehabilitation Standard: Each accountability area applies the Workplace rehabilitation standard (QH-IMP-401-5) and verifies its use and effectiveness.</p>

Summary of WHS duty	Examples of how to action WHS duty
<ul style="list-style-type: none"> • the details for each workplace for which the RRTWC has been appointed • a statement about how the RRTWC is considered to be appropriately qualified to perform the functions of a RRTWC. <p>Detailed requirements can be found in the <i>Workers' Compensation and Rehabilitation Act 2003</i> and <i>Workers Compensation and Rehabilitation Regulation 2014</i></p>	

4.2 Queensland Health work health and safety requirements

4.2.1 HSW governance

Accountability areas must consider actions in Figure 3 below to meet Queensland Health's HSW governance requirements.

Figure 3: Queensland Health's HSW governance requirements

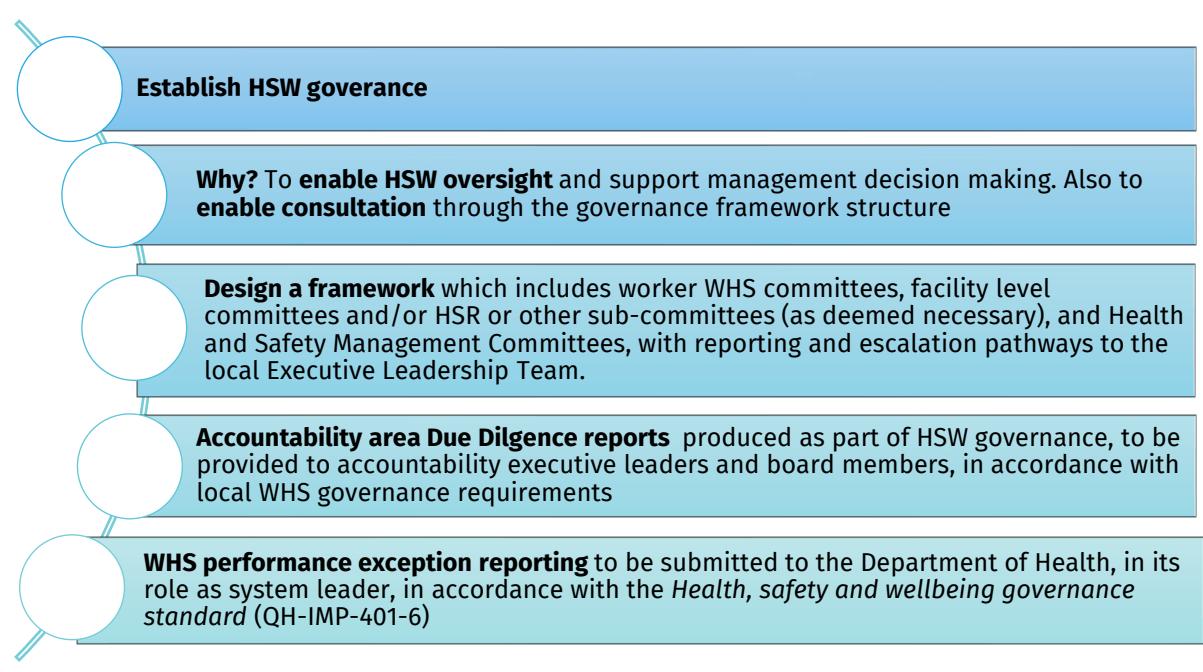


Figure 3 supports section 6.1 of the *Health, safety and wellbeing governance standard*, which contains detailed requirements for HSSs when designing a framework.

4.2.2 Health safety and wellbeing management system framework

All accountability areas must align and implement their local HSW management system to meet the requirements of the Queensland Health HSW management system framework. The actions below support section 6 of the *Health, safety and wellbeing governance standard*:

- Review the HSW management system framework: assign responsibility for and conduct a review of requirements, accountabilities and actions or outputs contained within the HSW management system framework
- Confirm alignment to the HSW management system framework: confirm the accountability area's local HSW management system includes local processes and procedures to operationalise the requirements of the Standards within the HSW management system framework
- Correct gaps: communicate gaps and corrective actions to executives of the accountability area and obtain approval to complete corrective actions to continually improve the accountability area's local HSW management system and risk management approach
- Monitor and review: monitor and review compliance and alignment to Queensland Health's HSW management system framework as an oversight function of the accountability area's HSW governance framework and report to the Department, in its

role as system leader, in accordance with the *Health, safety and wellbeing governance standard* and the *Health, safety and wellbeing monitoring, evaluation and performance review standard*.

5 Legislation

- Anti-Discrimination Act 1991
- Building Fire Safety Regulation 2008
- Electrical Safety Act 2002
- Electrical Safety Regulation 2013
- Fire and Emergency Services Act 1990
- Hospital and Health Boards Act 2011
- Human Rights Act 2019
- Industrial Relations Act 2016
- Public Sector Act 2022/Work Health and Safety Act 2011
- Work Health and Safety Regulation 2011
- WHS Codes of practice including the electrical safety codes of practice
- Workers' Compensation and Rehabilitation Act 2003
- Workers' Compensation and Rehabilitation Regulation 2014

6 Supporting documents

- Board induction information
- Disasters and Emergency Incidents Health Service Directive QH-HSD-003:2017
- General Retention and Disposal Schedule (Administrative Records) Health, safety and wellbeing Due Diligence training (eLearning)
- Mandatory training HR Policy G6 (QH-POL-183)
- Legislative compliance review template
- Management system review template
- Health, safety and wellbeing planning standard (QH-IMP-401-1)
- Health, safety and wellbeing consultation standard (QH-IMP-401-2)
- Health, safety and wellbeing monitoring, evaluation and performance review standard (QH- IMP- 401-4)
- Health, safety and wellbeing governance standard (QH-IMP-401-6)
- Health, safety and wellbeing management system framework
- Work health and safety due diligence planner (officer self-assessment)
- Work health and safety due diligence report template
- Workplace rehabilitation standard (QH-IMP-401-5)

Definitions

Term	Definition
Accountability area	Department of Health divisions and each hospital and health service (HHS) are accountability areas within Queensland Health.
Boards	<p>Queensland Health has Boards of Management which function under the authority of the Director-General and provide governance oversight of certain strategies and divisions of the Department of Health, as well as Hospital and health boards controlling each Hospital and health service.</p> <p>Refer to Hospital and health board in this Definitions table, for the definition of a Health Service Board, appointed for a Service under section 23 of the <i>Hospital and Health Boards Act 2011</i>.</p>
Department of Health	Department of Health divisions (the department) is the health system manager. The Department of Health's systematic role involves oversight and monitoring and does not descend to operational matters.
Duty holder	<p>Refers to any person who holds a health and safety duty under the <i>Work Health and Safety Act 2011</i>. PCBUs, officers and workers are all duty holders for work health and safety.</p> <p>A person can also have more than one duty by virtue of being in more than one class of duty holder.</p> <p>More than one person can concurrently have the same duty and where more than one person has a duty for the same matter, each duty holder must comply with that duty to the standard required by the <i>Work Health and Safety Act 2011</i>, even if another duty holder has the same duty.</p>
Emergency codes	<p>The emergency codes in Queensland Health are colour codes used in specific emergency situations to notify other staff and the ECO of the emergency event type and to trigger a specific emergency response to the event that is occurring.</p> <p>The Colour Codes used for specific emergency situations are as follows:</p> <ul style="list-style-type: none"> • Red – fire/smoke • Black – personal threat (e.g. occupational violence) • Blue – medical emergency (e.g. cardiac arrest) • Purple – bomb threat • Orange – evacuation • Yellow – internal emergency • Brown – external emergency
Executive leader	Is the most senior person of each accountability area and can include persons reporting to that position.

Term	Definition
Executive Leadership Team (ELT)	<p>The Executive Leadership Team (ELT) supports the Executive leader of the accountability area to provide leadership and oversight of the functions of the business to ensure its effective operation.</p> <p>In the Department of Health, the Department of Health ELT supports the Director-General to provide leadership, direction and guidance to the Department of Health and oversee its strategic function, capabilities and effective operation.</p>
Governance	<p>Governance is how an organisation is directed and controlled and can include organisational structures, management roles and the scope of the power and authority they exercise, and the frameworks established for making decisions.</p> <p>Public sector governance refers to “the arrangements and practices which enable a public sector entity to set its direction and manage its operations to achieve expected outcomes and discharge its accountability duties.” (Australian National Audit Office, 2014: Public Sector Governance – Better Practice Guide)</p>
Hazard	<p>Source with a potential to cause injury and ill health (see <i>International Standard for Occupational health and safety management systems: AS/NZS ISO 45001:2018</i>)</p>
Health and safety committee (HCS)	<p>A health and safety committee established under the <i>Work Health and Safety Act 2011</i>.</p>
Health and safety representative (HSR)	<p>A health and safety representative appointed under the <i>Work Health and Safety Act 2011</i>, is a worker who has been elected by a work group, of which the worker is a member, to represent them on health and safety issues</p>
Health, safety and wellbeing management system framework	<p>Also known as the SMS framework. This centralised framework consists of Queensland Health <i>Health, safety and wellbeing policy</i> (QH-POL-401), implementation standards and guidance materials.</p> <p>Each accountability area is required to prepare procedures and other documentation to operationalise the SMS Framework and to enable the effective local implementation of the Queensland Health safety management system (SMS).</p>
Health Service Chief Executive (HSCE)	<p>Hospital and Health Service Chief Executive, appointed by a Hospital and health service's board to manage the Service under section 33 of the <i>Hospital and Health Boards Act 2011</i></p>
Health and Safety Management Committee (HSMC)	<p>An accountability area Health and Safety Committee (which usually also acts as the local peak WHS committee), comprised of management representatives and WHS function leads, who receive inputs from local WHS committee/s and WHS functional areas in order to review local WHS performance, determine actions, clear reports and escalate WHS matters to the local executive leadership team (ELT).</p>

Term	Definition
	<p>The purpose of the Health and Safety Management Committee is to support the accountability area's ELT to oversee WHS within the accountability area, through review and decision-making on WHS matters within the HSMC's determined delegation.</p>
Hospital and health board	<p>A Hospital and health board appointed for a Service under section 23 of the <i>Hospital and Health Boards Act 2011</i>, which consists of five or more members appointed by the Governor in Council and which controls the Service for which it is established, with regard to –</p> <ul style="list-style-type: none"> <li data-bbox="552 608 1356 676">(a) the need to ensure resources of the public sector health system are used effectively and efficiently; and <li data-bbox="552 687 1314 754">(b) the best interests of patients and other users of public sector health services throughout the State.
Hospital and health service (HHS)	<p>A statutory body established under the <i>Hospital and Health Boards Act 2011</i> responsible for the provision of public sector health services for a geographical area, which includes one or more health facilities.</p>
Incident	<p>An unplanned event that either resulted in or had the potential to result in adverse outcomes such as harm, loss, damage, disruption or delay and includes a significant incident.</p>
Officer	<p>An officer within the meaning of section 9 of the <i>Corporations Act 2001</i> (Commonwealth) other than a partner in a partnership. Broadly, an officer is a person who makes, or participates in making, decisions that affect the whole, or a substantial part, of the accountability area's activities.</p> <p>An officer can also be an officer of the Crown or a public authority if they are a person who makes, or participates in making, decisions that affect the whole, or a substantial part, of the business or undertaking of the Crown or public authority.</p> <p>The <i>Work Health and Safety Act 2011</i> imposes an obligation on officers to exercise due diligence with respect to the management of health and safety. Schedule 5 of the <i>Work Health and Safety Act 2011</i> and Schedule 2 of the <i>Electrical Safety Act 2003</i> defines officers.</p> <p>Queensland Health expects that all persons who hold Executive or Board level positions will seek to comply with officer duties, even if they do not fall within the definition of an officer, to ensure the Department of Health and HHSs comply with safety legislation.</p>
Others	<p>Other persons as referenced in the <i>Work Health and Safety Act 2011</i>.</p> <p>Others are people who are not workers but whose health and safety may be impacted by one or more accountability areas.</p> <p>Patients and visitors are examples of others.</p>
Person conducting a business or undertaking (PCBU)	<p>Means a person conducting a business or undertaking. A PCBU can be a sole trader, a partnership, company, unincorporated association or government</p>

Term	Definition
	<p>department of public authority. The PCBU holds a primary duty of care under the <i>Work Health and Safety Act 2011</i>.</p> <p>The Department of Health and each of the HHSs are considered to be PCBUs. A HHS is a statutory body and its legal status is that of a body corporate (refer section 18 of the <i>Hospital and Health Boards Act</i>). HHSs engage in a business or undertaking, being the principal providers of public health services, and are direct employers of certain workers.</p>
Psychosocial hazard	<p>Definition as per section 55A of the WHS Regulation, that is:</p> <p>A psychosocial hazard is a hazard that—</p> <ul style="list-style-type: none"> (a) arises from, or relates to— <ul style="list-style-type: none"> (i) the design or management of work; or (ii) a work environment; or (iii) plant at a workplace; or (iv) workplace interactions or behaviours; and <p>may cause psychological harm, whether or not the hazard may also cause physical harm.</p>
Psychosocial risk	<p>Definition as per section 55B of the WHS Regulation, that is:</p> <p>A psychosocial risk is a risk to the health or safety of a worker or other person from a psychosocial hazard.</p> <p>(A person conducting a business or undertaking must manage psychosocial risk in accordance with WHS risk management principles, including the hierarchy of control measures, to eliminate or minimise psychosocial risks so far as is reasonably practicable).</p>
Queensland Health	<p>Means the Department of Health (the department) and all hospital and health services responsible for the provision of public sector health services.</p> <p>Queensland Health operates as a federated, networked system, with the Department of Health and each HHS being legally recognised as a PCBU in accordance with the <i>Work Health and Safety Act 2011</i>, under shared duties arrangements.</p>
Safety legislation	<p>The <i>Work Health and Safety Act 2011</i>, the <i>Electrical Safety Act 2002</i>, the <i>Building Fire Safety Regulation 2008</i>, the <i>Workers' Compensation and Rehabilitation Act 2003</i>, the <i>Hospital and Health Boards Act 2011</i> and any associated regulations or WHS codes of practice, as amended from time to time.</p>
Safety management system (SMS)	<p>Queensland Health's Health, safety and wellbeing management system (SMS), comprising a centralised framework of policy, standards, guidelines and other supporting documents that set out the requirements to systematically manage work health, safety and wellbeing in Queensland Health. The SMS applies to workers and others whose health and safety may be impacted when at Queensland Health workplaces, including patients,</p>

Term	Definition
	<p>visitors, contractors, volunteers and work-integrated-learning placement students.</p> <p>Each accountability area is required to prepare procedures and other documentation to operationalise the SMS Framework and to enable the effective local implementation of the Queensland Health SMS. The SMS aligns to <i>AS/NZS ISO 45001: 2018 Occupational health and safety management systems</i> and <i>AS/NZS ISO 45003: 2021 Occupational health and safety management – Psychological health and safety at work – Guidelines for managing psychosocial risks</i>.</p>
Shared duty holders	<p>Persons who have a duty under the <i>Work Health and Safety Act 2011</i> in relation to the same matter as another person, as referenced at section 16 and section 46 of the Act. Each person with the duty must, so far as is reasonably practicable, consult, cooperate and coordinate activities with all other persons who have a duty in relation to the same matter. Examples include owners, occupiers, secondary occupiers and concurrent duty holders. Examples of concurrent duty holders in Queensland Health include the Department of Health and a HHS, for example, where the Department of Health has workers located at the HHS.</p>
WHS manager	<p>The workplace health and safety manager or director or equivalent functional lead at the relevant accountability area, or their delegate.</p>
WHS risk	<p>The possibility that harm (death, injury or illness) might occur when exposed to a hazard.</p>
WHS Regulator	<p>Workplace Health and Safety Queensland and the Electrical Safety Office</p>
Worker	<p>Definition as per section 7 of the <i>Work Health and Safety Act 2011</i>, that is:</p> <p>A person is a worker if the person carries out work in any capacity for a person conducting a business or undertaking, including work as—</p> <ul style="list-style-type: none"> (a) an employee; or (b) a contractor or subcontractor; or (c) an employee of a contractor or subcontractor; or (d) an employee of a labour hire company who has been assigned to work in the person's business or undertaking; or (e) an outworker; or (f) an apprentice or trainee; or (g) a student gaining work experience; or (h) a volunteer; or (i) a person of a prescribed class <p>The person conducting the business or undertaking is also a worker if the person is an individual who carries out work in that business or undertaking.</p> <p>As per section 11(1) of the <i>Workers' Compensation and Rehabilitation Act 2003</i> (as amended 2013), a person who works under a contract, and in relation to the work, is an employee for the purpose of assessment for PAYG withholding under the <i>Taxation Administration Act 1953</i> (Cwlth); who has sustained a</p>

Term	Definition
	work-related personal injury or illness. (Note – this definition is used by WorkCover Queensland when determining liability/eligibility for workers' compensation entitlements).
Workplace	<p>Definition adapted from the <i>Work, health and safety consultation, cooperation and coordination code of practice 2021</i>, that is:</p> <p>Any place where work is carried out for a business or undertaking and includes any place where a worker goes, or is likely to be, while at work. In a Queensland Health context, this may include hospital and health facilities, offices, warehouses, construction sites, vehicles, aircraft or other mobile structures, staff accommodation.</p>

History

Date	Change
22 October 2024	<p>Guideline review prompted by legislative and other amendments:</p> <ul style="list-style-type: none"> • amendment of <i>Work Health and Safety Act 2011</i>, as outlined in <i>Work Health and Safety and Other Legislation Amendment Act 2024</i> • amendment of Work Health and Safety Regulation 2011, as outlined in Work Health and Safety and Other Legislation Amendment Regulation 2024 • amendment of <i>Work Health and Safety Act 2011</i>, as outlined in <i>Electrical Safety and Other Legislation Amendment Act 2024</i> • amendment of Work Health and Safety Regulation 2011, as outlined in Work Health and Safety (Psychosocial risks) Amendment Regulation 2022 • introduction of Managing the risk of psychosocial hazards at work Code of Practice 2022 • recognition of relevant Enterprise Bargaining EB11 WHS commitments • alignment to AS / NZS ISO 45001 criteria • alignment to AS / NZS ISO 45003 criteria • standard reformatted as part of the HR Policy review • amended to update references and naming conventions
15 July 2021	Version 1.0 – New Guideline