



## Occupational & Office Health & Safety:

### Policies and Procedures

#### Objective

Healthy Living NT (HLNT) recognises its moral and legal responsibilities to the Work Health (OH&S) Regulations, to provide a safe and healthy work environment for employees, contractors, customers, volunteers and visitors. This commitment extends to ensuring the organisation's operations do not place the local community at risk of injury or illness.

Under the Work Health (OH&S) Regulations, HLNT as the employer has the ultimate responsibility to ensure that a safe workplace is maintained. To meet this requirement, HLNT will ensure that a safety management system is in place and that responsibility has been allocated to managers, supervisors and staff in the organisation.

#### Glossary

**Housekeeping:** Overall running of office including hygiene, office cleaning, first aid kits, appearance and presentation of office internally and externally.

**Safety:** Incidents which may affect the well-being of HLNT's staff, volunteers and customers, contractors, plant, equipment, fixtures and fittings.

**Health:** The cleanliness of the office which may affect the well being of HLNT's staff, volunteers and customers.

**Darwin or Darwin Office:** Means the office located at 1-3 Tiwi Place

**Alice Springs or Alice Springs Office:** Means the office located in the Jock Nelson Building

#### Policy Statement

HLNT will:

- Provide safe plant and systems at work;
- Provide written procedures and instructions to ensure safe systems at work;
- Ensure compliance with legislative requirements and current industry standards;
- Provide information, instruction, training and supervision to employees, contractors and customers to ensure their safety; and
- Provide support and assistance to employees and opportunities to be involved in consultation on safety issues.

#### Exceptions

Nil

#### Recommended Action if Policy is not followed

If an individual believes a breach in Occupational Health & Safety has occurred, they can lodge a complaint with the Occupational Health & Safety Officer, who will investigate the breach and rectify procedures or behaviour as required.

#### Responsibility for Policy

HLNT recognises that management has the overall responsibility to provide a safe workplace. Management representatives will be held accountable for implementing this policy in their area of responsibility. These responsibilities encompass:

Status	Draft	<b>Occupational &amp; Office Health &amp; Safety Policies and Procedures</b>	Document ID	G0015
Consultation	All Staff		Date of Issue	08/12/2018
Approval By	CEO		Version Number	7.0
Circulation	All Staff and Board		Review Cycle	Annual
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- Providing and maintaining the workplace in a safe condition;
- Ensuring all OH&S policies and procedures are implemented and followed;
- Actively promoting and being involved in the policies and procedures;
- Providing the resources to meet their OH&S commitment.

Employees will ensure that they:

- Follow all OH&S policies and procedures;
- Report all hazards and incidents to their supervisors/managers

### Consultation

Effective health and safety systems rely on good consultation and management; therefore OH&S will be on the agenda for all staff meetings as a standing item.

### Instruction and Training

Instruction and training is an important role in ensuring that the safe systems of work are effectively achieved and maintained. HLNT will conduct:

- Induction programs for new or relocated staff; and
- Refreshers to keep staff up to date conducted in staff meeting forums.

### Managing Injuries

Work Health legislation requires that injured workers have access to first aid, fair workers compensation and return to work rehabilitation, therefore managing injuries is an integral part of HLNT's safety management plan.

### Workers Compensation

HLNT is required to have a current insurance policy for all PAYG workers. HLNT will advise non-PAYG or PPS taxpayers ie contractors, that they are not covered by HLNT's workers compensation insurance, and they need to take out their own insurance.

### Rehabilitation and Return to Work

Occupational or vocational rehabilitation assists the worker to return to the workplace. HLNT will assist in rehabilitation and return to work programs for their staff.

### First Aid Officer

**Darwin** - Is Manager Education Services, however any RN on premises is qualified to perform basic first aid.

**Alice Springs** - Any RN on premises is qualified to perform basic first aid.

### Occupational Health & Safety Officer

CEO

### Inclusions

This document covers the following areas, all of which are associated with occupational health and safety:

- General Safety Requirements
- Special Safety Requirements
- Client Service Provision
- General Security and Housekeeping
- Asset and Record Management
- Emergency Procedures

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### Related Policies:

Workplace Health and Safety Policy Statement

OHS Risk Register

Motor Vehicle Policy

Child Protection Policy

Clinical Governance Policy

ICT Policy

Workplace Behaviour Policy

Uniform Policy

Induction Checklist

NT Domestic Violence Toolkit

Cybersecurity Policy

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# Section A: General Safety Requirements

## A. General Safety Requirements

### 1. General First Aid Guidelines

#### a) General First Aid procedures

HLNT is not a traditional health clinic and does not offer special first aid assistance to members of the public. Normal first aid / emergency procedures apply, including contact with St Johns Ambulance on 000. It is also important to note that it is likely that health professionals will be present in Darwin or Alice Springs offices and should be the first point of contact for any incident.

Staff / health professionals taking charge of an accident situation will find the following order of events helpful;

- S** Stop the danger
- A** Aid the injured
- F** Fast notification of the emergency services
- E** Emotional condition of the injured worker(s) / bystanders

#### **S Stop the Danger**

The first priority following any workplace injury is to assess the situation and to protect yourself, ensure others are not at risk and then attend the injured worker, ie

- switch off any electrical appliances
- turn off ignition (crashed cars)
- keep people away from any fallen power lines
- ensure no one is smoking
- In road traffic accident situations, safely position onlookers/vehicles to warn oncoming traffic
- Call Police on 000 if necessary.

**It is most important that the rescuers/helpers do not put themselves in danger and therefore compound the incident.**

#### **A Aid the Injured**

Depending on the situation, administer immediate first aid to the injured if required. Anyone who has first aid/ medical training should follow their scope of practice and if necessary call for further assistance from health professional staff and follow their directions. If unavailable call an ambulance.

#### **F Fast Notification of the Emergency Services**

##### **How to Call an Ambulance**

- Briefly assess the emergency situation
- Dial 000 or 112 (the international emergency number)
- Request ambulance service
- Information required by the Ambulance Controller:
  - Location of incident, street name & house/depot number, suburb, nearest main road/cross road, any other directions that might assist in locating incident eg km posts/signs/landmarks, number of casualties (if anyone is trapped), brief description of injuries

**DO NOT HANG UP** the telephone until the ambulance controller says so. If possible keep a record of the time the ambulance was called. A person should be delegated to watch and direct the ambulance to the incident.

#### **E Emotional Condition of all concerned in the Incident - Critical Incidents**

A critical incident is any situation faced by an individual or group that evokes a strong emotional reaction and/or physical reaction and has the potential to interfere with the ability to function either at the time of the event or sometime in the future. Management will seek outside professional help if required or advised by health professional staff.

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## Section A: General Safety Requirements

### b) Management of External Incidents

From time to time, external incidents will occur when undertaking remote service provision and outside HLNT offices, particularly the Darwin office. These incidents arise from, sometimes large, groups of people congregating in the vicinity, often under the influence of alcohol or other substances. Incidents such as medical emergencies or injuries resulting from violence within the group may occur.

**Under no circumstances should HLNT staff seek to personally intervene in external situations of this nature as they are likely to be putting themselves in danger by doing so.**

#### **Darwin**

Customer Service staff are most likely to notice issues external to the Darwin office. They are responsible for:

- Immediately advising Darwin City Council on 89300428 when large groups of people congregate and/or sleep in the vicinity of the office, particularly when alcohol or other substance abuse is suspected to be involved.
- In the event of the group becoming unruly or disruptive, which may be due to alcohol consumption or other social issues, advising the Police on the general contact number 131444.
- In the event of escalating disruptive behaviour or violence (physical or verbal) occurring, the Police and/or Ambulance are to be called on 000.
- Advising all Darwin staff of the level of reporting.

In the event of violence occurring or behaviour of a highly disruptive or threatening nature, staff may lock the front door to the office until the situation has resolved. In doing so, staff are to remain alert for client visits and to allow client access to the office where it is safe to do so.

#### **Alice Springs**

It is probable that similar incidents could occur outside the Alice Springs office, which is directly in front of the Police Station. Staff are unlikely to be aware of this as the office does not have street frontage. In the event of an incident occurring that is not being managed, Police should be alerted.

#### **Remote locations**

It is also probable that similar incidents could occur in communities where HLNT staff are providing remote services. In the event of an incident occurring that is not being managed:

- During business hours, staff of the health clinic should be alerted. HLNT staff are to follow the directions of the OIC of the health clinic, and
- Out of hours, the police should be advised.

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# Section A: General Safety Requirements

## 2. General Safety Provisions

### a) First Aid Kit

**Responsibilities**

The Manager Education Services will determine appropriate stocking of First Aid Kits, having reference to office locations and risk levels.

All staff are responsible to advise any usage of First Aid Kit items.

**Darwin**

A fixed First Aid Kit is located on the wall in the staff room – refer floor plan. It is the responsibility of the Manager Education Services to maintain its general currency. A cold pack will be kept in the freezer.

A mobile First Aid Kit is available for external health promotion activities.

**Alice Springs**

A fixed First Aid Kit is located in on top of the fridge in the kitchen – refer floor plan. It is the responsibility of the Alice Springs DNE to maintain its general currency. A cold pack will be kept in the freezer.

A mobile First Aid Kit is available for external health promotion activities.

**Cars**

A First Aid Kit is to be located in each Healthy Living NT car.

**Remote**

Refer Section C.3

### b) Fire Extinguishers

**Darwin**

Fire extinguishers are located at all exits and in the staff room. Fire hose reels are located at the entrance to Shop 2 and exit to Shop 3 – refer floor plan (**Attachment 6**). A six monthly service contract is held with Wormalds. Wormalds is also contracted to maintain emergency exit lights.

**Alice Springs**

Fire extinguishers are located in the staff room, kitchen and corridor – refer floor plan (**Attachment 5**). A six monthly service contract is held with Wormalds. Wormalds is also contracted to maintain emergency exit lights. LJ Hooker organise maintenance for the common areas of the building including fire extinguishers and emergency lighting.

**Cars**

A Fire Extinguisher is to be located in each Healthy Living NT car.

### c) Emergency Exits

Back, front and emergency exits are to be kept clear at all times, so as to allow unimpeded access out of the building in an emergency. Emergency exits are clearly located on the floor plans.

### d) Evacuation Procedures

The building is to be evacuated when a threat to building or staff is imminent eg fire or bomb threat. The person raising the alarm is to verbally advise all people within the building.

In **Darwin**, to broadcast to all stations via phone: *Dial 701 and press 1 and Mic*

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## Section A: General Safety Requirements

When an evacuation is called, staff are to ensure that any people in their care:

- **Administrative staff** – Clients in the waiting room, on-site contractors and people attending meetings
- **Health professional staff** – Clients in consults and people attending meetings

are directed to evacuate the building via emergency exits which are the front and rear doors as appropriate and proceed to the designated muster point. Personal belongings and a print-out of the diary may only be taken where it is safe to do so.

Once gathered at the designated muster point:

- Emergency services are to be contacted as appropriate
- A roll call will be conducted to ensure all staff, clients and other people on site are accounted for.

### **Darwin**

The designated evacuation muster point is the **adjacent sports oval**.

### **Alice Springs**

The designated evacuation muster point is the **lawn area in front of the office**.

### **e) Floor Plan**

A copy of the office floor plan for both Darwin and Alice Springs marking the location of fire extinguishers, emergency resources, first aid kits(s) and evacuation exits will be displayed in all offices and public areas.

### **f) Robbery Procedures**

Any workplace that handles cash is susceptible to the likelihood of a hold up occurring at some stage, either on the premises or while doing banking. If this eventuates, remain calm, obey all instructions given by the "robber/s", and do not volunteer any information unless asked by the "robber/s". The paramount concern is safety of the employee(s); not the money.

Try to take note mentally of any distinguishing marks/features, colour of eyes and hair, general description of clothing and accent. These are points that the police will ask for. As soon as it is safe to do so, activate the emergency duress alarm (Section D.2), ring the police on the emergency number (000) and report incident to your co-workers/supervisor. To assist the police with identification, nothing should be touched. A sign should be hung on door stating "closed due to robbery" until after the police and forensic have finished.

In the event of a robbery en route to the bank, remain calm, obey all instructions, and do not volunteer any information unless asked to do so by the "robber/s".

Again try to take note mentally of any distinguishing marks/features, colour of eyes and hair etc and phone the emergency number (000) and the office at the earliest possible safe time to do so.

### **g) Non Smoking**

HLNT is a smoke free work environment in accordance with NT legislation.

### **h) Employee Assistance**

Healthy Living NT is committed to maintaining a safe and healthy working environment. Where staff are experiencing work-related or personal problems, it may affect their work performance as well as their quality of life.

HLNT staff may access up to two (2) free confidential, professional counselling sessions per episode. Additional sessions may be approved on review. Staff wishing to access this service should contact their manager or the CEO and an appropriate service provider will be identified based on the nature of the issue.

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## Section A: General Safety Requirements

### 3. OHS Reporting /Work Injury Report

Hazard and incident reporting and investigation procedures are an essential component of the management of occupational health and safety in order to sustain a healthy and safe environment for all employees, contractors and subcontractors, visitors, clients and members of the public. In addition, NT Work Health and Safety and Workers Compensation legislation imposes certain obligations on HLNT in relation to the reporting, investigation and recording of hazards, injuries and other incidents.

All hazards and incidents involving HLNT employees or property, or other persons or property for which HLNT has a responsibility under the legislation must be reported. All hazards, injuries and other incidents need to be examined and recommendations for preventive action made. The roles and responsibilities for initiating and carrying out investigations are set out in this document.

#### a) Key Definitions:

**Accident** - an unplanned and undesirable event which results in injury to people and/or damage to property.

**Hazard** - means any situation with the potential to cause injury or illness, danger to health and/or damage to property, or equipment.

**Illness** - any diagnosed medical condition.

**Injury** - includes any diagnosed medical condition caused by exposure to a hazard.

**Incident** - means an identified hazard, a near miss or an unplanned event that could potentially or has already led to injury to persons or damage to property, equipment.

**Loss Time Injury** - an injury which results in a person being absent from their work for at least one full day.

**Near Miss** - an accident that does not produce an injury or disease but had the potential to do so.

**Notifiable Incident** - means an incident that has to be immediately reported to NT WorkSafe:

- A work-related accident (a situation or event occurring at a workplace, or arising out of a worker's work, that results in death or significant injury requiring medical treatment by a registered medical practitioner) resulting in an inpatient admission to a hospital; or
- An incident at a workplace creating a risk of a work-related accident and consisting of a fire; or the escape, spillage or leakage of a harmful, or potentially harmful, substance; or the fall of an object from a height; or an electric shock suffered at the workplace;

**Serious Injury** - means an injury that results in a Notifiable Incident.

**Significant injury** - means an injury requiring medical treatment by a registered medical practitioner resulting in an inpatient admission to a hospital.

**Workplace** - means any place, whether or not in a building or structure, where employees conduct work.

#### b) Reporting

All hazards, incidents and near misses are to be reported on the [Incident Report Form](#) (Attachment 1) in accordance with the process shown at Attachment 2 to this procedure. Where funded services such as Outreach Health Services specify use of a different form, this is to be used for reporting. (Note: even where a different form is used, the report must be made to HLNT management as designated in the processes below.)

##### • Hazard Reporting

All hazards are to be reported on the [Incident Report Form](#) (Attachment 1) if not able to be immediately rectified eg – cleaning up water on the floor in accordance with the process shown at Attachment 2.

##### • Work Related Incident Reporting

The [Incident Report Form](#) (Attachment 1) is to be used to:

- Report any injuries (physical or psychological) that a person has sustained
- Report the administration of First Aid or medical treatment

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## Section A: General Safety Requirements

- Report any incident that was a near miss (no damage or injury)
- Report any damage to equipment or property.

Wherever possible, the form should be completed by the 'affected' person ('affected' includes those who are subject to a 'near miss' as well as any accident/injury.) If the affected person is an employee and cannot complete the form, any witness or the person's manager should ensure it is completed. If the affected person is contractor, client, visitor or volunteer and cannot complete the form, any HLNT health professional or staff member should ensure it is completed.

The Incident Form needs to be completed by the injured person, witnesses to the incident, the health professional involved in the initial first aid/ action and the appropriate manager.

### c) Incident Investigation and Recording

Incident investigation is a management responsibility and should involve all affected parties and health professional expertise, where appropriate. Investigation is required for all incidents with risks rated as medium and high. All records, especially those requiring mandatory reporting, relating to incident reporting and investigation must be maintained in a systematic manner.

### d) Responsibilities

**All Employees** Employees are obliged to report all hazards, near misses and incidents which occur or have the potential to occur in accordance with the process shown at [Attachment 2](#). Reporting requires completion of the [Incident Report Form](#) and submitting it to their supervisor as soon as possible.

**Management** Management has a responsibility to ensure that corrective actions are developed in consultation with affected parties. They are also required to ensure these actions are put into place effectively eliminating or reducing the risk associated with a hazard and preventing incidents from occurring or reoccurring. This is to be documented on the relevant report form and in updated procedures. All incidents will be documented on the Incident Register maintained by FAM. The CEO and other senior managers will participate in any incident investigation.

**NT Worksafe Notifications:** The legal duty of notification lies with the person who might be reasonably thought of as having control over the work site. The respective Manager must notify the CEO immediately, who will make arrangements to NT Worksafe by telephone. The CEO will assist the respective manager/supervisor to provide further written information to NT Worksafe, within 48 hours. In the CEO's absence, this reporting is delegated to the Finance and Administration Manager and/or the Manager Education Services, or in their absence, a member of the Board Executive.

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## Section A: General Safety Requirements

### 4. Mandatory Reporting under NT Law

All people in the NT have a legal responsibility to formally report suspected or actual domestic violence and child abuse. This legal obligation applies to all HLNT staff and applies to both staff and clients.

#### a) Child Protection

In the Northern Territory, you must make a report if you reasonably believe a child has been harmed or exploited, or that a child is likely to be harmed or exploited. This is a legal responsibility under *the Care and Protection of Children Act 2007* and is called mandatory reporting.

Your report should include any relevant information about your concerns for the child's safety and wellbeing. You don't need proof of harm or abuse to report your concerns - you just need a reasonable belief that a child has been harmed or is likely to be harmed.

If you are worried about neglect or harm to a child but are not sure if it's something you should report, you should talk about your concerns with professional staff at the Child Abuse Hotline on 1800 700 250. You are safeguarded under the law from legal or professional liability if you make a report in good faith.

#### **How to report**

In an emergency call 000 and ask for police. If it's not an emergency, call police on 131 444 or contact your local police station. You can also report suspected child abuse and neglect to either:

- the Child Abuse Hotline on 1800 700 250
- or Crime Stoppers on 1800 333 000.

Further information is in HLNT's ***Child Protection Policy***.

#### b) Domestic Violence

Domestic violence is defined as physical or emotional abuse, intimidation, stalking or economic abuse. All adults are required to report serious domestic and family violence to the police. The Act requires this if someone has caused or is likely to cause serious physical harm to someone else, and/or the life or safety of another person is under serious or imminent threat from domestic violence.

You need to call the Police on 000 for emergencies or 131 444 in instances where you think you need to report but where an emergency response is not needed.

Further information is contained in the [NT Domestic Violence Mandatory Reporting Toolkit](#).

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## Section B: Special Safety Requirements

### B. Special Safety Requirements

There are a number unique safety issues that all employees and volunteers must be aware of, and actively adhere to at all times.

#### Reporting

An [Incident Report Form](#) (refer Sect. A.3 – OHS Reporting) must be completed for any medical incident requiring:

- requiring the application of first aid or medical attention described in this procedure, or
- requiring an ambulance to be called.

#### 1. Infection Control Procedures

HLNT Health Professional staff must follow Universal Precautions to minimise risks when in contact with potential contaminants. Procedures are in place for non-Health Professional staff to be protected within the workplace.

This Infection Control Procedure supports HLNT’s OHS obligation to promote effective management of risks where cross infection could occur.

##### a) Responsibilities

Manager Education Services is responsible for ensuring:

- Nursing staff are registered.
- Other allied health professional and non-health professional staff are effectively inducted in infection control procedures and receive relevant updates.

HLNT Registered Nursing staff are responsible for maintaining their nursing registration and practising within the scope of that registration, maintaining appropriate levels of Continuing Professional Development and following National Infection Control Guidelines and Procedures.

All health professional staff are responsible for monitoring safe infection control practice in the workplace.

All staff are responsible for complying with this procedure.

##### b) Blood and Blood Products

HLNT staff should avoid unprotected physical contact with blood or products covered with blood. HLNT is responsible for providing protective gloves and hand sanitiser in consultation rooms, reception areas and in the external health professional equipment bags. Health professionals are responsible for restocking the consumables within the equipment bags. All staff are responsible restocking consumables for the area within their control.

Sharps and used consumables should be disposed of directly into an Approved Sharps Container, which are located in consultation rooms, reception areas and in the remote health professional equipment bags.

Other hardware products such as meters with blood on them should be sealed in plastic bags prior to handing over to a health professional.

Staff and volunteers should wear adequate footwear at all times.

##### c) Handling and Disposal of Needles Syringes and Lancets

Standard precautions must be maintained when handling used needles, syringes and lancets, due to the risk of infection with a blood borne virus such as hepatitis B or C, or HIV. Education services provided by health professionals may include the demonstration of the use of these products.

The only acceptable means of disposal is in an **Approved Sharps Container**. These are located at the front reception areas and in all consultation rooms.

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## Section B: Special Safety Requirements

A Sharps Clean-Up Kit is located in each office. In Darwin - located in the Front stock cupboard, and in Alice Springs on the filing cabinet in the conference room and follow instructions contained within. RN health professionals are responsible for maintaining the contents of the Sharps Clean-Up Kit and to replace any items after use.

All sharps are to be placed in a container which complies with Australian Standards.

HLNT will accept Approved Sharps Containers from clients or members of the general public for disposal into yellow wheelie bins located in both the Darwin and Alice Springs offices.

Other sharps products such as those in non-approved containers or from sources such as pharmacies, vets or schools cannot be accepted by HLNT. In these cases, the person is to be advised to take their products to the nearest hospital or community health clinic.

### d) Product Demonstrations

All employees involved in product demonstrations or blood glucose testing should wear protective gloves.

Blood glucose testing should only be carried out by a trained health professional. Single use lancets are to be used, except where demonstrating/teaching the use of a multi-use device to a client.

Customer Service staff may provide advice and supervision in the use of products only. They should not conduct tests on clients but may conduct tests using control solutions.

All product demonstrations will be conducted in a client consult room or at a separate table away from the front counter. Tissues, alcohol swabs, zip lock bags, gloves and a sharps container will be immediately accessible.

### e) Needle Stick Incidents

Accidental self-pricking with a used lancet or pen needle may occur even with experienced staff. In the event of accidental used needle stick injury or other contamination:

- Immediately squeeze the wound gently to make it bleed,
- Wash the wound as soon as possible under cold water with soap
- Clean the wound with an alcohol swab or antiseptic and apply a dressing
- Advise the Manager Education Services and/or CEO immediately and complete a Work Injury Report
- Contact your doctor, nearest hospital or Disease Control Centre for further remedial action.

The Manager Education Services will:

- arrange a debriefing and, where appropriate, counselling for all staff involved in the incident; and
- critically review the incident to determine whether changes in practice would reduce the likelihood of recurrence.

### f) Immunisations

Following a personal immunisation programme is an individual employee responsibility. HLNT has reviewed its infection control measures and assessed the work environment as low risk. In order to enhance this low risk environment the following opportunities are available.

Any staff member may voluntarily elect to have the following vaccinations and normal costs of vaccination will be reimbursed by HLNT:

- the flu vaccine;
- Hepatitis B immunisations;
- other vaccinations routinely recommended by the NT CDC.

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## Section B: Special Safety Requirements

### 2. Client Medical Events

Healthy Living NT provides a variety of services including general physical activity programs and education and rehabilitation programs to clients with diabetes and cardiac conditions in the Northern Territory. Clients attend education and rehabilitation programs in HLNT offices and at external settings.

Medical emergencies can occur unexpectedly; clients of HLNT have a predisposition to particular medical events. The following procedures will ensure an immediate response by HLNT staff in the event of potential life threatening medical emergencies until emergency services arrive.

#### a) Responsibilities

*Manager Education Services* – Responsible for ensuring health professional staff undergo annual CPR training, health promotion staff undergo annual First Aid training and relevant staff have been trained in the use of the Automated Cardiac Defibrillator in Darwin.

*Health Professionals* – Maintain nursing or other professional registration and undertake refresher courses as directed by the Manager Education Services. Responsible for ensuring emergency equipment is tested and maintained.

*Health promotion staff* employed directly by HLNT must undergo annual First Aid Training. Registered Nurses employed by HLNT are excluded from this requirement.

*Management/Administration Staff* – Participate in education defining their role and responsibilities in the event of a medical emergency.

#### b) Cardiac Exercise Classes

To participate in the cardiac exercise classes, the client must be approved by a Cardiac Nurse Educator. Clients are to be excluded from exercise sessions if they have conditions which are listed as specific exclusions from exercise in the *Best Practice Guidelines for Cardiac Rehabilitation and Secondary Prevention*.

For people with diabetes, Blood Glucose Level (BGL) monitors will be available to test their blood glucose level; those with BGLs less than 5 and greater than 17 mmols will not participate in exercise. It is the responsibility of the person with the diabetes to decide if they wish to check their BGL prior to exercise. For people who are experiencing a hypoglycaemic event, refer below.

#### c) Management of Hypoglycaemia

In the event of a client experiencing a suspected hypoglycaemic event, the health professional staff will test the client's blood glucose level and, where appropriate, administer appropriate fast acting treatment and monitor blood glucose levels (repeating if necessary), followed up with complex carbohydrate. Refer to Education Manual for detailed procedures.

If a client experiences a suspected hypoglycaemic event and no health professionals are available, staff will assist the client to administer the treatment requested by the client (either the client's own treatment or from the HLNT 'hypo kit') and call an ambulance if required. The client is responsible for determining when they can safely resume normal activity, and an information handout on management of hypoglycaemia should be provided to the client.

If the event is severe or the person is unconscious, the person is to be placed in the recovery position and the ambulance called on 000.

A hypo kit will be maintained in HLNT offices in Darwin by the Manager Education Services and in Alice Springs by the DNE. The hypo kits are located as follows:

Site	Location 1	Location 2
Darwin	Front stock cupboard	Cardiac emergency kit
Alice Springs	Next to First Aid Kit in kitchen	Physio department at ASH Gym (in filing cabinet)

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## Section B: Special Safety Requirements

### d) Management of Chest Pain

In the event of a client experiencing chest pain, they are to sit on a chair and instructed to take deep even breaths. The Cardiac Educator is to be notified immediately if on the premises otherwise another nurse. If there are no nurses present, ring an ambulance on 000.

If a nurse is present, the nurse is to take the client's blood pressure and heart rate, and assess the client's chest pain. Treat as per Angina Management Plan plus oxygen if appropriate and available.

### e) Management of Cardiac Arrest

In the event of a client experiencing a cardiac arrest, the staff member with the person is to call out to alert other staff. **An Ambulance is to be called on 000 immediately.** Nurses/health professionals are to provide CPR according to best practice recommendations.

The Darwin Office has an Automated Cardiac Defibrillator located in the Cardiac Emergency Kit the training room. A health professional trained in the use of this equipment can use this as directed. Other (non health professional) staff members may administer CPR or the defibrillator if they have completed formal training or they are operating under the supervision of a health professional.

All HLNT health professional staff must undertake annual advanced CPR training through a Registered Training Provider. Non health professional staff may undertake this training on a voluntary basis.

### f) Management of Other Cardiac Events

In the event of a client becoming faint, dizzy, excessively short of breath, experiencing palpitations or feeling generally unwell, they are to sit down and relax. If no nurses are present, **an ambulance is to be called on 000.**

If a nurse is present, blood pressure and pulse are to be taken and oxygen may be administered if required (and if available) and **if symptoms persist the ambulance is to be phoned on 000.** If the client is participating in an exercise program, they are not to continue doing exercise again in that class, even if their symptoms resolve.

### g) Cardiac Emergency Equipment

In accordance with the *Best Practice Guidelines for Cardiac Rehabilitation and Secondary Prevention*, the minimum cardiac emergency equipment to be maintained is:

- A simple manually controlled ventilator and plastic airways
- Scissors or equivalent
- Anginine tablets / GTN spray or equivalent
- Hypo Kit
- Oxygen with mask and tubing

The Automated Cardiac Defibrillator must be tested and calibrated in accordance with the manufacturers guidelines. This is the responsibility of the urban Cardiac Educator.

### h) Location of Cardiac Emergency Equipment

**Darwin** - The Cardiac emergency equipment is located in the marked storeroom in the Training Room. It is the responsibility of the urban Cardiac Educator to maintain equipment and supplies. It is also the Cardiac Educator's responsibility to ensure that health professionals are familiar with the equipment and how to use it correctly.

**Alice Springs** - Emergency equipment is located in the Rehabilitation Centre at Alice Springs Hospital. It is the Cardiac Educator's responsibility to ensure that Alice Springs Hospital is formally advised of any maintenance issues.

### i) Storage of Temperature Sensitive Consumables

Bulk supplies of temperature sensitive consumables such as blood glucose test strips must be stored in the air-conditioned storeroom in Darwin.

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## Section C: Client Service Provision

### C. Client Service Provision

Healthy Living NT (HLNT) provides a range of services to clients in urban, remote and regional areas. The safety of HLNT staff, contractors, clients and visitors is of paramount importance.

Delivering services to clients and/or their carers from a diverse range of cultural and socio-economic backgrounds in an office setting, a client's home or an urban or remote external health clinic may pose hazards and risks including risk to personal safety, physical injury (threatening behaviour or assault, robbery etc), psychosocial impact.

This procedure provides guidelines for the delivery of HLNT services to clients and/or their carers within the offices of HLNT and in clinics and client homes in urban, remote and regional areas.

#### 1. HLNT Offices

##### a) Aggressive or Abusive Clients/General Public at HLNT offices

In the event of an aggressive or abusive customer, the staff member should seek to calm the client by listening to their complaint, and where necessary refer the client to a supervisor. Procedures outlined in HLNT's Consumer Complaints Mechanism should be followed.

Where a customer is intoxicated or suffering the effects of other drugs and/or is aggressive or violent and/or is causing unreasonable disruption to other clients:

- Another staff member(s) (preferably a health professional) is to be summoned as quickly as possible.
- The customer is to be requested to leave the premises. If this request is not obeyed within a reasonable period, the staff member(s) should call the Police and report the incident.
- Depending on the gravity of the incident and based on the judgement of the staff member(s), the general police switch number (131 444) or the 000 number should be called.
- Where there is a threat of physical violence:
  - other people in the building should be notified of the incident and, where necessary, arrange for evacuation of the premises.
  - the Duress Alarm should be activated (refer Section D.3 – Building Security) (The duress alarm is for use by a staff member who feels they are in immediate personal danger – irrespective of the number of other staff in the office).

*Once activated, the Fixed Duress Alarm will produce an immediate response from the NT Police and/or Chubb Security/O'Brien Security.*

The incident should be verbally reported to the most senior staff member present as soon as possible who will arrange a debriefing and/or counselling as appropriate. An Incident Report is to be completed when practical to do so.

HLNT offices occasionally receive one-off requests from members of the general public to make phone calls, obtain cold water or to use the toilet. Each request needs to be assessed on a case by case basis and supported wherever reasonable having regard to HLNT operations. However the practice of humbugging and regular use of HLNT facilities by members of the general public are not to be encouraged.

##### b) Minimum Staffing

###### Darwin

Wherever possible a minimum of 2 members of staff will be present at HLNT's Tiwi Office during business hours or when the office is open to the public. Exceptions are to be noted in the diary. The **mobile Personal Emergency Transmitter** is to be utilised if only one member of staff is on the premises and the office is open (refer Section D.2 – Building Security)

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# Section C: Client Service Provision

## Alice Springs

Having due regard to the non-shopfront nature of the Alice Springs office, proximity to the Police Station and surrounding other offices, there are no minimum staffing requirements for the Alice Springs office. A **fixed Duress Alarm** and **mobile Personal Emergency Transmitters** are available for use (refer Section D.2 – Building Security).

### c) Client Consultations Extending beyond Normal Business Hours

No health professional staff member is to be left alone in the office with a client where the consultation has extended beyond normal business hours. Where such a consultation extends beyond half an hour after public closing, the health professional is to be phoned and advised to terminate the consultation.

## 2. Client Home Visits

### a) Urban Services

It is not regular practice for HLNT health professionals to undertake client home visits. Client home visits must be approved in advance by the Manager Education Services who will assess both the need and any risk factors based on the Home Visit Risk Assessment Tool ([Attachment 3](#)).

Where a home visit is deemed necessary, two (2) health professionals should attend wherever possible and/or appropriate. A mobile phone must be carried on all home visits.

The attending health professional(s) should leave written advice in the diary and verbal advice with reception staff confirming:

- name and address of client
- contact number for client
- expected time of return
- mobile phone contact number(s)

Where the home consultation extends or is likely to extend more than 10 minutes beyond the allocated time, the health professional(s) must contact the office and advise a new estimated time of return. In the event staff members have not returned from a client home visit as indicated or made phone contact, reception staff are to phone the staff member for confirmation of their wellbeing and estimated return.

In the event staff members cannot be contacted, management must be notified immediately or if that is not possible, reception staff are to phone Police on 131444 and provide details as required.

### b) Remote/External clinics

Client home visits associated with external clinic clients can only be conducted at the request of the clinic, and must be accompanied by a member of that clinic. Remote service provision does not normally use client home visits as a preferred means of service delivery. There should be compelling reasons prior to undertaking a client home visit associated with remote or external service.

No staff member should undertake, or feel compelled to undertake, a home visit where they feel unsafe or they believe there are insufficient reasons to justify the home visit.

## 3. Other External Services

HLNT staff regularly provide other external services such as school and workplace visits and training from a variety of venues. No special assessment requirements apply to these venues or activities.

Staff should familiarise themselves with the emergency procedures of the venue and where appropriate, follow the instructions provided by the venue.

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## Section C: Client Service Provision

### 4. Remote Clinic Service Provision

This procedure seeks to ensure the management of identified potential risks associated with health professional and other staff travel to remote regions or communities for service provision. Risks associated with remote travel include items such as community unrest, vehicle breakdown, adverse weather conditions and fatigue.

Where health professional or other staff provide services in external clinics or settings they are required to follow the OHS procedures in place at that external clinic and obey all instructions given by that clinic in relation to safety. Any client conduct issues or safety concerns or queries should be directed initially to the relevant manager of that clinic, with a report to HLNT. If, after risk assessment, the matter is not satisfactorily resolved, HLNT will investigate the matter directly with the clinic concerned or the funder, as appropriate.

A remote location is defined as travel outside of any regional centre in the NT. Travel from one town/city to another on a sealed road is not defined as remote where the length of travel time is less than 4 hours. However the standard pre-trip procedures and reporting requirements still apply.

Generally, travel to remote areas is only undertaken when the staff member is accompanied by another HLNT staff member, a member of a multi-disciplinary team or an accompanying pilot (not preferred but may be necessary where illness changes a trip from two health professionals to one last minute). Where sole travel to a destination is proposed, a risk assessment should be conducted and travel approved by the Manager Education Services. Factors to be taken into account include mode of transport (single driver to multiple communities versus a flight into a community directly/overnight stays in communities versus townships/established and proven effective relationships with staff in the communities receiving services) Where there has been an unforeseen change of circumstances at the last minute, this approval may be sought verbally.

Where a HLNT health professional is providing services under the Outreach Health Services program, they are to follow the processes and procedures of that program. Where Healthy Living NT has any concerns regarding the safety and practicality of any travel arrangements in the delivery of these services, they are to be elevated to the Program Manager. Where safety concerns are rated high, no travel is to be undertaken until a resolution has been achieved.

A pre-trip risk assessment should be undertaken before any travel including contact with the health centre(s) to obtain advice and direction regarding confirmation/suitability of visit. Where there is any level of heightened risk eg road conditions or community unrest, the specific approval of the Manager Education Services is required. <https://secure.nt.gov.au/> is a recommended source of information regarding roads and weather conditions.

The following processes should be followed:

- Contact with the Clinic Manager to confirm visit and clinic lists
- Travel itinerary for approval including request for vehicle / flight booking / accommodation
- Remote Travel pre-trip check list (**Attachment 4**)
- Confirmation phone call to clinic in the week prior to expected visit to confirm client list, clinic preparedness etc.

Staff travelling to remote communities must comply with:

- All land permit requirements and alcohol and cultural restrictions that may apply in each community
- Instructions from the pilot at all times and do nothing to jeopardise the safety of a flight. Comply with pilot briefings concerning in flight procedures, including emergencies, embarking and disembarking and general safety and/or
- Where applicable, comply with the *NT Traffic Act*, ordinances, laws and regulations and HLNT's *Motor Vehicle Policy*.

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## Section C: Client Service Provision

HLNT provides all staff travelling remote with a Remote Travel Kit comprised of clinical and personal safety items. It is the responsibility of the staff member to ensure that all contents of the kit are kept up to date and complete (at HLNT expense). The Remote Travel Kit shall include as a minimum:

Per Staff Member	Per Trip	Personal items
Sunscreen	InReach personal GPS device and charger	Water supplies (particularly when travelling by vehicle)
Insect Repellent	Laptop	Hat
Hand Sanitiser	Hotspot capable phone/dongle	

A remote risk assessment using the Remote Travel Checklist ([Attachment 4](#)) as a reference must be completed prior to every trip by the primary co-coordinating staff member. Formal completion of the form is only required where an issue has been identified and further approval/ discussion is needed with the MES.

Confirmation that this assessment has been conducted should be noted in the "Travel and Clinic Hours" spread sheet in the Remote folder on the O drive, together with any relevant comments or where approval has been referred to the MES.

HLNT staff must be provided with instruction by the Manager Education Services on how to use the InReach personal GPS device before remote travel is undertaken. This is to include standard reports such as Check In/OK, Track Progress as well as elevated reporting such as Help/Assistance required and SOS.

For **ALL** remote trips, educators should carry an InReach personal GPS device. Where travel is by road and/or to communities with suspect or no mobile coverage, InReach reports are mandatory as follows:

- Road Travel: For entire duration of trip – **TRACK PROGRESS**
- Communities with suspect or no mobile coverage – **CHECK IN/OK**

The Manager Education Services **and**

- the Finance and Admin Officer (for trips originating from Darwin) **or**
- the Customer Service Officer (for trips originating from Alice Springs)

will monitor Inreach reports periodically, and in the event of unusual location/possible delay, will endeavour to contact the staff member(s) by mobile phone or via an InReach SMS. If they are unable to contact the staff member(s) within a reasonable period (based on an assessment of the particular situation), they will contact relevant authorities.

**It is incumbent on staff to advise of any deviations to itineraries when travelling remote, particularly by car.**

For **ALL** remote trips, travelling staff must advise of their arrival at a location and their return to base at the end of a trip as follows:

- During business hours - travelling staff must advise the office. The person taking the message must email all staff in that office.
- After-hours, a text message (or Inreach report) must be sent to the Manager Education Services **and** the Finance and Admin Officer (for trips originating from Darwin) **or** the Customer Service Officer (for trips originating from Alice Springs).
- After-hours, where the Manager Education Services is on a remote trip, notifications are to be sent to the CEO and FAO.

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## Section D: General Security and Housekeeping

### D. General Security and Housekeeping

#### 1. Office Appearance and Presentation

When working in the office, basic consideration should be shown by keeping a respectable work environment and maintaining a presentable appearance.

All staff and volunteers are responsible for reporting any corrective action required regarding maintenance and or security on building and equipment to either the Finance and Administration Manager or the CEO.

It is the responsibility of all staff and volunteers to ensure that the kitchen, group education and public areas and toilet areas are clean at all times.

**Workstations** All staff and volunteers are expected to keep a clean and tidy work area for the benefit of other staff members and customers.

**Stock** All stock deliveries must be stored as soon as possible (even if reconciliation is yet to be done), to ensure that walkways are not impeded.

**Storeroom** As all of HLNT's paperwork is stored on the shelves in the storeroom, we must continually check that it is still necessary to keep the paperwork, and that it is being stored safely on supporting shelves and in an orderly manner (not overhanging).

**Floors** All floors and walkways should be cleared and kept clean, rubbish must be binned, products stored away and if floors become slippery - cleaned ASAP.

**Empty Cartons** Must be stored in a manner that does not impede access to exits or pose a fire threat.

**Food Scraps** Must be removed from the office daily or placed in a freezer.

#### 2. Building Security

**Key register** Is maintained by the Finance and Administration Manager/Alice Springs CSO with details of keys issued. Spare keys are to be kept in the safe.

**Emergency After Hours Contacts** Contacts are listed with NT police. Finance and Administration Manager/Alice Springs Customer Service officer to review annually.

**Window Repairs** In the event of damage to glass windows a call is to be placed to repair ASAP. If the above happens outside normal working hours, the person placing the call must ensure they stay on the premises until the glass is repaired and the contractor has left before they leave the building.

**Entry & Exit** The first person into the building checks the status of the building and calls police if a break-in has occurred. The last person to leave the building does a physical check, secures stock room, and turns off lights and air conditioners where necessary. Whoever is last in the building takes personal responsibility to ensure it is locked and adequately secured.

This also includes the arming/disarming of the security alarm (refer below).

**Security Systems** **Alice Springs and Darwin Offices:**  
Both offices have a **Fixed Duress Alarm** located under the front counter/desk. The alarm is for use by a staff member who feels they are in immediate personal danger (irrespective of the number of other staff in the office).

Once activated, the Fixed Duress Alarm will produce an immediate response from the NT Police and/or the Security Contractor (Chubb in Darwin and O'Briens in Alice Springs).

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## Section D: General Security and Housekeeping

**Alarmed motion sensors** are installed in both Darwin and Alice Springs offices, which are linked to visual and audio alarms (internal and external) and to the security contractor. The system must be armed/disarmed by the first person entering/last person exiting the building. All staff will be provided with a 6-digit security code (Darwin) or a 4-digit security code (Alice Springs) for system management. Detailed procedures are contained in HLNT’s Office Procedure Manual.

A **mobile Personal Emergency Transmitter** is also available for use in both offices. It is for personal use of staff when in the office alone and/or when exiting to their vehicle. The alarm is for use by a staff member who feels they are in immediate personal danger, and operates in a similar manner to the Fixed Duress Alarm.

*Darwin:* The mobile **Personal Emergency Transmitter** is located in the drawer under the cash register at the front counter and must be returned as soon as possible if removed from the premises.

*Alice Springs:* Mobile **Personal Emergency Transmitters** are located on the desk in each education office, and must be returned as soon as possible if removed from the premises.

The Finance and Administration Manager is responsible for ensuring:

- Regular testing of the security system in Darwin and Alice Springs, and
- security system induction for new staff on commencement

### 3. Cleaning and Routine Maintenance

All offices must be cleaned by external cleaners not less than once a week.

Carpet and chairs with soft coverings should be professionally cleaned annually.

*Darwin:* Service under sink pump in Conference Room annually.

A routine inspection of both the Darwin and Alice Springs offices must be conducted six-monthly using the General Workplace Inspection Checklist (**Attachment 7**). The inspection is to be conducted by a staff member with the report to be sent to the Finance and Admin Officer and the Finance and Administration Manager who will assess for any rectifications.

#### **Air-conditioners**

##### ***Darwin***

Must be cleaned quarterly – contract in place with RACE. Reports to be kept on file.

##### ***Alice Springs***

Cleaning is the responsibility of the landlord.

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## Section E: Asset and Record Management

### E. Asset and Record Management

#### 1. Asset Management

It is the responsibility of all employees to ensure that the building and surrounds are kept in a neat and tidy condition. As tenants, HLNT must maintain standards of safety and presentation to all visitors and to ensure that the landlords are informed of any issues effecting the building and surrounds.

An appropriate level of insurance for all physical assets of the Association is undertaken and updated annually under the control of the CEO.

Repairs and Maintenance of general equipment is the responsibility of the Finance and Administration Manager/CEO in consultation with the landlords.

#### 2. Records Management

HLNT records are stored in the following locations:

**Financial Records** are maintained and considered current on an annual basis. At the end of each year a new set of records is created and the previous periods records kept in an easily accessible place. All current financial year records are to be kept in the finance area and only archived by finance personnel. Once the previous financial year has been closed financial records are to be archived into the storeroom. All archive boxes are to be marked on the outside with the contents and stored in a fashion that allows all contents to be read whilst in storage. ALL financial records are to be kept for a period of seven (7) years. After seven years financial records should be destroyed by confidential destruction through an appointed security firm. All financial records are stored in Darwin.

**Member Records** are maintained and considered current on an annual basis. At the end of each year a new set of records is created and the previous periods records archived and stored in the storeroom. All archive boxes are to be marked on the outside with the contents and stored in a fashion that allows all contents to be read whilst in storage. ALL member records are to be kept for a period of three (3) years. After three years member records should be destroyed by confidential destruction through an appointed security firm. All member records are stored in Darwin.

**Client Records** are maintained and considered current or active if a client has made a formal consultation in the previous three to five (3-5) years. Client files are located in Darwin and Alice Springs. 'Active' client files are to be secured and managed in accordance with HLNT's confidentiality and privacy policy. Client file currency is to be reviewed annually, with 'non-active' client files transferred to the compactors or other secure on-site location. Files of deceased clients should be archived in the storeroom or other secure location in a clearly marked box. No destruction of client files is allowed, except when they have been scanned and saved electronically. Any destruction of hard-copy client files must be undertaken by confidential destruction through an appointed security firm.

**NDSS Records** File management and security is to be undertaken in accordance with NDSS procedures.

**Personnel Records** It is the responsibility of CEO to ensure that all personnel files are kept in a secure place. Personnel files should not be accessible to any person without the knowledge of the CEO or Finance and Administration Manager. Any matter affecting a staff member should be placed on the personnel files as a permanent record. All pay, leave and superannuation details are maintained by the Finance and Administration Manager.

**Computer Records** The back up of all computer information is the responsibility of the Customer Service Officer in both Darwin and Alice Springs. All data is backed up on a daily basis and should be monitored closely. Any backup tapes used on a particular day should be stored in the safe.

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## Section E: Asset and Record Management

### 3. IT Access and Files

All staff are provided with access to computers systems, software and internet access to enable them to fulfil their positions in accordance with HLNT's ICT Policy. HLNT operates in a Citrix environment through thin clients which can access two desktops: Darwin and Alice Springs.

All staff have access to:

- A personal drive (M drive) (for use for individual work)
- A shared drive (O drive Darwin and O drive Alice Springs) (for use for documents or information that is shared information between two or more users)
- Internet
- Individual Email
- A Document Library located on the website portal
- resource PCs
- Various database applications

Management have remote access and access to additional drives. Staff undertaking remote / external service delivery have remote access.

Staff must ensure that all work is saved directly to their M drive or O drive (or other special drive). Work that is saved to personal desktops, remote devices or resource PCs are not backed up and are therefore vulnerable to loss in the event of disc failure and loss of version control.

Work-related emails are official records and must not be deleted or archived under any circumstances.

Refer also to HLNT's ICT Policy and Cybersecurity Policy.

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## Section F: Emergency Procedures

### F. Emergency Procedures

All employees and volunteers must be adequately instructed in appropriate emergency procedures relevant to their workplace to ensure their safety. HLNT will conduct regular fire and emergency evacuation refreshers on a six monthly basis and induction on the commencement of new staff or volunteers.

#### 1. Cyclone Action Plan – Darwin <https://secure.nt.gov.au/>

**CYCLONE WATCH** – A cyclone or potential cyclone exists and there are strong indications that winds above gale force will affect region within 24 to 48 hours of issue

**CYCLONE WARNING** – As soon as gales or stronger winds are expected to affect region within 24 hours.

#### CYCLONE INTENSITY-

##### **CATEGORY 1** (*tropical cyclone*)

Negligible house damage. Damage to some crops, trees and caravans. Craft may drag moorings. A Category 1 cyclone's strongest winds are GALES with typical gusts over open flat land of 90 - 125 km/h.

##### **CATEGORY 2** (*tropical cyclone*)

Minor house damage. Significant damage to signs, trees and caravans. Heavy damage to some crops. Risk of power failure. Small craft may break moorings. A Category 2 cyclone's strongest winds are DESTRUCTIVE winds with typical gusts over open flat land of 125 - 164 km/h.

##### **CATEGORY 3** (*severe tropical cyclone*)

Some roof and structural damage. Some caravans destroyed. Power failures likely. A Category 3 cyclone's strongest winds are VERY DESTRUCTIVE winds with typical gusts over open flat land of 165 - 224 km/h.

##### **CATEGORY 4** (*severe tropical cyclone*)

Significant roofing loss and structural damage. Many caravans destroyed and blown away. Dangerous airborne debris. Widespread power failures. A Category 4 cyclone's strongest winds are VERY DESTRUCTIVE winds with typical gusts over open flat land of 225 - 279 km/h.

##### **CATEGORY 5** (*severe tropical cyclone*)

Extremely dangerous with widespread destruction. A Category 5 cyclone's strongest winds are VERY DESTRUCTIVE winds with typical gusts over open flat land of more than 280 km/h.

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## Section F: Emergency Procedures - Cyclones

Bureau of Meteorology Announcements	HLNT Action	By
<p><b>CYCLONE WATCH</b> – A cyclone or potential cyclone exists and there are strong indications that winds above gale force will affect region within 24 to 48 hours of issue</p>	<p>Upon the issue of a cyclone <b>watch</b>, HLNT will:</p> <ul style="list-style-type: none"> <li>• Ensure appropriate emergency information is available to people with diabetes and people with a cardiac condition via the website and social media.</li> <li>• Ensure: <ul style="list-style-type: none"> <li>➢ a torch and relevant torch batteries are available</li> <li>➢ Sturdy plastic sheeting to cover server rack is available.</li> </ul> </li> <li>• Organise to have staff contacts and staff who may be available over a weekend period if necessary</li> <li>• Organise that contact can be made with all staff in case of the need to return to work or any other unforeseeable emergency needs. Copy of contact list to be kept in safe.</li> <li>• Management Team to assess and make judgement on degree of office preparations in light of Public Holidays/ Christmas Break/ Easter Break and weekends, taking into account the predicted severity and imminence of the threat.</li> </ul>	<p>Manager Education Services (MES) / CNE / DNE</p> <p>Admin Officer / all Staff</p> <p>CEO/Finance and Administration Manager (FAM) / MES</p>
<p><b>CYCLONE WARNING – PREPARATION</b></p> <p>As soon as gales or stronger winds are expected to affect region within 24 hours.</p>	<p>Upon issue of a cyclone <b>warning</b>, HLNT will appoint a Safety Warden and a Deputy who will supervise the following tasks:</p> <ul style="list-style-type: none"> <li>• Assess individual staff situations in determining staff manning levels. (eg. Residential location and dependants)</li> <li>• Before closure– reschedule or cancel all appointments for the following morning, or period as determined by the Management Team and then;</li> <li>• Alice Springs to print off the subsequent <i>coming days</i> diary pages for both Alice Springs and Darwin locations. Darwin to screen shot Darwin diary and send to designated mobile.</li> <li>• Continue product supply operations manually with possibly reduced staff.</li> <li>• Relocate high value stock of HBGMs / Flipcharts and other non-NDSS higher value stock from storeroom into roll down cabinets in front office.</li> <li>• Lock important archives in compactus, with priority given to client files – all keys to be put into safe with contact list. Secure all funds in safe with related paperwork. Ensure safe code is known to Management Team</li> <li>• Ensure the last two successful backup tape sets are stored in sealed waterproof container, labelled with permanent marker and secured in Safe.</li> </ul>	<p>CEO / FAM / MES</p> <p>All</p>

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## Section F: Emergency Procedures - Cyclones

<p><b>CYCLONE WARNING – SHUTDOWN</b></p> <p>As soon as gales or stronger winds are expected to affect region within 24 hours.</p>	<p>Safety warden and/or Deputy determine status of shutdown procedure, taking into account the predicted severity and imminence of the threat.</p> <ul style="list-style-type: none"> <li>• ADVISE Alice Springs that all communications by FAX and Telephone are being transferred to them, noting that server access will be interrupted.</li> <li>• Disconnect and transfer FAX line to Alice Springs Office before leaving building. To transfer line – Lift handset wait for dialtone - <b>*21 number to transfer to 08-89527000#</b> hang up handset.</li> <li>• Upload Closure Notice on the website.</li> <li>• Transfer main TELEPHONE line to Alice Springs Office before shutting down server. Alice Springs will advise clients of alternative supply agents and deal with bookings manually. To transfer line – Lift handset – select line 1 -wait for dialtone - <b>*21 number to transfer to 08-89528000#</b> hang up handset.</li> <li>• *** See <b>Server Shutdown Sequence</b> in front of Safe Top Drawer *** (also attached)</li> <li>• IT system shut down and servers covered with plastic sheets and/or garbage bags and tape.</li> <li>• DO NOT TURN OFF POWER AT SWITCHBOARD so Chubb Security remains active. Emergency Services will turn power off in suburbs as required.</li> </ul> <p>At this stage, personal safety takes priority over all tasks, and HLNT closes down operations and sends all staff home.</p>	<p>CEO / FAM / MES</p> <p>All</p>
<p><b>ALL CLEAR</b> (when safe to leave shelter and roads opened)</p>	<ul style="list-style-type: none"> <li>• Safety Warden and/or Deputy to contact staff advising of return to work timetable subject to individual staff situations, subject to operational telco infrastructure.</li> <li>• Assess level of damage as soon as practical</li> <li>• Restore servers.*** See <b>Server Restoration Sequence</b> in front of Safe Top Drawer ***(also attached)</li> <li>• Wait for servers to restore and NEC phone system to come back up. Transfer fax and phones back from Alice Springs office – FAX lift handset *22#. Telephones select line 1 *22#. Check all working by getting Alice Springs to ring in and send test fax.</li> <li>• Remove Closure Message from Website.</li> <li>• Commence normal operations as soon as practical</li> </ul>	<p>CEO/All</p>

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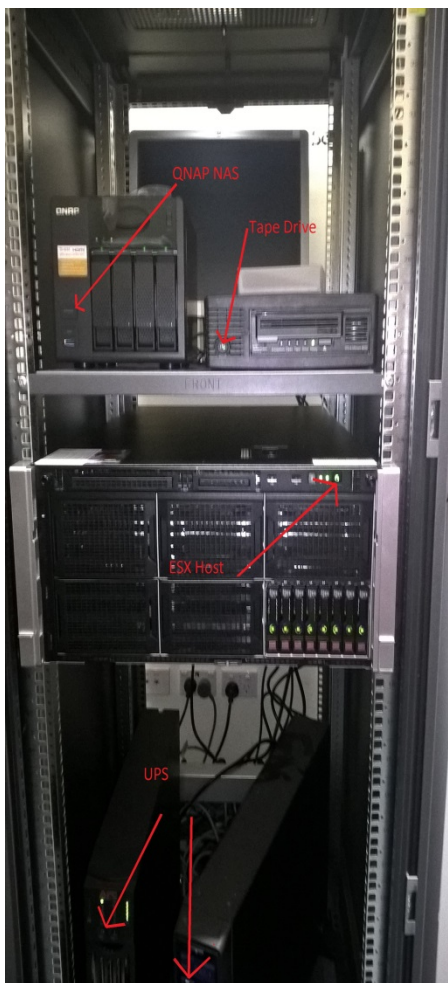
# Section F: Emergency Procedures - Cyclone

## CYCLONE SERVER SHUTDOWN PROCEDURE

1. Ring Area 9 and request shutdown of server due to imminent cyclone risk  
  
Area9 will perform the following:
  - a. Power off all virtual machines with HLNT-DRW-DC1 last
  - b. Power off the QNAP NAS HLNT-DRW-NAS01
  - c. Power off the ESX host HLNT-DRW-VS1
  - d. Power off the APC UPS
2. Disconnect both APC UPS's power from wall
3. Disconnect any other devices that still have power
4. Cover server and rack with Plastic

## CYCLONE SERVER RESTORATION PROCEDURE

1. Ring Area 9 and advise going to bring servers back up
2. Remove all plastic from Server and Rack
3. Connect UPS to back wall power point
4. Connect any devices disconnected in Step 3 above
5. Turn on both APC UPS's
6. Turn on the ESX Host HLNT-DRW-VS1 and tape drive if not already on
7. Power on the QNAP NAS
8. Wait for all to come back up – about 20 minutes
9. Confirm staff can login and the Internet is working



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## Section F: Emergency Procedures – Power Outage

### 2. Major Power Outage Plan

Power Outage Level	HLNT Action	By
<b>All Outages</b>	HLNT staff in <b>Alice Springs or Darwin</b> will: <ol style="list-style-type: none"> <li>1. Make contact made with Power Water to determine length of outage.</li> <li>2. Advise Alice Springs/Darwin of outage and lack of computers.</li> <li>3. Affix Pre-prepared sign to front door advising of power outage.</li> <li>4. Open front doors to allow airflow throughout the premises.</li> <li>5. Utilise Conference Room in Darwin for consults currently in session.</li> </ol>	CSO
<b>Power off for more than 1 day</b>	HLNT will appoint a staff member who will supervise the following tasks: <ul style="list-style-type: none"> <li>• <b>Darwin</b> - In the event that Power and Water advise that the power outage will be longer than 2 days, Darwin computer servers etc will be relocated to Area 9 in Winnellie who estimate that they can have them up and running within 24 hours (including email). Access for Alice Springs to the databases may take up to 48 hours. FAM will oversee this transfer of servers etc to Area 9.</li> <li>• <b>Darwin</b> - Staff with remote citrix access to the server will continue working from their homes as access is available, and keep in contact with other staff.</li> <li>• <b>Darwin &amp; Alice Springs</b> Before close down – reschedule or cancel all appointments by mobile, for the following days and then;</li> <li>• <b>Darwin</b> - Advise funders of possible closure of operations.</li> <li>• <b>Darwin &amp; Alice Springs</b> -                             <ul style="list-style-type: none"> <li>• Transfer fax and phone to Alice Springs/Darwin office, who will advise clients of alternative supply agents and deal with bookings.</li> <li>• Lift handset *21 transfer to 89278488# for telephone. Fax lift handset *21 transfer to 89278515# for transfer to Darwin</li> <li>• Lift handset *21 transfer to 89528000# for telephone. Fax lift handset *21 transfer to 89527000# for transfer to Alice Springs</li> </ul> </li> </ul>	CEO / FAM / MES / ISO  All

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## Section F: Emergency Procedures – Power Outage

	<ul style="list-style-type: none"> <li>Staff will be sent home to do whatever work they reasonably can from home. The office will cease operations.</li> </ul>	
	HLNT Closed	All
<b>ALL CLEAR and full power restored</b>	Assess level of damage as soon as practical. Transfer phones/fax back *22# Commence normal operations as soon as practical	CEO/ISO/All

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## Section F: Emergency Procedures – Flood Action Plan

### 3. Flood Action Plan – Alice Springs

Todd River flows and floods are defined in five categories – Level A, B, C, D, & E.

**Flow Level A** – may cause closure of river bed level causeways, except Stephens Road

**Flow Level B** – will close river bed causeways and may overflow causeway on Stephens Road

**Minor Flood Level C** – all causeways are closed, and minor flooding can occur along South Terrace and nearby roads

**Moderate Flood Level D** – has the potential to cause disruptions and flooding is expected in lower reaches of town

**Major Flood Level E** – In addition to Level D, the river level will cause significant flooding in urban areas and the river may overtop the Wills Terrace footbridge adjacent to the CBD

HLNT's Alice Springs office is out of reach of Major Flood Level E. Notwithstanding this, depending on each staff member's home location, some or all staff may need to leave the office and return to their homes even when there are predicted lower levels of flooding. Staff are to monitor SEWS Warnings and follow advice of Emergency Services.

In the event that it is **not feasible to staff the office**, staff are to consult with the CEO, FAM or MES and:

- Commence shutdown procedure, taking into account the predicted severity and imminence of the threat.
- Ensure mobile contact numbers are shared
- Reschedule or cancel all appointments for the following morning or period as determined in consultation with the Management Team and then advise Darwin who will be responsible for further rescheduling
- Arrange for Darwin to put a Closure Notice on the website.
- Undertake normal office closure procedures and place a sign on the front door of the office
- Transfer fax and phone to Darwin office, Lift handset \*21 transfer to 89278488# for telephone. Fax lift handset \*21 transfer to 89278515#
- HLNT closes down operations and sends all staff home.

When SEWS signals, **All Clear and roads open**:

- staff are to return to work, taking into consideration individual's situation.
- Assess any damage as soon as practical
- Transfer fax and phone from Darwin office, Lift handset \*22# for telephone. Fax lift handset \*22# Check all working by getting Darwin to ring in and send test fax.
- Advise Darwin of situation and status of operational restart, and to remove closure notice on website.
- Commence normal operations as soon as practical.

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# Incident Form

To be completed within 24 hours of an incident, near miss or hazard being identified

## Details of person(s) injured, experiencing near miss or identifying a hazard (or witness)

<b>Affected Person</b>	HLNT Staff Member	<input type="checkbox"/>	Contractor (*)	<input type="checkbox"/>	Volunteer (*)	<input type="checkbox"/>	Client/Visitor (*)	<input type="checkbox"/>
	Surname:			Other Name/s:			Sex:	M <input type="checkbox"/> F <input type="checkbox"/>
	Address:				Phone:	B/H:		Mob:
	If <u>Contractor</u> , occupation:				If <u>Contractor</u> , name of employer:			
	If <u>Client</u> , Client ID Number:				If <u>Client</u> , name of Database:			
	<u>Date and Time</u> of Hazard/ Incident /Near Miss				<u>Location</u> of Hazard/ Incident/Near Miss:			

(\*) HLNT staff to provide assistance to, or record incident for, contractors, volunteers and clients/visitors.

Name of Primary HLNT Staff Member assisting:

Form to be completed **by OR** for person injured, experiencing near miss or identifying a hazard (or witness). Leave blank if same as above.

<b>Reporting Person</b>	Surname:			Other Name/s:				
	Address:				Phone:	B/H:		Mobile:
	Employer: (if not HLNT)							
	Occupation							

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## Description of hazard or incident (attach further information where necessary)

Reporting Person	
------------------	--

Reporting Person	Name(s) of Witness(es):				Phone		
	Was First Aid from a <u>non-health professional</u> Required?:	Yes <input type="checkbox"/>	No <input type="checkbox"/>	If yes, name of First Aider?:			
	Was treatment from an <u>HLNT health professional</u> required?:	Yes <input type="checkbox"/>	No <input type="checkbox"/>	If yes, name of health professional?:			
	Was an ambulance required?:	Yes <input type="checkbox"/>	No <input type="checkbox"/>				
	Was person recommended to seek GP consultation?	Yes <input type="checkbox"/>	No <input type="checkbox"/>				
	Was Manager/management advised?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	If yes, time and date:			
	Were any consumables used (eg hypo kit, O2)?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	If yes, what and has replacement been completed?			Yes <input type="checkbox"/>

FOR STATUTORY PURPOSES PLEASE ENSURE THIS FORM IS FULLY COMPLETED AND SIGNED

Signature:		Name and Position:		Date:	
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(\*\*) to be signed by HLNT employee, contractor, volunteer or visitor. If HLNT employee completed form for contractor, volunteer or client/visitor, the employee is to sign

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HLNT health professional report (where applicable): *(Insert report below or attach report)*

Health Professional Report

Health Professional signature:		Name and Position:		Date:	
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Please forward this form to your management for completion

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**To be completed by management**

**Cause/Contributing Factors**

If in your opinion any of the factors listed below were the main cause of this incident or hazard. *(Insert report below or attach report)*

<b>Management Report</b>	
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**ACTION TO PREVENT RECURRENCE**

What action in your opinion will prevent recurrence of this kind of accident? *(Insert report below or attach report)*

<b>Management Report</b>	
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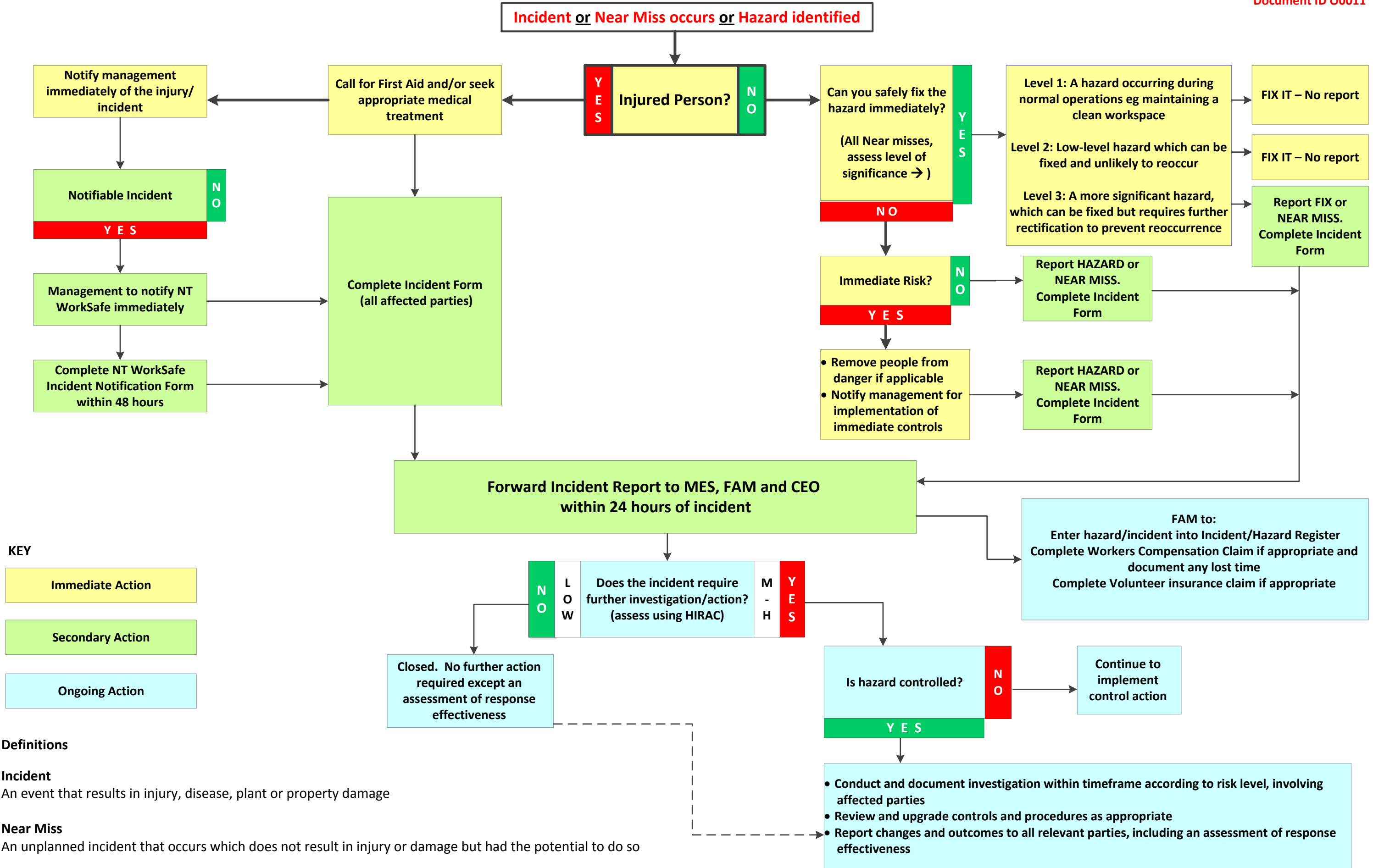
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<b>Management Report</b>	<b>Is this a notifiable accident?:</b>	Yes <input type="checkbox"/>	No <input type="checkbox"/>		
	<b>NT Work Safe notified?:</b>	Yes <input type="checkbox"/>	No <input type="checkbox"/>	<b>Date:</b>	<b>By Whom:</b>
	<b>Preventative action taken:</b>	Yes <input type="checkbox"/>	No <input type="checkbox"/>	<b>Specify:</b>	
	<b>Assessment of workplace practices by management:</b>	Yes <input type="checkbox"/>	No <input type="checkbox"/>	<b>Specify:</b>	
<b>Manager's comments:</b>					

<b>Manager's Signature:</b>		<b>Name:</b>		<b>Date:</b>	
<b>CEO's Signature</b>		<b>Name:</b>		<b>Date:</b>	

**DATE ENTERED IN INCIDENT REGISTER:**

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**KEY**

- Immediate Action
- Secondary Action
- Ongoing Action

**Definitions**

**Incident**  
An event that results in injury, disease, plant or property damage

**Near Miss**  
An unplanned incident that occurs which does not result in injury or damage but had the potential to do so

**Hazard**  
Anything that has the potential to cause injury or illness (to employees, contractors, volunteers or visitors) or damage to plant or property. A hazard can be related to a physical state or a work practice or procedure.

# HLNT – Home Visit Risk Assessment Tool

## HEALTH PROFESSIONAL STAFF ONLY TO FILL OUT

If requested by client, family member, or health professional to undertake a home visit please ensure the risk assessment tool is completed with the information provided by the client, clients family, or support person. This form covers only one visit, if requiring further visits, will need new form filled.

Prior to organising a home visit please read the following to ensure the home visit is appropriate.

1. Is client known to Healthy Living NT, or are we able to get substantial information provided by the referrer (GP, Community Nurse, RDH etc)?
2. Is the referral and the need for a home visit appropriate with no other option for a clinic consult?
3. Home visits are only available to those residing in the Darwin/Palmerston and Alice Springs area.

### Health Professional Assessment

Should the visit proceed? YES/NO If no, why not?

.....  
 .....  
 .....

Time/date booked for home visit.....

Are there any issues the attending staff members should be made aware of prior to the visit?

.....  
 .....

### RELEVANT NOTES/INSTRUCTION

.....  
 .....  
 .....  
 .....

**PLEASE ENSURE CLIENTS DETAILS ENTERED INTO HEALTH PROFESSIONAL AND CLINIC DIARIES**

<i>Status</i>	<i>Approved</i>	<b>Home Visit Risk Assessment Tool</b>	<i>Document number</i>	<i>00017</i>
<i>Consultation</i>	<i>All Staff</i>		<i>Date of Last Issue</i>	<i>08/12/2018</i>
<i>Approval By</i>	<i>CEO</i>		<i>Current Version Number</i>	<i>2.0</i>
<i>Circulation (on approval)</i>	<i>All Staff and Volunteers</i>		<i>Review Cycle</i>	<i>Annual</i>
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**CLIENTS DETAILS:**

**NAME**.....**DATE OF BIRTH**...../...../.....

**RESIDENTIAL ADDRESS**.....

**HOME PHONE**.....**MOBILE PHONE**.....

**SECOND CONTACT PERSON**

**NAME**.....

**HOME PHONE**.....**MOBILE PHONE**.....

**Name and relationship of person answering questions below**.....

**Phone:**.....

To ensure the safety of our staff, and following the guidelines of Healthy Living NT occupational health and safety, we require the following to be filled out in completion prior to any home visit.

- Do you agree for our staff (X2) to visit your home? YES/NO

**INTERPRETER/CULTURAL**

- Is an interpreter required YES/NO, if YES professional or family?
  - If professional, who will organize.....
  - Booked by.....for date/time.....booking no.....
- Are there any cultural practices we need to be aware of? Ie; shoes removed before entering premises YES/NO If yes, what are they? Please note shoes must be worn at all times.....

**OTHER PEOPLE**

- Besides yourself, who else resides at this address and may be present during the consult?.....
- Will anyone who is not residing at your address be attending the consult or be present at the property during the time of consult?.....

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<i>Consultation</i>	<i>All Staff</i>		<i>Date of Last Issue</i>	08/12/2018
<i>Approval By</i>	<i>CEO</i>		<i>Current Version Number</i>	2.0
<i>Circulation (on approval)</i>	<i>All Staff and Volunteers</i>		<i>Review Cycle</i>	<i>Annual</i>
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**ACCESS TO YOUR PROPERTY**

- Is your home easy to find? Ie: number on gate, any identifiable land marks.....  
.....
- Can we park outside your home? YES/NO if no, where can we park?  
.....
- Are there any trip/ injury hazards we need to be aware of? Y/N ie: broken paths, steps, locks/ latches. If yes, what is the hazard?.....
- Which is the easiest entry for us to use ie: front, back or side door?.....  
.....

**ANY RISKS TO ENTERING YOUR PROPERTY**

- Are there any animals near the entrance to your home or in your home? Y/N If yes, what kind of animal.....  
**Please ensure these animals are secured if requested/required during our visit**
- Are there any weapons at your home? Ie: knives, guns, swords etc Y/N If yes, what  
.....  
**Please ensure these are secured during our visit**
- Will there be any maintenance, renovation work or any other safety issues which may affect us visiting your property? YES/NO. If yes.....  
.....  
.....

**SMOKING**

- Do you or anyone else who may be present at the time of the home visit smoke? YES/NO. If yes, we request that you refrain from smoking during our visit.

Health Professional Name \_\_\_\_\_ Signature \_\_\_\_\_

Date \_\_\_\_\_

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<i>Approval By</i>	<i>CEO</i>		<i>Current Version Number</i>	<i>2.0</i>
<i>Circulation (on approval)</i>	<i>All Staff and Volunteers</i>		<i>Review Cycle</i>	<i>Annual</i>
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## Remote Travel Checklist

Staff Member(s) Travelling			
Date(s) of Travel			
To (Community):		Estimated Arrival Time/Date	
Returning to:		Estimated Arrival Time/Date	

Remote Travel Checklist	Air Travel	Road Travel	Assessment	Action
<b>Pre-Travel</b>			Delete non-applicable answer	
Travel is accompanied (with another HLNT team member, part of multi-disciplinary team or accompanying pilot).	✓	✓	Yes / No	If no, specific approval of HLNT MES must be obtained
Conduct pre-trip risk assessment before any travel within one week of travel. (Where there is any level of heightened risk eg road/weather conditions or community unrest, the specific approval of the Manager Education Services is required)	✓	✓	Normal / Elevated risk	If elevated, specific approval of HLNT MES must be obtained
Contact with the health centre(s) within one week of travel to obtain advice and direction regarding confirmation/suitability of visit.	✓	✓	Yes / No	If no, or advised no by clinic, trip should not proceed
Itinerary including accommodation has been provided to MES and FAM	✓	✓	Yes / No	If no, trip should not proceed
Staff have the Emergency Contact Numbers for MOICD and the personal mobile phone numbers of the CEO, MES and FAM	✓	✓	Yes / No	If no, GET them
Remote Travel Kit (including Inreach SPOT device and charger) available and contents checked.	✓	✓	Yes / No	If no, CHECK it and GET any replacements/recharge
HLNT or personal phone available, charged and credit checked	✓	✓	Yes / No	If no, CHECK it and recharge
Adequate supplies of water are available	NA	✓	Yes / No	If no, GET them
4WD course completed	NA	✓	Yes / No / NA	If no, contact FAO for booking on next available course
The following factors should be considered before driving: <ul style="list-style-type: none"> <li>Road conditions and likelihood of significant rain making road impassable ;</li> <li>Distance to be travelled (rest breaks)</li> <li>Appropriate vehicle</li> <li>Fuel needs (identify fuel stops)</li> <li>Weather (visibility, driving at dawn or dusk) and risk of collision with animals etc. Refer to Motor Vehicle Policy</li> </ul>	NA	✓	Yes / No	If no, DO IT

Signed \_\_\_\_\_ / \_\_\_\_ / \_\_\_\_

Primary Staff Member

Approval of MES (where required)

Signed \_\_\_\_\_ / \_\_\_\_ / \_\_\_\_

Status	Approved	<b>Remote Travel Checklist</b>	Document number	00016
Consultation	All Staff		Date of Last Issue	08/12/2018
Approval By	CEO		Current Version Number	4.0
Circulation (on approval)	All Staff and Volunteers		Review Cycle	Annual
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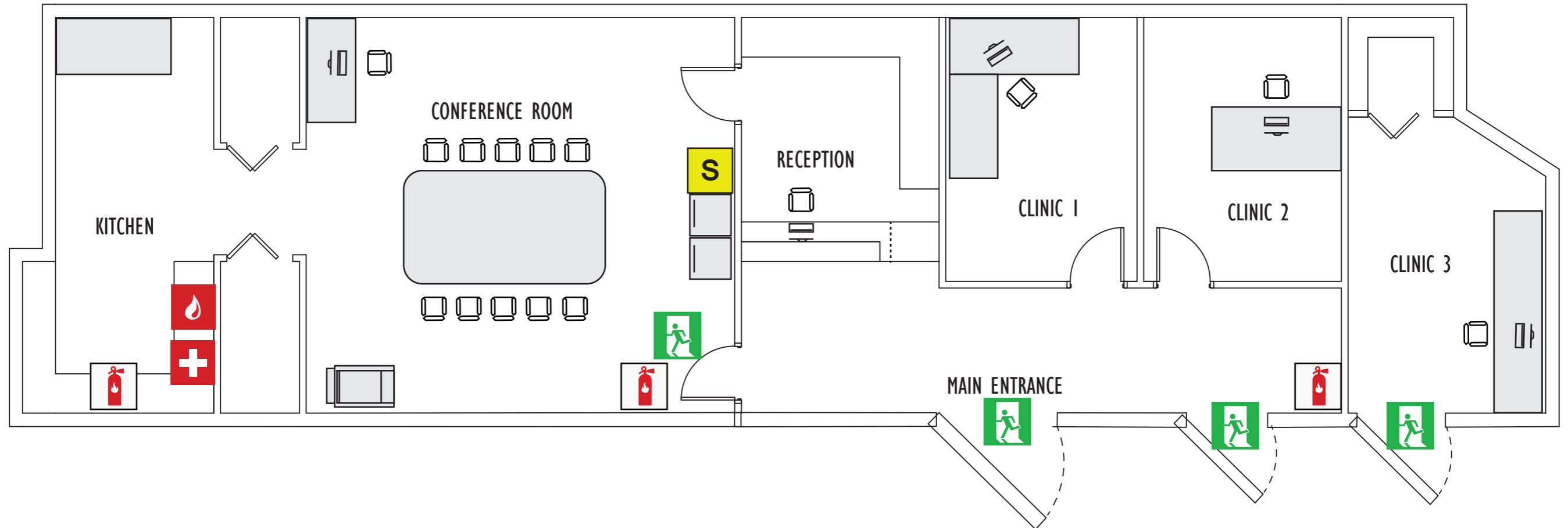


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# SAFETY POINTS

ALICE SPRINGS OFFICE



 **MUSTER POINT  
AT GRASS AREA  
ON PARSON** 

**LEGEND**

 EXIT POINT	 HYPO KIT
 FIRST AID	 SYRINGE CLEAN UP KIT
 FIRE EXTINGUISHER	

Darwin Office



# SAFETY POINTS



## LEGEND

-  EXIT POINT
-  FIRST AID
-  FIRE EXTINGUISHER
-  HYPO KIT
-  SHARPS CLEAN-UP KIT
-  CARDIAC EMERGENCY EQUIPMENT



# General Workplace Standards Checklist

The maintenance and good house-keeping of HLNT offices is of prime importance in ensuring a

professional approach to our work and clients, the functionality of office equipment and in reducing potential hazards in the workplace. All staff have a duty to ensure our facilities are well maintained, to identify and report hazards (and fix them where appropriate).

Where a potential hazard or maintenance need is noticed, it is the staff member's responsibility to report deficiencies or undertake immediate rectification (where possible). Below is a general checklist that staff can use as a guide to the standards of office house-keeping and maintenance we expect to be maintained. Any deficient or hazardous items noticed by staff should be reported to the Finance and Administration Manager and FAO.

Site name and/or address:			
No.	Standard	✓/✗/NA	Comments
<b>1</b>	<b>General facilities</b>		
1.1	Is the temperature and airflow in the area adequate?		
1.2	Are there any sources of excessive noise?		
<b>2</b>	<b>Housekeeping</b>		
2.1	Is the area tidy and well kept?		
2.2	Are items safely stored so they are not at risk of falling off or causing injury?		
2.3	Is the floor free of trip or slip hazards?		
2.4	Is furniture in good repair?		
<b>3</b>	<b>Floors, Aisles, Stairs and Landings</b>		
3.1	Do floors have even surfaces (no cracks or holes)?		
3.2	Are stairs in good condition (no worn or broken treads)?		
3.3	Are handrails in good condition?		
3.4	Are non-skid strips in good condition?		
3.5	Are landings clear of obstructions?		

<i>Status</i>	<i>Approved</i>	<b>General Workplace Inspection Checklist</b>	<i>Document ID</i>	<i>00015</i>
<i>Consultation</i>	<i>All Staff</i>		<i>Date of Last Issue</i>	<i>08/12/2018</i>
<i>Approval By</i>	<i>CEO</i>		<i>Current Version Number</i>	<i>3.0</i>
<i>Circulation (on approval)</i>	<i>All Staff and Volunteers</i>		<i>Review Cycle</i>	<i>Annual</i>
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No.	Standard	Attachment 7	✓/✗/NA	Comments
<b>4</b>	<b>Emergency Procedures</b>			
4.1	Are emergency numbers and procedures clearly displayed?			
4.2	Are appropriate fire extinguishers visible and easy to access?			
4.3	Have fire extinguishers been inspected/tagged within the last 6 months?			
4.4	Are fire extinguishers free from obstruction?			
4.5	Are emergency exit stairs adequately lit?			
4.6	Are exit signs in place and illuminated?			
4.7	Are exit doors marked and clearly visible?			
4.8	Can exit doors be opened from inside?			
4.9	Are exit corridors clear of obstructions (including outside of the building)?			
<b>5</b>	<b>First Aid</b>			
5.1	Are cabinets and contents clean, orderly and properly stocked?			
5.2	Are First Aid kits accessible and the first aid officers identified?			
5.3	Do you know the location of the first aid kits?			
<b>6</b>	<b>Electrical</b>			
6.1	Are all power outlets and switches in good condition (not broken) and tagged out if faulty?			
6.2	Are extension leads / power boards used as designed?			
6.3	Are electrical items free from damage and unlikely to be exposed to water?			
6.4	Are leads/cords kept clear of walkways and tucked away tidily under desks?			

<i>Status</i>	<i>Approved</i>	<b>General Workplace Inspection Checklist</b>	<i>Document ID</i>	<i>O0015</i>
<i>Consultation</i>	<i>All Staff</i>		<i>Date of Last Issue</i>	<i>08/12/2018</i>
<i>Approval By</i>	<i>CEO</i>		<i>Current Version Number</i>	<i>3.0</i>
<i>Circulation (on approval)</i>	<i>All Staff and Volunteers</i>		<i>Review Cycle</i>	<i>Annual</i>
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No.	Question	✓/✗/NA	Corrective Actions
<b>7</b>	<b>Manual Handling</b>		
7.1	Are frequently used items within easy access between knee and shoulder?		
7.2	Are step ladders or stools used to access items stored on high shelves?		
7.3	Are trolleys available and used to transport items?		
<b>8</b>	<b>Lighting</b>		
8.1	Is there adequate lighting for the work being carried out?		
8.2	Is the area's lighting steady (no flickering light)?		
<b>9</b>	<b>Ergonomics</b>		
9.1	Are workstation chairs adjustable?		
9.2	Is space under the desk clear to allow legroom?		
9.3	Is there sufficient desk space?		
<b>10</b>	<b>Kitchen</b>		
10.1	Is fridge clean and operational?		
10.2	Is microwave position at suitable height, clean and operational?		
10.3	Is the area free from pests or evidence thereof?		

COMMENTS:

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<b>Name of person conducting inspection</b>	
<b>Date of inspection</b>	

<i>Status</i>	<i>Approved</i>	<b>General Workplace Inspection Checklist</b>	<i>Document ID</i>	<i>00015</i>
<i>Consultation</i>	<i>All Staff</i>		<i>Date of Last Issue</i>	<i>08/12/2018</i>
<i>Approval By</i>	<i>CEO</i>		<i>Current Version Number</i>	<i>3.0</i>
<i>Circulation (on approval)</i>	<i>All Staff and Volunteers</i>		<i>Review Cycle</i>	<i>Annual</i>
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