Health, safety and wellbeing risk management guideline

QH-GDL-401-3-1:2021

1. Statement

This document provides guidance to support the requirements of Queensland Health's Health Safety and wellbeing risk management standard (QH-IMP-401-3:2020) in relation to management of work health and safety (WHS) risks and the development of an operational WHS risk register and WHS risk profile.

2. Scope

This guideline applies to all accountability areas within Queensland Health and is to be applied to support the implementation of the Health Safety and Wellbeing (HSW) risk management standard (QH-IMP-401-3:2020).

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

3. Requirements

A summary of key actions to guide implementation of the HSW risk management standard is set out in **Figure 1** and outlined below.

Accountability areas must manage work health and safety (WHS) hazards and risks so far as is reasonably practicable through establishing, communicating, implementing, and maintaining their own processes to meet this obligation. When developing a process refer to Section 4.2 of the HSW risk management standard.

- Accountability areas must develop, implement and maintain a risk management process for all workers, including contractors. This document provides further guidance on the steps involved in WHS risk management.
- Accountability areas must develop, implement and maintain a local WHS risk profile as per Section 5 of the HSW risk management standard. The accountability area WHS risk profile should consider system level controls and other organisational factors and may inform, or be informed by, the Queensland Health WHS risk profile. The WHS Risk profile guideline provides further guidance on developing a WHS risk profile.
- Accountability areas must develop, implement and maintain a local WHS risk register that captures the accountability area's operational risks, risk ratings, associated controls, and dates of risk and control reviews. This document provides further guidance for development of a local WHS risk register.

WHS risk management must be supported by consultation with workers at each step. For further information on consultative forums and processes, refer to the HSW consultation standard and HSW consultation guideline.

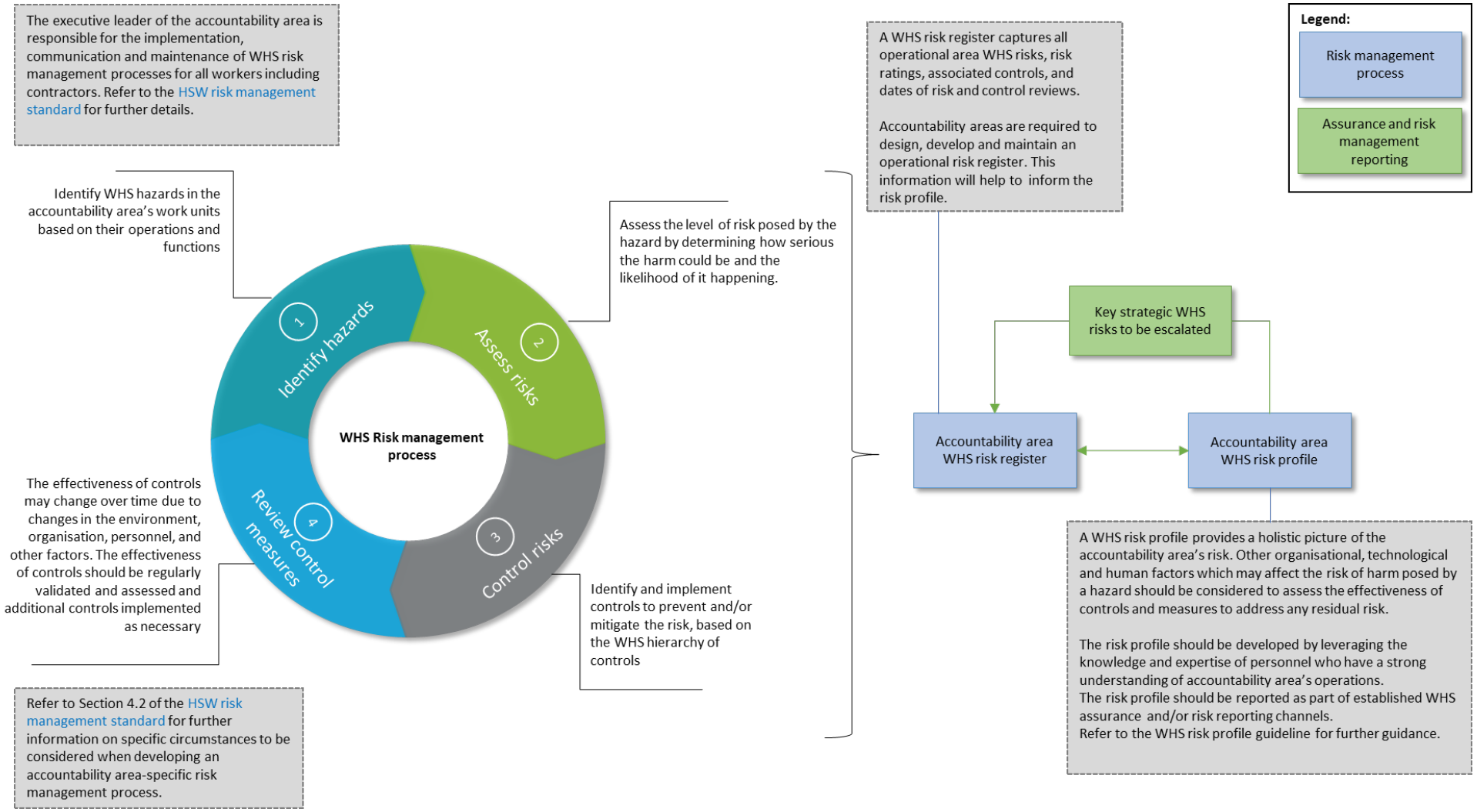
This guideline outlines the WHS risk management process (**Section 3.1**) and provides guidance on how to develop a WHS risk register (**Section 3.2**) of identified WHS hazards, risks, and controls. The purpose of a WHS risk profile is also outlined (**Section 3.3**), with further guidance on developing a WHS risk profile available in the WHS risk profile guideline.

Queensland Health resources available to support WHS risk management include:

- a Queensland Health WHS Risk Profile tool
- a generic work health and safety risk assessment tool
- an occupational violence risk assessment tool (OVRAT)
- a hazardous chemicals storage risk assessment tool
- a chemical tasks risk assessment worksheet and tool
- a Patient Handling Facility/Unity Risk Assessment Tool (FURAT)
- a guideline on Preparing a WHS risk profile.

How to manage work health and safety risks code of practice 2021 further outlines requirements for WHS hazard identification, assessment, control, and review of WHS risk control processes.

Figure 1: Overview of the WHS risk management process and requirements for accountability areas



3.1. WHS Risk management

Sections 3.1-3.3 of this guideline provide guidance for Sections 4 and 5 of the HSW risk management standard.

3.1.1. Purpose

Risk management is a process for:

- identifying hazards and assessing risks arising from work activities and the work environment
- making decisions about ways to eliminate or minimise those risks and continue to monitor them.

Managing work health and safety risks is an ongoing process that is triggered when any changes affect work activities or the work environment.

The steps of risk management should be undertaken when:

- changing work practices, procedures or the work environment
- purchasing new or used equipment or using new substances
- new information about workplace risks becomes available
- responding to workplace incidents (even if they have caused no injury)
- responding to concerns raised by workers, health and safety representatives or others at the workplace.

3.1.2 A four-step risk management process

1. Identify hazards
2. Assess risks
3. Control risks
4. Review control measures

1. Identify hazards

Identifying hazards involves finding all of the things and situations that could potentially cause harm to people. Some hazards may be more obvious than others because they are common in healthcare.

It is important to work closely with workers who perform, or will perform, the work to help identify all potential hazards.

Information and records on incidents, near misses and the results of inspections can also help identify hazards. If someone has been injured during a work task, then a hazard exists.

2. Assess the risk

A risk assessment can help determine:

- what the contributing factors are (e.g. nature of the hazard, work environment, systems of work and equipment)
- how severe the risk is
- whether any existing control measures are effective

- what actions are needed to control the risk
- how urgently those actions need to be completed.

A risk assessment is unnecessary if you already know the risk and how to control it. If, after identifying a hazard, you already know the risk and how to control it effectively, you may simply implement the controls.

A risk assessment is required when:

- a new hazard is identified
- a work activity is being planned, introduced or changed
- a change to the work environment is planned (new equipment, new roster, workforce restructure)
- changes at the workplace may impact the effectiveness of existing control measures.

Risk rating

A risk can be rated from the combination of the consequence or severity of the resulting injury or illness and the likelihood of injury or illness arising from exposure to the hazard. Appendix A outlines consequence and likelihood tables that can be used to assist with the assessment

Consequence - what is the potential impact of the hazard?

- How severe could an injury or illness be?
- What is the worst possible harm the hazard could cause?

Likelihood - how likely is the hazard to cause harm?

- Is it highly likely or unlikely to happen?
- How frequently are workers exposed to the hazard? (Is it constant or only occasional?)

This can be mapped on a risk matrix to help rate the risk, based on the consequence and likelihood assessment, and to prioritise managing the risk with controls.

Risk matrix

Likelihood ↓	← Consequence →				
	Negligible	Minor	Moderate	Major	Extreme
Almost certain	Medium (7)	Medium (11)	High (17)	Very high (23)	Very high (25)
Likely	Medium (6)	Medium (10)	High (16)	High (20)	Very high (24)
Possible	Low (3)	Medium (9)	High (15)	High (18)	High (22)
Unlikely	Low (2)	Medium (8)	Medium (12)	Medium (14)	High (21)
Rare	Low (1)	Low (4)	Low (5)	Medium (13)	High (19)

3. Control risks

The most important step in managing risks is identifying a control from the hierarchy of risk control that most effectively eliminates the risk, or where that is not reasonably practicable, minimises the risk.

The hierarchy of control measures

Ways of controlling risks can be ranked from the highest level of protection and reliability to the lowest.

If elimination is not reasonably practicable, you must minimise the risk so far as is reasonably practicable by doing one or more of the following:

- **Elimination.** Always aim to eliminate the hazard, which is the most effective control.
- **Substitution.** Substitute the hazard creating the risk with something safer.
- **Isolation.** Physically separate the hazard from people, by distance or using barriers.
- **Engineering controls.** Implement engineering controls, such as modifications to equipment.
- **Administrative controls.** Work methods or procedures that are designed to minimise exposure to a hazard (e.g. the use of signs to warn people of a hazard; job task rotation to reduce exposure).
- **Personal protective equipment (PPE).** Any remaining risk must be minimised with suitable PPE, such as providing workers with breathing protection, hard hats, gloves, protective eyewear.

Administrative control measures and PPE rely on human behaviour and tend to be least effective in minimising risks. Administrative controls and PPE are only to be used when there is no other practical control available or used to supplement higher level control measures.

The relevant accountability area delegate will need to review and approve proposed risk controls before they are implemented. Prioritising a timeframe for planning the risk treatment and implementing the controls will be dependent on the risk rating. (Refer to Appendix A for further information).

4. Review control measures

Controlling health and safety risks is an ongoing process. Risk controls must be reviewed regularly to validate that they are still effective.

A review of risk controls, and if necessary, a revision is required:

- when the control measure does not control the risk it was implemented to control
- before a change at the workplace which is likely to give rise to a new or different health and safety risk that the control measure may not effectively control
- if a new hazard or risk is identified
- if the results of consultation with workers indicates a review is necessary
- if a health and safety representative requests a review.

If problems are found, go back through the risk management steps and make further decisions on how to treat the risk through controls.

When deciding how frequently to carry out a review, consider the level of residual risk that remains after control/s have been put in place. The greater the risk, the more frequently controls should be validated through planned reviews. (Appendix A has further information).

How to manage work health and safety risks code of practice 2021 further outlines requirements for hazard identification, risk assessment, risk control and review of controls.

3.2. WHS Risk register

3.2.1 Purpose

WHS risk registers are detailed operational documents that provide an overview of all relevant WHS risks in an accountability area. An operational WHS risk register and its associated four-step risk management process are requirements under safety legislation.

A WHS risk register captures an accountability area's operational risks, risk owner/s, risk ratings, associated controls, implementation timeframes and dates of risk and control reviews. It doesn't limit the need to conduct dynamic risks assessments where circumstances, work tasks/environments or approaches change the risk and/or affect the associated controls that are documented in risk registers.

Directors and managers use WHS risk registers to maintain oversight and manage their WHS risks and required controls in their operational areas. Unresolved WHS risks, where deemed major or strategic, may be escalated to the accountability area's strategic risk register and/or the accountability area's WHS risk profile, in consultation with relevant subject matter experts, with the intention of raising the accountability area's executive leaders' awareness of these risks.

The WHS risk register is intended to be accessible to staff in the accountability area and is regularly updated as risks are assessed by relevant personnel who are knowledgeable in WHS risk management. (In some accountability areas the WHS risk register may be integrated into the strategic risk register, rather than existing as a separate register).

3.2.2 Guide for developing WHS risk registers

Accountability areas are required to develop, implement and maintain an operational WHS risk register for their operational areas in accordance with the local accountability area's procedure/s. WHS risk registers should be developed by subject matter experts in consultation with workers who are experienced with the accountability area's key processes, operations and associated WHS risks and controls.

WHS risk registers should record the following information described in Section 5 of the HSW risk management standard and at Appendix B, which includes:

1. identified hazards and risks
2. the risk rating
3. existing WHS risk controls and initial WHS risk rating
4. required response based on the initial WHS risk rating
5. additional risk treatment/controls to be applied (consider opportunities for improvement in WHS risks and controls)
6. details of consultation with workers, HSRs, safety committees and shared duty holders, including contractors
7. risk control owner/s (including differentiation between owner/s of existing risk controls and owner/s of additional risk controls, as required)

8. completion date of additional risk treatment/controls
9. residual risk rating
10. timeframes and process for WHS risk control review (see **Section 3.2.3** for further detail)
11. outcomes of review/s.

Responsibilities and processes relating to the WHS risk register, including requirements for review, should be documented in the accountability area's risk management procedure. (Refer to the HSW planning standard and HSW planning guideline for further information.)

3.2.3 Validation and review of WHS risk controls

The effectiveness of WHS risk controls may change over time due to changes in the environment, organisation, personnel, and other factors. For this reason, the effectiveness of WHS risk controls should be regularly validated and assessed with new and additional controls being implemented as necessary.

Along with identifying and implementing controls for WHS risks captured in the risk register, accountability areas should identify validation/review activities in relation to WHS risk controls. The validation activities should include their required frequency using a risk-based approach (e.g. controls for higher rated risks may require more frequent validation).

Validation of controls in an accountability area's WHS risk register/s should occur periodically by line management (if circumstances listed below are not present), and other competent designated role/s in consultation with workers. The results of validation should be reported to management. Responsibilities and processes for WHS risk control validation should be described in the accountability area's HSW risk management procedure.

The WHS risk register and WHS risk controls must be reviewed and revised in the following circumstances as described in Section 6 of the HSW risk management standard:

- when the control measure is not effective in controlling the risk
- before a change at the workplace that is likely to give rise to a new or different health and safety risk that the control measure may not effectively control
- if a new hazard or risk is identified
- if the results of consultation indicate that a review is necessary
- if a health and safety representative requests a review.
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3.3 WHS Risk profile

3.3.1 Purpose

An accountability area's WHS risk profile is a strategic register or report that details the accountability area's key WHS risks as identified from the local WHS risk register, with the primary purpose of evaluating and rating the effectiveness of existing risk controls, along with other organisational risk factors that may impact the level of risk.

As an accountability area matures in its approach to safety risk management, the addition of a local WHS risk profile to the operational WHS risk register and associated risk management processes, assists Executive leaders to exercise due diligence and further demonstrate safety leadership commitment through regular reviews of the local risk profile.

A WHS risk profile serves multiple purposes, including to:

- provide a range of information relating to WHS hazards, occupational streams, and regulatory and organisational risks
- provide a more holistic picture of the accountability area's WHS risk landscape than the operational WHS risk register
- apply to WHS risk in lifecycle activities including purchasing, projects and contractor management
- feed into other WHS and risk reporting structures, including the accountability area's strategic risk register, local WHS performance reporting and due diligence reporting
- provide strategic information to evaluate during other WHS assurance activities.

The Queensland Health WHS risk profile tool, details occupational streams and system-level controls in place for identified hazards and should be referred to when developing the accountability area's local WHS risk profile. The local WHS risk profile should then be customised to reflect the business operations and context, WHS hazards, risks and controls implemented, control effectiveness and residual risk specific to the accountability area. Key risks identified in the local WHS risk profile, which are not currently captured in the system-level WHS risk profile, may also be escalated to the Department of Health's Safety and Wellbeing team, to consider for inclusion into the Queensland Health WHS risk profile tool.

The WHS risk profile register/report is accessible to WHS personnel and executive in the accountability area and is regularly updated as effectiveness of the implemented risk controls are monitored and reviewed in the accountability area. This information may be compiled into a strategic report for executive to analyse at the accountability area's Senior Management review of HSW Management System effectiveness and/or integrated into local due diligence reporting.

The WHS risk profile should be reviewed at least annually, updated, and reported as part of established WHS assurance reporting and, where applicable, other risk reporting channels.

Updating of an accountability area's WHS risk profile may also be triggered by:

- changes in legislation
- a WHS risk escalated through the operational WHS risk register
- the identification of a new WHS risk or opportunity
- the result of an incident
- the result of enforcement action by a WHS Regulator
- changes to Queensland Health's employment agreements
- changes to the accountability area's organisational structure
- changes to supply, purchasing and procurement
- WHS issues raised in consultative forums
- WHS issues raised in the industry/sector.

Further information on developing a WHS risk profile is available in QH-GDL-401-3-2:2021 Preparing a WHS risk profile guideline.

4. Diversity and inclusion considerations

When undertaking WHS risk management, consideration should be given to the specific needs and requirements of different diversity groups.

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 non-English speaking backgrounds are all important to consider in the WHS risk management approach.

Diversity groups should be included in worker consultation mechanisms informing WHS risk management, to enable the different needs of different diversity groups to be met.

Implementation of risk controls will be most effective if consideration is given to the communication requirements of workers with different language, literacy and access needs. When communicating risk management outcomes with workers, it is important to take into account the characteristics of the workers, including language and literacy levels, and to use inclusive language, such as gender-neutral terms and avoidance of gendered language, to ensure LGBTIQ+ worker inclusion.

5. Legislation

- Building Fire Safety Regulation 2008
- *Electrical Safety Act 2002*
- Electrical Safety Regulation 2013
- How to manage work health and safety risks code of practice 2021
- *Work Health and Safety Act 2011*
- Work Health and Safety Regulation 2011
- *Workers' Compensation and Rehabilitation Act 2003*, Workers' Compensation and Rehabilitation Regulation 2014

6. Supporting documents

- Department of Health chemical tasks risk assessment worksheet and tool
- Department of Health hazardous chemicals storage risk assessment tool
- Department of Health occupational violence risk assessment tool
- Department of Health work health and safety risk assessment form
- General Retention and Disposal Schedule (Administrative Records)
- QH-GDL-401-3-2:2021 Preparing a WHS risk profile guideline

- QH-GDL-401-1:2021 Health, safety and wellbeing planning guideline
- QH-IMP-401-1:2020 Health, safety and wellbeing planning standard
- QH-IMP-401-2:2020 Health, safety and wellbeing consultation standard
- QH-IMP-401-3:2020 Health, safety and wellbeing risk management standard
- Queensland Health Health, safety and wellbeing risk profile tool
- Queensland Health Patient Handling Facility/Unity Risk Assessment Tool (FURAT)

7. Definitions

Term	Definition
Accountability area	Department of Health divisions and agencies and each HHS are accountability areas within Queensland Health.
Executive Leader	Is the most senior person of each accountability area and can include persons reporting to that position.
Hazard	Source with a potential to cause injury and ill health (see AS/NZS ISO 45001:2018)
Health and Safety Representative (HSR)	A Health and Safety Representative appointed under the Work Health and Safety Act 2011
Hospital and Health Service (HHS)	Hospital and health service established under the Hospital and Health Boards Act 2011
Incident	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.
Others	Other persons as referenced in the *WHS Act 2011*. Others are people who are not workers but whose health and safety may be impacted by one or more accountability areas. Patients and visitors are examples of others.
Person Conducting a Business or Undertaking (PCBU)	Means a person conducting a business or undertaking. The Department of Health (including Health Support Queensland and eHealth) and each of the HHSs are considered to be PCBUs.
Safety legislation	The *WHS Act 2011*, and the *Electrical Safety Act 2002* and any associated regulations or WHS codes of practice, as amended from time to time.

Term	Definition
Safety management system	This system consists of the WHS standards framework, procedures and operating practices that provide the framework within which workers discharge their individual health and safety accountabilities and the PCBU ultimately discharges its legislative obligations.
Shared duty holders	A shared duty holder (or other duty holder) in the Queensland Health context, would be where an accountability area's worker undertakes work for another accountability area (or external entity), where the worker performs duties on the other accountability area's (or external entity's) premises OR the reverse of this, where a worker undertakes work for an accountability area on their premises but is not directly employed by said accountability area.
So far as is reasonably practicable (SFAIRP)	'Reasonably practicable', in relation to a duty to ensure health and safety, means that which is, or was at a particular time, reasonably able to be done to ensure health and safety, taking into account and weighing up all relevant matters including: a. the likelihood of the hazard or the risk concerned occurring; and b. the degree of harm that might result from the hazard or the risk; and c. what the person concerned knows, or ought reasonably to know, about the hazard or risk, and about the ways of eliminating or minimising the risk; and d. the availability and suitability of ways to eliminate or minimise the risk; and e. after assessing the extent of the risk and the available ways of eliminating or minimising the risk, the cost associated with available ways of eliminating or minimising the risk, including whether the cost is grossly disproportionate to the risk.
WHS risk	The possibility that harm (death, injury or illness) might occur when exposed to a hazard.
WHS standards framework	This framework consists of QH-POL-401:2020 Health, safety and wellbeing policy, implementation standards and guidance materials.
WHS Hierarchy of Risk Control	The hierarchy of risk control ranks risk controls for WHS risk from highest level of protection and reliability to lowest level. The WHS Regulation 2011 requires duty holders to work through this hierarchy when managing WHS risks. Section 36 of the WHS Regulation 2011 – hierarchy of control measures states: 1. This section applies if it is not reasonably practicable for a duty

Term	Definition
	holder to eliminate risks to health and safety. 2. A duty holder, in minimising risks to health and safety must implement risk control measures under this section. 3. The duty holder must minimise risks, so far as is reasonably practicable, by doing one or more of the following— a. substituting (wholly or partly) the hazard giving rise to the risk with something that gives rise to a lesser risk; b. isolating the hazard from any person exposed to it; c. implementing engineering controls. 4. If a risk then remains, the duty holder must minimise the remaining risk, so far as is reasonably practicable, by implementing administrative controls. 5. If a risk then remains, the duty holder must minimise the remaining risk, so far as is reasonably practicable, by ensuring the provision and use of suitable personal protective equipment. Note— A combination of the controls set out in this section may be used to minimise a risk, so far as is practicable, if a single control is not sufficient for the purpose.
WHS Opportunity	Opportunities to eliminate hazards and reduce WHS risks/opportunities to adapt work, work organisation and work environment to workers as described in ANZS ISO45001 – Occupational health and safety management systems
Worker	Definition as per Section 7 of the *WHS Act*, that is: 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— (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

Term	Definition
	(h) a volunteer; or (i) a person of a prescribed class 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. As per the *Workers' Compensation and Rehabilitation Act, 2003* s 11(1) (as amended 2013): A person who works under a contract with Queensland Health, and in relation to the work, is an employee for the purpose of assessment for PAYG withholding under the *Taxation Administration Act 1953*; who has sustained a work-related personal injury or illness. (The above definition is utilised by WorkCover Queensland when determining liability/eligibility for workers' compensation entitlements).

8. Version Control

Version	Date	Comments
1.0	21 July 2021	*New guideline* QH-GDL-401-3-1:2021

Appendix A - Risk assessment matrix

Consequence assessment

Type of consequence	Negligible	Minor	Moderate	Major	Extreme
People, property and environment	No structural or equipment damage. No environmental damage. No injury/illness or first aid treatment only. No time lost. (SAC 4)	Minor structural or equipment damage. Limited escape to onsite environment. Medical treatment required for injury. A full shift has not been lost. (SAC 3)	Moderate structural or equipment damage. Some offsite environmental damage. Lost time or injury or illness without permanent impairment. (SAC 2)	Major structural or equipment damage. Some offsite environmental damage. Serious injury or illness with permanent impairment. (SAC 2)	Catastrophic structural or equipment damage. Significant offsite environment impact. A loss of life. (SAC 1)

Likelihood (probability) assessment

Likelihood of incident occurring (from assessment information gathered)

Likelihood	
Almost certain	Expected to occur in most circumstances
Likely	Will probably occur in most circumstances
Possible	Might occur occasionally
Unlikely	Could occur sometime but not expected
Rare	May occur only in exceptional circumstances

Risk matrix

The risk matrix shall be used following the likelihood and consequence assessment.

Likelihood ↓	← Consequence →				
	Negligible	Minor	Moderate	Major	Extreme
Almost certain	Medium (7)	Medium (11)	High (17)	Very high (23)	Very high (25)
Likely	Medium (6)	Medium (10)	High (16)	High (20)	Very high (24)
Possible	Low (3)	Medium (9)	High (15)	High (18)	High (22)
Unlikely	Low (2)	Medium (8)	Medium (12)	Medium (14)	High (21)
Rare	Low (1)	Low (4)	Low (5)	Medium (13)	High (19)

Risk rating assessed: ☐ Low ☐ Medium ☐ High ☐ Very high

Possible consequence: ☐ Negligible ☐ Minor ☐ Moderate ☐ Major ☐ Extreme

Response to risk

Risk rating	Response to the risk
Very high	As soon as possible (and within one month) commence treatment planning for moderation. Monthly review by risk owner until effectively moderated. This includes risk treatment status updates. Monthly–provide risk update as relevant to governing body or management team and risk holders.
High	Within one month commence treatment planning for moderation. Monthly review by risk owner until effectively moderated. This includes risk treatment status updates. Monthly–provide risk update as relevant to governing body or management team and risk holders.
Medium	Within three months evaluate for treatment planning requirements. Quarterly–review by risk owner. This includes risk treatment status updates. As required, provide risk update as relevant to governing body or management team and stakeholders.
Low	Maintain effectiveness of current controls and manage by routine procedures. Monitoring and review schedule should be considered based on potential volatility of the risk. As required, provide risk update to governing body or management team and risk stakeholders.

Appendix B – Template risk register (example)

This template provides an example of the structure of a risk register. The information required for each hazard identified is highlighted in the columns. Note the hazards identified in this template are examples only and do not provide a comprehensive list of hazards that may be present in each accountability area. Relevant hazards for each accountability area should be identified with knowledgeable personnel.

Hazard	Risk factors	'At risk' activities	Existing risk controls	Owner of operational risk controls	Initial risk score	Additional risk controls required?	Specific legislated requirements/controls (mandatory)	Owners/positions responsible for additional risk controls	Completion date of additional risk controls	Residual risk score	Risk monitoring and review					
											Executive/Senior Management risk owners	Monitoring and evaluation of risk control	When will the risk control be monitored and evaluated?	Who will monitor and evaluate the risk control?	Who / where will records of implementation, maintenance, monitoring and evaluation be kept?	Risk item's next review date
Hazardous Manual tasks																
Occupational violence																
Slips trips and falls																
Fire																
Biological hazards																
Hazardous chemicals																
Confined spaces																
Remote, isolated, lone work																
Psychosocial																
Plant and structures																
Contractor safety																
Electrical safety																
Alcohol or other drugs																