

# Health, safety and wellbeing monitoring, evaluation and performance review guideline

## Human Resources Guideline (QH-GDL-401-4)

### 1 Statement

This document provides guidance to support the requirements of Queensland Health's *Health, safety and wellbeing monitoring, evaluation and performance review standard*, to enable each **accountability area** to implement processes for monitoring, evaluating and reviewing the effectiveness of the health, safety and wellbeing (HSW) management system.

### 2 Scope

This guideline supports the implementation of the *Health, safety and wellbeing monitoring, evaluation and performance review 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 monitoring, evaluation and performance review standard*.

Conformance with this guideline is not mandatory, but sound reasoning must exist for departing from the recommended principles within a 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 guideline, 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 undertaking HSW monitoring and review and performance reporting processes, consideration should be given to the specific needs and requirements of different diversity groups, taking into consideration factors including neurodiversity, gender identity, sexual identity, age and individual health factors; Aboriginal and Torres Strait Islander cultural safety and 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 internal and external audit programs, where required, as well as consultation in WHS risk management monitoring and review processes. Diversity groups should be included in worker consultation mechanisms informing monitoring and review of WHS risk controls, to ensure the different needs of different diversity groups are met.

Consideration must also be given to ensuring that HSW performance reporting and documentation uses inclusive language, such as gender-neutral terms and avoidance of gendered language, and also takes into account the characteristics and literacy levels of the intended reporting audience.

## 4 Requirements

This guideline outlines HSW monitoring and evaluation requirements for accountability areas (refer Figure 1). Additional guidance is provided on the accountability area's:

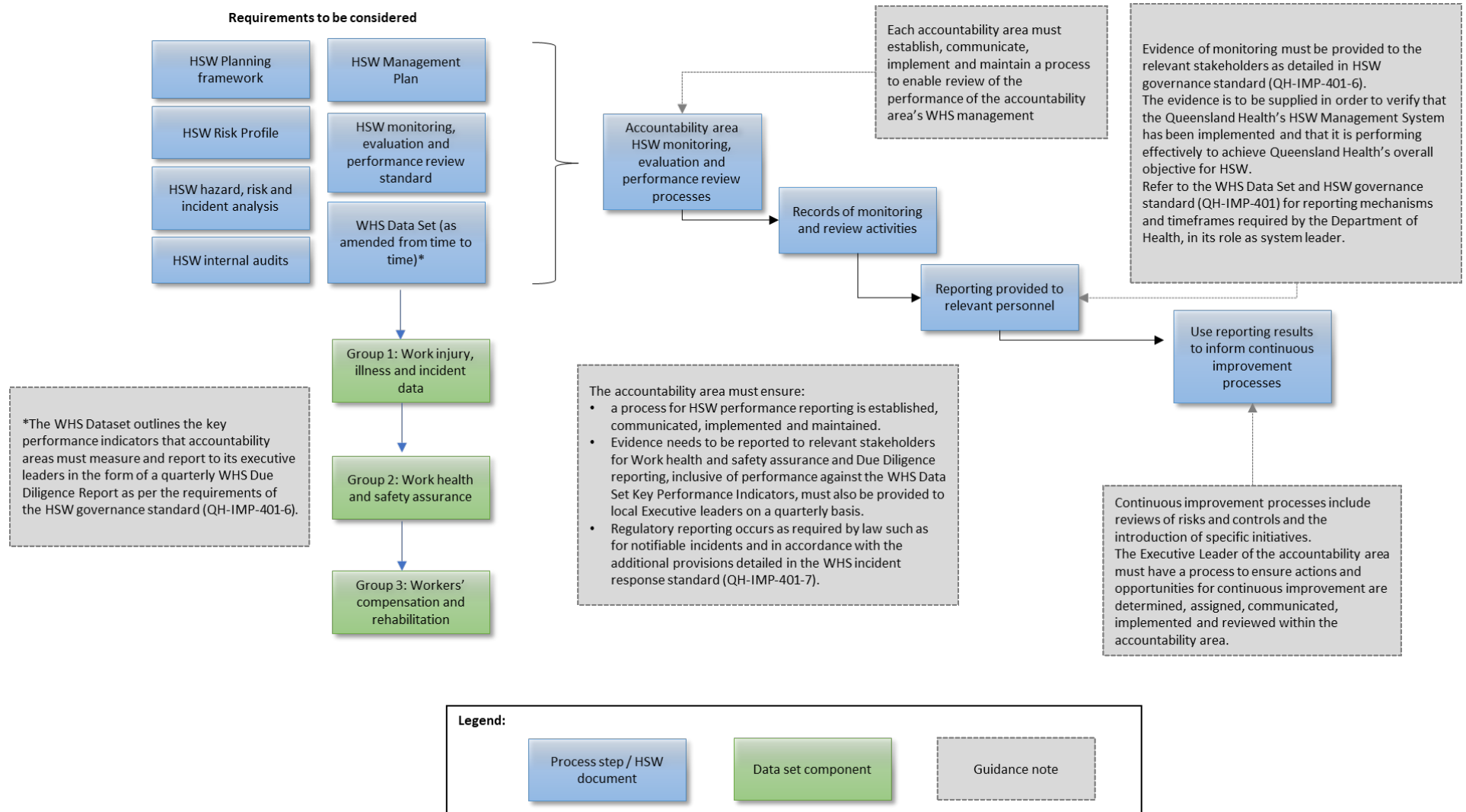
- requirements for monitoring HSW performance through qualitative and quantitative measures (section 4.1.1)
- HSW assessment processes (section 4.1.2)
- senior management review (section 4.1.3)
- legislative compliance review (section 4.1.4)
- third-party management system audits (section 4.1.5).

Monitoring, evaluation, and performance review is required to be undertaken by accountability areas in consultation with workers and shared duty holders and in accordance with the accountability area's strategic objectives in the HSW management plan, key risk control priorities identified through the HSW risk profile and/or register, and the requirements of the *Health, safety and wellbeing monitoring, evaluation and performance review standard* and associated *Queensland Health Work health and safety Data Set* (the WHS Data Set).

The following requirements from the *Health, safety and wellbeing monitoring, evaluation and performance review standard* and WHS Data Set are to be met by each accountability area, to allow for verification of HSW performance across the health system:

- Each accountability area must develop, implement and maintain a local process to enable review of the performance of their HSW management system.
- Evidence and reporting of accountability area monitoring and review activities must be provided to relevant stakeholders, in the form of:
  - senior management reviews of the accountability area HSW management system effectiveness, undertaken and documented by local executive leaders
  - internal legislative compliance reviews, undertaken by the accountability area
  - internal and external HSW management system audits of the accountability area.
- Each accountability area must measure and report HSW key performance indicators (KPIs) to its executive leaders, together with key information obtained from HSW monitoring, to enable review of local performance against the strategic objectives set out in the local HSW Management plan.
  - Reporting to executive leaders is to be provided, including due diligence reporting, as per the requirements of the *Health, safety and wellbeing governance standard*.
- The accountability area must have a process to ensure actions and opportunities for continuous improvement are determined, assigned, communicated, implemented and reviewed within the accountability area.
- Records must be generated of monitoring and review activities.

**Figure 1: Overview of HSW monitoring, evaluation and performance review considerations and links to HSW planning and continuous improvement**



## 4.1 Additional guidance for continual improvement activities

### 4.1.1 Monitoring HSW performance through qualitative and quantitative measures

A systematic approach for monitoring and measuring activities is to be established and implemented by each accountability area, to enable review of local performance against the strategic objectives set out in the local HSW Management plan; also incorporating, at a minimum, the Key Performance Indicator (KPI) requirements outlined in the WHS Data Set.

Qualitative and quantitative measures of WHS performance, incorporating both **lead indicators** and **lag indicators**, are detailed in the WHS Data Set (as amended from time to time). Each accountability area is required to ensure performance information is available to be collected for reporting within the accountability area and to the department, in accordance with the WHS Data Set.

Information provided is used by the department to evaluate the implementation and overall performance of Queensland Health's **Health, safety and wellbeing management system** (SMS), verify the success of HSW initiatives, evaluate the achievement of Queensland Health's objectives for health, safety and wellbeing and identify any emerging hazards and risks.

The KPIs in the WHS Data Set are structured into groups of lead and lag indicators:

- **Group 1: Work injury, illness and incident data KPIs.** These injury and incident and regulatory action measures are lag indicators which reflect the effectiveness of risk controls and serve to inform risk management strategies, programs and initiatives. This data presents a system-wide exposure profile, which serves to inform executive leaders of risk exposure and opportunities for statewide improvement.
- **Group 2: Work health and safety assurance KPIs.** These proactive verification activities are lead indicators which measure the efforts of prevention measures, through verification of implementation of the SMS within accountability areas.
- **Group 3: Workers' compensation and rehabilitation KPIs.** These injury and rehabilitation measures are lag indicators relating to compensable injury and illness claims performance and reflect the effectiveness of strategies implemented by policy holders in preventing workplace injury and managing WorkCover Queensland claims costs and durations, through provision of workplace rehabilitation and return to work support.

### 4.1.2 Accountability area's HSW assessment processes, including internal audits

The accountability area shall plan, establish, implement & maintain a process to review nonconformities with the SMS, that is, non-fulfilment of a WHS requirement outside of hazards and incidents.

Each accountability area shall establish assessment processes to confirm and verify the accountability area's HSW objectives, in addition to the external, third-party management system audits required by Queensland Health.

Assessment processes can be conducted by operational areas (first line), subject matter specialists/health and safety teams (second line) and through internal audit teams (third line). Internal audits should include personnel who have subject matter expertise in the focus area of the internal audit.

Internal audits should be conducted at planned intervals to provide information on whether the HSW management system:

- conforms to Queensland Health's HSW management system requirements
- is effectively implemented and maintained.

The extent of the internal audit program should be based on the complexity and level of maturity of the HSW management system. Internal audit programming and scope may extend to full management system implementation audits or may be determined by previous audit analyses of corrective actions or the local risk profile. Accountability area autonomy over internal audit programming provides flexibility for the prioritisation of deep-dive assessments of key aspects of safety performance, in alignment with local WHS strategic objectives and key risk priorities, including psychosocial risk management.

The Director-General or other executive leader may also undertake additional monitoring activities from time to time in accordance with due diligence obligations under safety legislation.

Accountability area's HSW assessment programs should be documented in local procedures and internal audit assurance mapping documents. Assessment results should inform both the accountability area's senior management review and continual review of the local HSW risk profile.

#### **4.1.3 Senior management review**

A senior management review is required to be convened by each accountability area on a biennial basis in accordance with the *Health, safety and wellbeing monitoring, evaluation and performance review standard*, and evidenced in accordance with the requirements of the *Work health and safety Data Set*.

The senior management review takes place as an internal review within each accountability area and serves to evaluate the overall suitability and effectiveness of the *Health, safety and wellbeing management system*, through review of local implementation.

Executive leaders, as persons in control of the management of the business, are required to be familiar with their safety management system and its performance, including through conducting a review of their HSW management system at planned intervals, to ensure its continuing suitability, adequacy and effectiveness.

The Senior management review ensures that executive leaders in the accountability area are aware of the extent to which the accountability area has met local strategic objectives as determined in the local HSW management plan, as well as the requirements of Queensland Health's *Health, safety and wellbeing management system framework*, i.e. the Health, safety and wellbeing policy and standards. It also serves as a mechanism through which executive leaders can remain informed of WHS risk management, including psychosocial risk performance, and the effectiveness of risk controls.

Senior management reviews should take into account assurance activities across the business and may incorporate findings and recommendations arising from legislative compliance reviews, internal audits and external third party audits, as well as the accountability area's risk register and HSW risk profile. The review may also be used to inform the local HSW risk profile and/or register.

The senior management review is to be run as a standalone collaborative meeting that is convened by the executive leaders within the accountability area, with input from relevant functional area leads who have WHS subject matter expertise and oversight of WHS hazards within the accountability area. Examples of functional areas that may have local oversight of specific WHS hazard areas are:

- health, safety and wellbeing
- building, engineering and maintenance
- security
- emergency preparedness lead area
- capital assets and facilities
- infection control and respiratory protection
- radiation safety lead area
- electrical safety lead area

The biennial senior management review of the continuing suitability and effectiveness of the HSW management system aims to:

- determine if the local **safety management system** (SMS) is adequately implemented within the accountability area including the availability of relevant local documentation, including procedures, processes and mechanisms
- determine if the SMS is effective in achieving the performance objectives set for HSW for the designated period of the accountability area's HSW management plan
- review strategic objectives and targets for HSW within the accountability area, as informed by the accountability area's HSW management plan
- enable recognition for work units and individuals who have made notable contributions to HSW within the accountability area
- identify areas for improvement where implementation or effectiveness require action and provide improvement recommendations for the next two years
- identify emerging issues or changes which may impact upon HSW within the accountability area and instigate actions to manage associated risk and/or to realise potential opportunities
- contribute to evidencing the exercising of due diligence in accordance with the requirements of section 27 of the *Work Health and Safety Act 2011*.

The senior management review should be conducted using the senior management review template. Refer to Figure 2 for an example of the senior management review process.

### **Action planning arising from the senior management review**

Executive leaders are required to determine continual improvement recommendations from the senior management review which are to be recorded in an action plan.

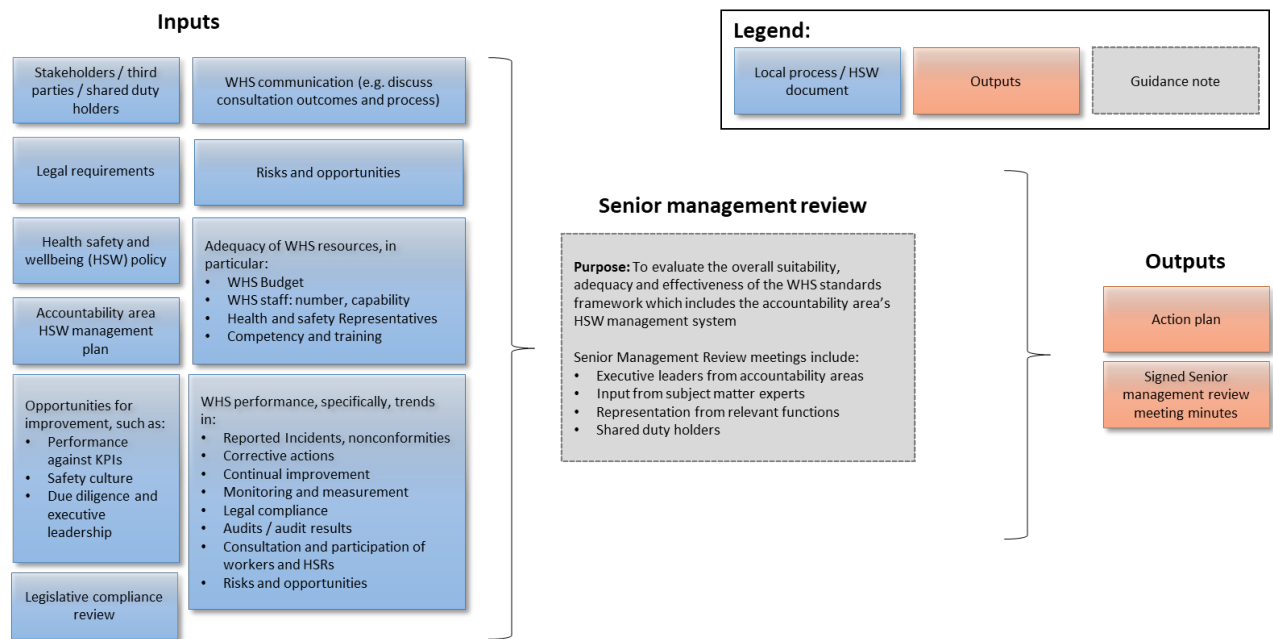
Action plans arising from senior management reviews should be implemented according to priority and risk of corrective actions as agreed by executive leaders, with timeframes and accountabilities assigned.

In accordance with the *Health, safety and wellbeing planning standard*, continual improvement recommendations can then be incorporated into future planning processes.

### Evidence of senior management review completion

A signed copy of the senior management review minutes and evidence of an action plan must be submitted to the Department of Health in accordance with the timeframes set out in the WHS Data Set.

**Figure 2: Senior management review process (example)**



#### 4.1.4 Legislative compliance review

The legislative compliance review occurs as an internal review within each accountability area and evaluates the extent to which the legal requirements of **safety legislation** are being fulfilled in relation to work health and safety, fire safety, electrical safety and workers' compensation legislation.

This legislative compliance review requires a robust method of verifying compliance, including the collection of evidence and consultation with accountability area stakeholders to obtain and confirm relevant information.

The accountability area shall determine the frequency and method(s) for the evaluation of WHS legislative compliance, to support annual attestations of legislative compliance.

The accountability area is to apply a risk-based approach to determine the timeframe for collection of legislative compliance evidence, in line with awareness of local compliance breaches, local risk appetite and results obtained from past compliance self-assessments. The risk-based approach will determine the basis for potential scheduling of legislative compliance self-assessments over longer periods (e.g. between one to three years), including whether future assessment/s are to focus only on previously identified non-compliance areas, in instances where no significant legislative amendments have been introduced during the intervening period.



The accountability area may use suitable tools and systems to self-assess local compliance with general WHS legislation. Evidentiary records are to be maintained by the accountability area in accordance with the *Queensland Government General Retention and Disposal Schedule (Administrative records)*. Results of the accountability area's legislative compliance reviews should inform the biennial senior management reviews and HHS due diligence reports.

Annual evidence to be submitted to the Department of Health as performance reporting against the WHS Data Set requirements shall be limited to an attestation statement of legislative compliance, accompanied by details of any **legislative breach** (in line with accountability area governance and compliance reporting requirements).

#### 4.1.5 External audit

A work, health and safety audit is a formal, systematic, documented review of systems, procedures and work practices to verify conformance with the requirements of the SMS and effectiveness of the implementation of organisational policy and standards.

The third-party (external) HSW management systems audit takes place within each accountability area and serves to evaluate conformance to Queensland Health's *Health, safety and wellbeing management system (SMS)* and progress against achieving local strategic objectives set out in the accountability area's HSW management plan.

The third-party audit of the local SMS constitutes a key assurance and due diligence exercise for the executive leaders of the accountability area, as well as informing the department, in its role as system leader, of non-conformances, in order to facilitate system-level improvements.

SMS audits are undertaken to verify that:

- the accountability area conforms with the Queensland Health SMS and is achieving progress against local strategic objectives set out in the accountability area's HSW management plan
- the Queensland Health SMS has been implemented in the accountability area and is performing effectively to achieve Queensland Health's overall objective for health, safety and wellbeing.

The Department of Health, in its role as system leader, procures and schedules the third-party HSW management system audits for each accountability area across Queensland Health, with audit schedules and completion requirements set out in the WHS Data Set.

## 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
- WHS codes of practice including the electrical safety codes of practice
- 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

- AS/NZS ISO45001: 2018 Occupational health and safety management systems – Requirements with guidance for use
- AS/NZS ISO45003: 2021 Occupational health and safety management – Psychological health and safety at work – Guidelines for managing psychosocial risks
- General Retention and Disposal Schedule (Administrative Records)
- Health, safety and wellbeing policy (QH-POL-401)
- Health, safety and wellbeing planning standard (QH-IMP-401-1)
- Health, safety and wellbeing consultation standard (QH-IMP-401-2)
- Health, safety and wellbeing risk management standard (QH-IMP-401-3)
- Health, safety and wellbeing monitoring, evaluation and performance review standard (QH-IMP-401-4)
- Health, safety and wellbeing governance standard (QH-IMP-401-6)
- HHS Executive - Board WHS due diligence report template
- HR Business Intelligence Workforce Analytics Metrics Library
- Legislative compliance review checklist
- Legislative compliance review attestation statement
- Queensland Health Health, safety and wellbeing risk profile (QH-IMP-401-3-Att1)
- Queensland Health Work health and safety data set
- Senior management review template
- SPR Work health and safety dashboard metrics dictionary
- SPR WHS Scorecards
- Work health and safety incident response standard (QH-IMP-401-7)
- 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.
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>
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 <i>International Standard for Occupational health and safety management systems: AS/NZS ISO 45001:2018</i> )
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>
Hospital and health service (HHS)	A statutory body established under the Hospital and Health Boards Act 2011 responsible for the provision of public sector health services for a geographical area, which includes one or more health facilities.
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.
Lag indicators	Reflect the effectiveness of risk controls and serve to inform risk management strategies, programs and initiatives; and to inform executive leaders of risk exposure and opportunities for improvement.

Term	Definition
Lead indicators	Reflect the implementation of risk controls, thereby measuring the efforts of prevention measures through verification of implementation of the safety management system.
Legislative breach	<p>A breach is a failure to comply with legislation or another requirement.</p> <p>Accountability areas are required to internally report potential, actual and significant breaches of safety-related legislation to the Department of Health on an annual basis, in accordance with the requirements of the <i>Health, safety and wellbeing monitoring, evaluation and performance review standard</i> and the following definitions -</p> <ul style="list-style-type: none"> <li>• <b>Actual breach</b> – Directed compliance by an enforcement notice issued, where the Work Health and Safety (WHS) Regulator and/or Electrical Safety Regulator reasonably believes there has been a contravention of the relevant legislation and has issued any of the following: <ul style="list-style-type: none"> <li>○ Prohibition Notice</li> <li>○ Electrical Safety Protection Notice</li> </ul> </li> <li>• <b>Significant breach</b> – an actual breach, resulting in sanctions issued and proceedings commenced or a penalty for non-compliance issued by the WHS Regulator and/or Electrical Safety Regulator, by way of: <ul style="list-style-type: none"> <li>○ Infringement Notice that is used for an individual and/or an accountability area (PCBU), for contravening WHS and/or Electrical Safety legislation</li> <li>○ Enforceable Undertaking has been entered into by an accountability area of Queensland Health with the Regulator, for an alleged contravention of WHS or Electrical Safety legislation</li> <li>○ Prosecution, or intention to prosecute an individual and/or an accountability area (PCBU), by the WHS Prosecutor.</li> </ul> </li> <li>• <b>Potential breach</b> – <ol style="list-style-type: none"> <li>1) Identification by an accountability area of non-compliance with a legislative requirement, where self-assessment by the accountability area suggests a breach is likely to occur without intervention and which met the locally determined threshold for breach reporting to the Executive leadership team and/or Board in the preceding financial year.</li> </ol> <p><b>and / or</b></p> <ol style="list-style-type: none"> <li>2) Directed compliance by an enforcement notice issued, where the WHS Regulator and/or Electrical Safety Regulator reasonably believes there may have been a contravention of the relevant legislation and has issued any of the following: <ul style="list-style-type: none"> <li>○ Improvement Notice</li> <li>○ Unsafe Equipment Notice</li> <li>○ Non-disturbance Notice</li> <li>○ Request to produce documents</li> </ul> </li> </ol> </li> </ul>
Others	Other persons as referenced in the <i>Work Health and Safety Act 2011</i> . Others are people who are not workers but whose health and safety may be impacted by one or more accountability areas.

Term	Definition
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 department of public authority. The PCBU holds a primary duty of care under the Work Health and Safety Act 2011.</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 Hospital and Health Boards Act). 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"> <li>(a) arises from, or relates to— <ul style="list-style-type: none"> <li>(i) the design or management of work; or</li> <li>(ii) a work environment; or</li> <li>(iii) plant at a workplace; or</li> <li>(iv) workplace interactions or behaviours; and</li> </ul> </li> </ul> <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>
Queensland Health Work Health and Safety Data Set	<p>Queensland Health Work Health and Safety Data Set as referenced in the <i>Health, safety and wellbeing monitoring evaluation and performance review standard</i>.</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>

Term	Definition
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, 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 Queensland Health 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"> <li>(a) an employee; or</li> <li>(b) a contractor or subcontractor; or</li> <li>(c) an employee of a contractor or subcontractor; or</li> <li>(d) an employee of a labour hire company who has been assigned to work in the person’s business or undertaking; or</li> <li>(e) an outworker; or</li> <li>(f) an apprentice or trainee; or</li> <li>(g) a student gaining work experience; or</li> <li>(h) a volunteer; or</li> <li>(i) a person of a prescribed class</li> </ul>

Term	Definition
	<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 work-related personal injury or illness. (Note – this definition is used by WorkCover Queensland when determining liability/eligibility for workers' compensation entitlements).</p>
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"> <li>• 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></li> <li>• amendment of <i>Work Health and Safety Regulation 2011</i>, as outlined in <i>Work Health and Safety and Other Legislation Amendment Regulation 2024</i></li> <li>• amendment of <i>Work Health and Safety Act 2011</i>, as outlined in <i>Electrical Safety and Other Legislation Amendment Act 2024</i></li> <li>• amendment of <i>Work Health and Safety Regulation 2011</i>, as outlined in <i>Work Health and Safety (Psychosocial risks) Amendment Regulation 2022</i></li> <li>• introduction of <i>Managing the risk of psychosocial hazards at work Code of Practice 2022</i></li> <li>• recognition of relevant Enterprise Bargaining EB11 WHS commitments</li> <li>• alignment to AS / NZS ISO 45001 criteria for performance evaluation</li> <li>• alignment to AS / NZS ISO 45003 criteria for performance evaluation</li> <li>• standard reformatted as part of the HR Policy review</li> <li>• amended to update references and naming conventions</li> </ul>
15 July 2021	Version 1.0 – New Guideline