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HEALTH AND SAFETY MANUAL

Section	Safety, Health and Wellbeing		
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DEFINITIONS

Assura	The health and safety management software reporting tool used by the Institute
Contractor	A PCBU engaged by the Institute to do any work for gain or reward.
Duty holders under HSWA	A duty holder is a person who has a duty under HSWA. There are four types of duty holders – PCBUs, officers, workers and other persons at workplaces.
Employees	Employees for the purposes of this manual means NMIT employees, contracted tutors, student interns and volunteers
H&S	Health and Safety
Hazard	A situation, activity, behaviour that has the potential to cause death, injury, or illness to a person.
Health and Safety Committee (HSC)	A Health and Safety Committee (HSC) supports the ongoing improvement of health and safety at work. A committee enables PCBU representatives, employees and other committee members to meet regularly and work co-operatively to ensure employees' health and safety.
Health and Safety Representative (HSR)	An employee elected by the members of their work group to represent them in health and safety matters, in accordance with subpart 2 of Part 3 of HSWA.
Health and Safety at Work Act 2015 (HSWA)	New Zealand's key work health and safety legislation is the Health and Safety at Work Act 2015 (HSWA) and regulations made under that Act. All work and workplaces are covered by HSWA unless specifically excluded.
Health and Safety Event	Any of the following events that arise from work: <ul style="list-style-type: none"> a. Death, Injury or Illness b. Near Miss c. Pain or discomfort d. Property or Environmental damage
Health monitoring	Monitoring a person to identify any changes in his or her health status because of exposure to certain health hazards arising from the conduct of the business or undertaking
HSC	Health and Safety Committee
Injury	Includes physical or mental injury; gradual process injury or injury that was not diagnosed until sometime after the event or exposure
Manager	A Manager means: <ul style="list-style-type: none"> a. Director, b. Head of Department for Learning and Teaching Directorate, or c. Manager or Team Leader for Business Support Areas.
Near Miss	An unplanned or uncontrolled event that did not result in injury, illness or damage but had the potential to do
Notifiable event	A notifiable event is when any of the following occurs as a result of work:

	<ul style="list-style-type: none"> a. a death b. notifiable illness or injury c. a notifiable incident <p>Use the WorkSafe tool to find out when you need to notify WorkSafe.</p>
Notifiable illness or injury	<ul style="list-style-type: none"> a. Any of the following injuries or illnesses that require the person to have immediate treatment (other than first aid): <ul style="list-style-type: none"> (i) the amputation of any part of his or her body (ii) a serious head injury (iii) a serious eye injury (iv) a serious burn (v) the separation of his or her skin from an underlying tissue (such as degloving or scalping) (vi) a spinal injury (vii) the loss of a bodily function (viii) serious lacerations b. an injury or illness that requires, or would usually require, the person to be admitted to a hospital for immediate treatment: c. an injury or illness that requires, or would usually require, the person to have medical treatment within 48 hours of exposure to a substance: d. any serious infection (including occupational zoonoses) to which the carrying out of work is a significant contributing factor, including any infection that is attributable to carrying out work— <ul style="list-style-type: none"> (i) with micro-organisms; or (ii) that involves providing treatment or care to a person; or (iii) that involves contact with human blood or bodily substances; or (iv) that involves handling or contact with animals, animal hides, animal skins, animal wool or hair, animal carcasses, or animal waste products; or (v) that involves handling or contact with fish or marine mammals
Notifiable incident	A notifiable incident is an unplanned or uncontrolled incident in relation to a workplace that exposes the health and safety of workers or others to a serious risk arising from immediate or imminent exposure
Overlapping PCBU duties	When more than one PCBU have health and safety duties in relation to the same matter.
PCBU	<p>‘Person Conducting a Business or Undertaking’. In most cases a PCBU will be a business entity, such as a company. However, an individual carrying out business as a sole trader or self-employed person would also be a PCBU.</p> <p>The definition of a PCBU does not include workers or officers of a PCBU, volunteer associations with no employees, or home occupiers that employ or engage a tradesperson to carry out residential work.</p>
POD	People and Organisation Development
Primary Duty of Care	PCBU must ensure, so far as is reasonably practicable, the health and safety of its workers, and that other persons are not put at risk by the PCBU’s work.
QMS	Quality Management System

Reasonably practicable (section 22 of HSWA)	<p>In relation to a PCBU’s primary duty, the duty of PCBUs who manage or control a workplace, or who manage or control fixtures, fittings or plant at workplaces, and the upstream PCBU duty means that which is, or was, at a particular time, reasonably able to be done in relation to ensuring health and safety, taking into account and weighing up all relevant matters, including–</p> <ol style="list-style-type: none"> a. the likelihood of the hazard or the risk concerned occurring; and b. (b) the degree of harm that might result from the hazard or risk; and c. (c) what the person concerned knows, or ought reasonably to know, about– <ol style="list-style-type: none"> (i) the hazard or risk; and (ii) ways of eliminating or minimising the risk; and d. the availability and suitability of ways to eliminate or minimise the risk; and e. after assessing the extent of the risk and the available ways of eliminating or minimising the risk, the cost associated with available ways of eliminating or minimising the risk, including whether the cost is grossly disproportionate to the risk.
Risk	Risks arise from people being exposed to a hazard (a source of harm)
SHW	Safety, Health and Wellbeing
Safety, Health and Wellbeing Leadership Group (SHW Leadership Group)	A group set up to lead the change and development required for a ‘Just Culture’ and a ‘Zero Harm’ organization and provide guidance on key Safety, Health and Wellbeing issues to NMIT Council and the Chief Executive.
Subcontractor	A PCBU engaged by a Contractor to do any work for gain or reward.
Work Safe New Zealand (WorkSafe)	WorkSafe is the government agency that is the work health and safety regulator. WorkSafe collaborates with PCBUs, workers and other duty holders to embed and promote good work health and safety practices, and enforce health and safety law.
Worker	<p>A worker is an individual who carries out work in any capacity for a PCBU. A worker may be an employee, a contractor or sub-contractor, an employee of a contractor or sub-contractor, an employee of a labour hire company, an outworker (including a homeworker), an apprentice or a trainee, a person gaining work experience or on a work trial, or a volunteer worker. Workers can be at any level (eg managers are workers too).</p> <p>Workers have their own health and safety duty to take reasonable care to keep themselves and others healthy and safe when carrying out work.</p>

SECTION 1 – COMMITMENT TO SAFETY MANAGEMENT

1.1 PURPOSE

To outline how NMIT demonstrates an active, consultative commitment to all areas of health and safety management through the organisation, promotes a safety culture that involves both management and employee commitment; and to define responsibilities for the overall management of health and safety within the Institute.

NMIT's *Safety, Health and Wellbeing Policy* defines the overall commitment to health and safety. This will be complemented by this *Health and Safety Manual* (Sections 1 – 8) which sets out how NMIT will implement safety practices and culture into its day-to-day operations. These procedures apply to all aspects of the Institute's business areas.

1.2 SCOPE

This *Health and Safety Manual* encompasses employees, students, contractors and members of the public, on all NMIT campuses and employees and students carrying out recognised NMIT duties or activities, off campus.

This *Health and Safety Manual* will be accessible to all staff via NMIT intranet.

1.3 RESPONSIBILITY

The overall responsibility for Safety, Health and Wellbeing within the Institute will be held by the Chief Executive, who will also be responsible for policy monitoring and ensuring there is appropriate support and resources available for the implementation and management of health and safety within the Institute. Managers will be responsible for the health and safety of their area. Responsibility for reporting within the Institute will be undertaken by the Health and Safety Manager.

1.4 REVIEW OF SAFETY, HEALTH AND WELLBEING POLICY

The *Safety, Health and Wellbeing Policy* will be reviewed every two years as required by the *Quality Management System Procedure* document. The Health and Safety Manager will have the responsibility to initiate this process and will include consultation and review by the SHW Leadership Group, the HSC and other interested parties before being reviewed by the Quality Committee and approved by Directorate and the Chief Executive.

SECTION 2 – PLANNING, REVIEW AND EVALUATION

2.1 PROCEDURE FOR REVIEW OF HEALTH AND SAFETY MANUAL AND PROCESSES

PURPOSE

To ensure there is a systematic approach to ongoing effective planning, review and evaluation of the safety framework within the Institute, of the *Health and Safety Manual* and operational safety processes to facilitate continuous improvement.

PROCEDURE

This procedure is undertaken to review the suitability and effectiveness of this *Health and Safety Manual* and associated processes and to make any alterations necessary to ensure their continuing suitability and effectiveness to legislation, regulations and the Institute's operations.

Internal audits will be conducted regularly throughout the year to ensure that activities undertaken comply with stated procedures. A review of health and safety management processes should be done following a:

- critical event, e.g. notifiable event
- significant change in work procedure e.g. purchase of new machinery, change to business operations
- change in legislation

The process review should consider:

- main contributing factors and root cause to the injury or event, if applicable
- whether there is an adequate understanding of responsibilities following a critical event
- whether current policies and procedures are sufficient to minimise risk
- whether additional information or training is required

A full review of health and safety processes and procedures will be undertaken annually to ensure that all health and safety information relevant to NMIT has been identified and to ensure there is compliance to identified relevant legislation, regulations, current codes of practices and other health and safety standards. This includes a review of the *Health and Safety Manual* to ensure that it is still current and reflects the actual day-to-day implementation.

The Health and Safety Manager will prepare a written report outlining findings and recommendations from the annual health and safety management review. The report will be provided to the SHW Leadership Group and HSC may include information on:

- H&S policy review
- Legal compliance
- H&S Manual
- H&S objectives and targets
- Emergency procedures and evacuation drill feedback
- H&S event findings and trends
- Hazard risk assessment reviews
- H&S training
- Recommendations for initiatives in the upcoming year

The Health and Safety Manager, in consultation with SHW Leadership Group and HSC, will make any required changes to the *Health and Safety Manual* following any review of health and safety procedures. Approval for

these changes will be carried out as per QMS Procedure: *Development, Review and Issue of Policies and Procedures*.

RECORDS

- H&S Annual Management Review report
- Audit reports
- Meeting minutes of review of policy
- QMS records

2.2 PROCEDURE FOR SETTING AND REVIEW OF HEALTH AND SAFETY OBJECTIVES

PURPOSE

This procedure is undertaken to establish effective Health and Safety Objectives and Targets which reflect both the strategic direction of the Institute and the management of risk to ensure continuous improvement of health and safety within the Institute.

PROCEDURE

As part of the Institute's annual business planning process with Directorate, a number of objectives relating to health and safety will be established. These will be based on feedback and consultation by Council, SHW Leadership Group, Health and Safety Committee, Department and Business Support Areas, and any other interested parties.

The objectives will be action and prevention oriented and are intended to result in meaningful improvements to the Institute's health and safety performance. The objectives will follow the SMART rule of being Specific, Measurable, Achievable, Realistic or Relevant and Time-bound.

Overall responsibility for ensuring objectives are implemented and reviewed will be with the Health and Safety Manager. However, objectives can be assigned to other nominated internal or external resources.

The progress of the objectives will be reviewed by the Health and Safety Manager at least 3 monthly and progress reported to the SHW Leadership Group, and HSC.

At the end of the 12 months, a final review will be undertaken in conjunction with the health and safety annual management review which will confirm what has been achieved and any recommendations for objectives that need to be carried over and suggestions towards the development of the next year's objectives.

RECORDS

- Annual Objectives and Targets
- Objectives and Targets 3 monthly review of reports.

SECTION 3 – RISK MANAGEMENT

3.1 PROCEDURE TO MANAGE WORK RISKS

PURPOSE

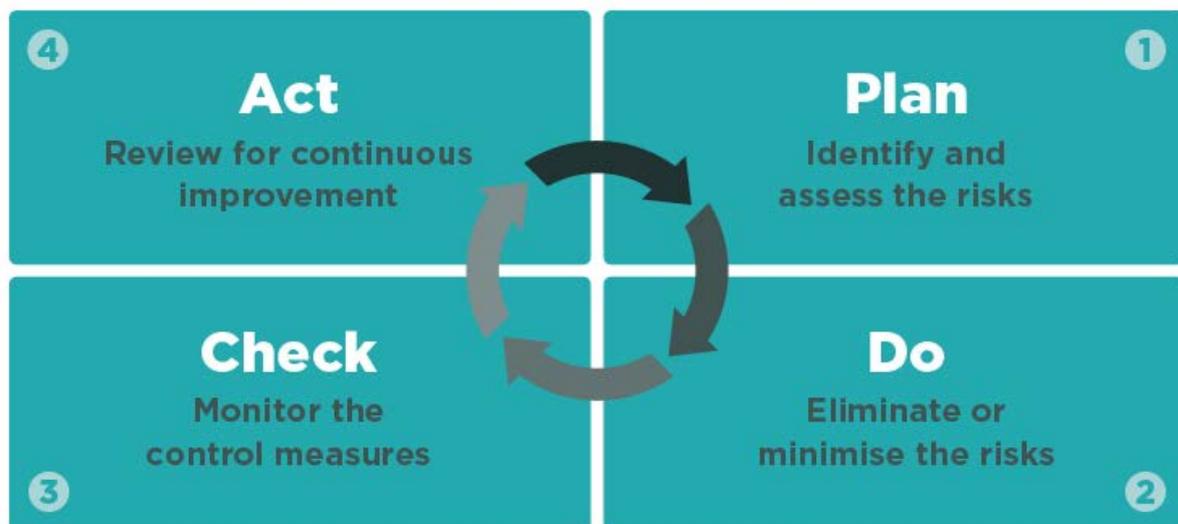
To ensure there is a systematic approach to identify and assess the work risks, manage the risks by eliminating or minimising them, monitor the control measures and review for continuous improvement.

A healthy and safe workplace starts with identifying and understanding what our work-related health and safety risks are; particularly those that have the potential to cause people serious injury or illness. It then involves doing what is reasonable, what is practical and what you are able to do to eliminate or, where they can't be eliminated, minimise those risks.

The focus should be on managing the most significant risks before managing less serious risks. Your work activities should be reviewed on an ongoing basis to identify any new risks that need to be managed.

OVERVIEW

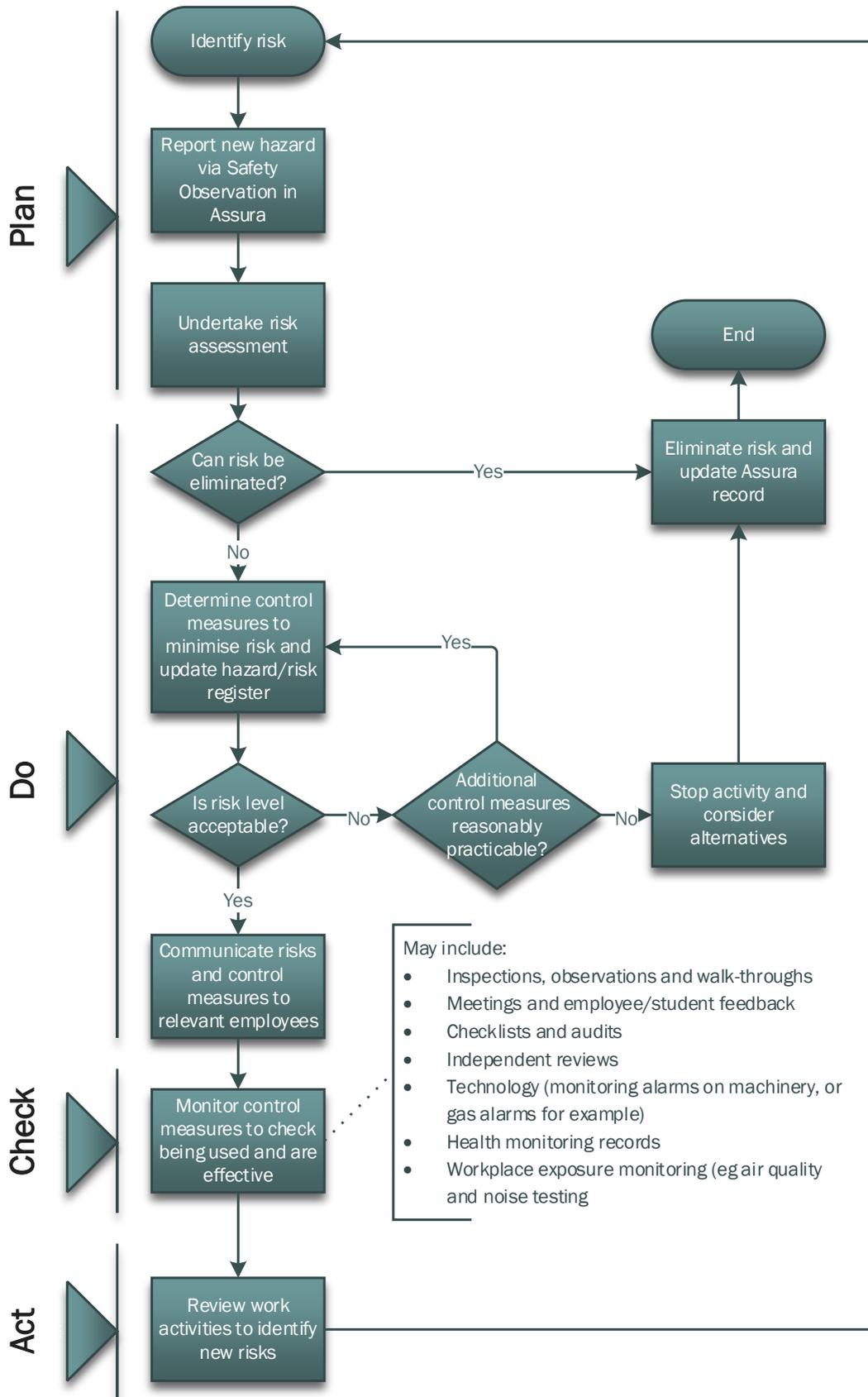
The following risk management framework describes four steps that can help with managing workplace health and safety risks.



PROCEDURE

The Health and Safety Manager has responsibility for assessing risk and control measures for general work risks and providing advice on other health and safety risks. Managers have responsibility for managing risks for their respective areas and should seek advice if necessary.

Procedure to Manage Work Risks



PLAN: IDENTIFY AND ASSESS THE RISKS

Start by walking around your workplace and identifying what could seriously harm the health or endanger the safety of your employees and others (e.g. student, visitors, or someone else's workers). This harm could be acute (occur immediately) or chronic (occur slowly over a long period of time).

- Think about whether any of them might be vulnerable (e.g. young people, pregnant women, casual workers, people with reduced literacy levels)
- Consider whether employees or students' general health could reduce their ability to work safely (e.g. reduced mobility, existing illnesses or injury).
- Look at work processes and the machinery/equipment used, the workplace itself and employees or students' activities.

Identify reasonably foreseeable hazards that could result in risks to people's health or safety.

Hazards may be identified by the following:

- Inspections, observations and walk-throughs
- Checklists and audits
- Outcome of an event investigations
- Risk assessment reviews
- Hazardous substances reviews
- Independent reviews
- Assessment of new equipment, chemicals, workspaces, buildings, work or education activities

Any new hazard identified should be reported as a Safety Observation in Assura.

Risk assessments are undertaken to work out which risks to control. This is done by considering the who could be harmed, consequences of being exposed to the hazards identified (how they could be harmed), and how likely this is to occur (the frequency with which people are exposed to the hazard and the probability that they could be harmed).

Attention initially should be focused on the risks that could cause permanent injury or illness or death to workers or others – even if this is not very likely.

It is important to involve employees when identifying hazards and assessing risks as they often know what could lead to harm.

The risk assessment matrix below should be used as a guide to assess the risk level:

		Consequence				
		Insignificant (no treatment required)	Minor (first aid treatment)	Moderate (medical treatment or lost time)	Major (specialist medical treatment or hospitalisation)	Catastrophic (death)
Likelihood (Probability)	Almost Certain (50-100%) (expected to occur in most circumstances)	Medium	Medium	High	Extreme	Extreme
	Likely (25%-50%) (will probably occur in most circumstances)	Low	Medium	High	High	Extreme
	Possible (10%-25%) (might occur at some time in the future)	Low	Medium	High	High	High
	Unlikely (5%-10%) (could occur but doubtful)	Low	Low	Medium	Medium	High
	Rare (0%-5%) (may occur but only in exceptional circumstances)	Low	Low	Low	Low	Medium

Assessed Risk Level	Description	Actions
Low	There would be little likelihood that an injury would result.	Undertake the activity with the existing controls in place. Review any changes / monitor.
Medium	There would be some chance that an injury requiring first aid would result.	Additional controls may be needed. Regular review / monitoring required.
High	An injury requiring medical treatment would likely result.	Additional controls will need to be in place before the activity is undertaken. Regular review / monitoring required.
Extreme	Critical risk where there is immediate risk of serious injury (permanent, debilitating injury or death) or serious illness arising from work would result.	Consider alternatives to doing the activity. Significant control measures will need to be implemented to reduce risk and ensure safety. Daily review / monitoring required.

DO: ELIMINATE OR MINIMISE THE RISKS

Once workplace risks have been assessed, consider first whether the risk can be eliminated (e.g. can the source of the harm be removed?). If the risk can't be eliminated, then it must be minimised to an acceptable level using control measures.

Control measures should be implemented in accordance with the preferred hierarchy of control below. If lower level controls (such as Administration or PPE) are implemented without higher level controls, it is important that the reasons are explained.

Hierarchy of Control		
	Elimination	Elimination: removing the sources of harm (e.g. equipment, substances or work processes)
	Minimisation	Minimisation
	Substitution (wholly or partly)	Substitution: replacing (wholly or partly) the hazard giving rise to the risk with something that gives rise to a lesser risk; using a less hazardous thing, substance or work practice e.g. using non-toxic glue instead of toxic glue.
	Isolation/preventing contact or exposure to risk	Isolation: separating people from the hazard or preventing people being exposed to the hazard). Focuses on boxing in the hazard or boxing in people to keep them away from the hazard e.g. safety barrier, using automated arm to remove objects from degreasing bath
	Engineering controls (eg mechanical devices or processes)	Engineering controls: Using physical control measures i.e. mechanical devices or processes. e.g. modifying tools or equipment, or fitting guards to machinery, using extraction ventilation to remove harmful substances, raise a bench to reduce bending
	Administrative controls (eg methods of work, processes or procedures designed to minimise risk)	Administrative controls: using safe methods of work, processes or procedures designed to minimise risk, e.g. walk within painted pedestrian zones, signage, induction, training, highlight trip hazards, standard operating procedures (SOPs), emergency plans and evacuation procedures
Personal protective equipment (PPE)	Personal Protective Equipment (PPE): Using safety equipment to protect against harm. PPE acts by reducing exposure if an incident occurs (e.g. safety glasses, overalls, gloves, hard hats, respiratory gear and ear muffs associated with jobs such as handling chemicals or working in a noisy environment)	

In determining control measures:

- Think about the current control measures in place, and whether they are managing the risk. If not:
- Find out if there are any legal requirements relevant to the risk (e.g. regulations), and if there are any standards or guidance materials that could be followed (e.g. codes of practice, WorkSafe guidelines, industry standards and manufacturers instructions.
- Ask others who do similar work and find out how they manage the risk (within NZ and internationally)
- Think about how easy and accessible the ways to control the risk are and whether they will work within your business
- Think about whether the controls you implement could create other risks
- The most expensive control option is not necessarily the best one. If there are well-known and effective controls already in use by your industry, and they are suited to the circumstances of your workplace, these controls may be implemented.

It is important to engage employees when making decisions about ways to eliminate or minimise risks and communicate the risks and the control measures in a way that is appropriate to their needs (i.e. appropriate to the way they work, their work environment and their literacy and language).

The risk level should be assessed again to take into account control measures implemented and to determine if the risk level is acceptable.

Where NMIT staff do not have the required knowledge or competency to be able to assess or manage the risks, external specialist advice will be sought from a competent industry health and safety specialist. When seeking specialist advice the Health and Safety Manager, and the person/people seeking advice, will be involved in deciding the rationale and criteria for the appointment of the specialist.

CHECK: MONITOR CONTROL MEASURES

Health and safety systems should be 'living' and become part of business as usual. Control measures put in place should be checked to ensure they are being used by employees and are effective. Monitoring mechanisms might include:

- Inspections, observations and walk-throughs
- Meetings and employee feedback
- Checklists and audits
- Independent reviews
- Technology (monitoring alarms on machinery, or gas alarms for example)
- Health monitoring records
- Workplace exposure monitoring (e.g. air quality and noise testing)

ACT: REVIEW FOR CONTINUOUS IMPROVEMENT

Work activities should be reviewed on an ongoing basis to identify any new risks that might need to be managed. Existing risks should be reviewed annually, however some risks may be reviewed more frequently due to the level of risk or following a critical event.

The Health and Safety Manager in conjunction with the SHW Leadership Group and HSC, will review each year, as part of the health and safety annual management review, the process for managing work health and safety risks. When reviewing the process they should think about the way risks are identified, assessed and controlled, and:

- Are the processes working, or is there a better way to do these activities
- Should a different method be used to assess consequences and the likelihood of risk happening
- Could the way risk control effectiveness is monitored be improved
- Whether timetables for review of each area are adequate
- If there have been any significant breakdowns in hazard management effectiveness
- Who should be involved in the reviews - could employees be involved more
- Resourcing requirements – whether there are sufficient resources for effective risk management
- What skills, knowledge and workplace understanding is required to ensure effective risk management

Documentation should be used where appropriate to support your health and safety processes.

Documentation is not, however, a substitute for having good processes and control measures in place to actively manage your health and safety risks.

HAZARD RISK REGISTER

Department Hazard risk registers are maintained by each department and information will progressively be transferred to Assura.

PPE / EQUIPMENT REGISTERS

Where hazards require the use of safety equipment or personal protective equipment as part of their control, records need to be maintained detailing the date equipment is issued and when equipment to be inspected/serviced or replaced. This information can be stored in Assura. The equipment register in Assura can also be used to record machinery inspections. Managers are responsible for ensuring registers are maintained for their areas.

RECORDS

- Hazard/Risk Registers
- Risk assessments and reviews
- Record of risks being communicated to employees / students / visitors
- PPE / Equipment Registers
- Audit reports
- Investigation reports
- Record of requirement to use external specialist advice
- Minutes of Annual Management Review of Hazard and Risk management processes

3.2 PROCEDURE FOR RISK MANAGEMENT IN EDUCATION ACTIVITIES

PURPOSE

To assure the health and safety of students and staff during educational activities organised by the Institute.

SCOPE

All NMIT employees and students who undertake any educational activity with a significant risk factor; in an isolated situation; or during work based, or off site training situations.

Examples of areas and activities which may involve 'significant risk' and to which this procedure may apply include nursing, outdoor leadership, fitness and recreation, exercise science, forestry, agriculture, animal care and handling, veterinary nursing, environmental science, viticulture, adventure tourism, fishing/seafood industry visits/work based components, handling of tissue samples, science laboratories and industrial workshop based activities.

RESPONSIBILITY

The Manager has responsibility to ensure that systems are established, authorities assigned and, where necessary, resources allocated to implement these procedures.

Where a programme is run conjointly with another provider, the responsibility for risk management shall be specified in the articulation agreement. Legally a tutor owes a duty of care to the students whenever he or she involves a student in a situation in which it is foreseeable that the student may be at risk.

This duty of care applies throughout the duration of the activity e.g all night for an overnight activity.

In loco parentis

- Over-18 year olds are regarded as adults and responsible for their behaviour.
- 16 to 18 year olds are recognised as requiring more care and in principle all precautions should be taken as if the institution is in a loco parentis position in respect of these students.
- Under-16 year olds: in loco parentis applies.

Where there is a mix of over and under age students it is important to cater for the highest risk situation and this may involve sufficient precautions as if the whole group was under 18 years old.

PROCEDURE

Planning prior to undertaking activities shall include:

- Identifying, assessing, managing and controlling risks as per section **3.1 Procedure to Manage Work Risks** in this document.
- Ensuring employees are correctly trained to work with any potentially hazardous equipment, chemicals, animal tissues samples etc. which they or their students use.
- Emergency situations are identified and applicable training provided to the person responsible.
- Establishment of emergency procedures relevant to identified hazards.
- Ensuring health, safety and accident prevention are given high priority.
- Awareness of and adherence to national body guidelines and industry codes of practice
- Maintenance of equipment has been undertaken.

FOR ALL PROGRAMMES INVOLVING SIGNIFICANT RISK AND PRIOR TO PROGRAMME DELIVERY

The Manager shall:

- ensure for each programme that any activity having the potential for significant risk has been identified
- include information on risk management of activities that are part of a course in the brochure or the programme handbook.
- for each activity or group of activities, designate an 'authorised tutor' responsible for risk management and with authority to take action to minimise risk during programme delivery.

The authorised tutor shall for each identified activity and after consulting with appropriate people if necessary:

- develop a Risk Analysis and Management Form for each activity or group of activities which is retained for reference and which is reviewed at least annually.

PRIOR TO EACH ACTIVITY

The tutor for the activity shall:

- consider the Risk Analysis and Management Form and identify any changes (eg due to the particular location; the competence of particular students).
- if changes are identified, produce an amended Risk Analysis and Management Form.
- ensure that students have participated in a risk management briefing and that the students are aware of potential risks and understand what is required of them to eliminate or minimise those risks. (Students may be required to complete and sign a risk acceptance statement.)

AND, if the activity is off campus:

Complete an intentions sheet (or write on an intentions board) which shall specify:

- name of tutor
- date(s), duration, nature and location of activity
- total number and names of people involved
- intended time (and date) of return
- a designated person to be notified upon return (Call Care Answer Service is the preferred designated supplier, however, this could be programme technician or admin person)
- the time when the designated person would investigate possible causes for delay and take appropriate action (eg notify Police Search and Rescue).
- other relevant matters, eg telephone numbers, cellphone, radiophone, emergency locator beacon, intended route, map references.

DURING THE ACTIVITY

At all times every effort shall be made to reduce any risk to students and employees by management of the activity and the environment.

FOLLOWING THE ACTIVITY

The tutor shall:

- for an off campus activity immediately notify the designated person and 'sign off' on the intentions sheet (or intentions board) at the first opportunity.
- report any accidents or near misses in accordance with procedure 5-1 Incident and Injury Reporting.
- review the reference Risk Analysis and Management Form if required, and recommend any desired changes to the authorised tutor.

RECORDS

- Risk Analysis and Management forms (form on NMIT intranet)
- Intentions forms (form on NMIT intranet)

3.3 PROCEDURE FOR HEALTH MONITORING

PURPOSE

To identify any changes in health status of employees due to exposure to certain health hazards arising from activities carried out at work. It aims to detect early signs of ill-health or disease and can be a good indicator if control measures are working effectively.

HEALTH MONITORING ASSESSMENT

Any potential harm to an employee's health or illness from the workplace through exposure to hazards whilst carrying out work, will be identified through 3.1 Procedure to Manage Work Risks. Once identified, appropriate checks will be agreed and a process will be put in place, in conjunction with an occupational health practitioner, to provide baseline monitoring of the employee's health in relation to the identified hazard. Checks will subsequently be conducted on an annual basis (or more frequently as required or after critical event) to monitor any changes and ensure that the appropriate control measures remain effective. In addition, exit monitoring is to be carried out when the employee is no longer employed by the Institute.

Examples of health monitoring could include:

- Spirometry testing to detect early changes in lung function
- Audiometric testing to detect early hearing loss

Health monitoring is not:

- Wellbeing checks (e.g. cholesterol checks) or programmes (e.g. promoting health living)
- Fitness to work examinations

The employee must provide consent prior to any health monitoring being undertaken. The occupational health practitioner must provide the health monitoring report to the Institute as soon as practicable after the monitoring has occurred. Health monitoring reports are confidential and access is restricted to authorised personnel who need the information to make health and safety decisions. As soon as it is practicable, a copy of the monitoring report must be given to the employee being monitored. If monitoring results are to be

provided to anyone else, the employee's permission must be sought and any information that identifies the individual should be removed beforehand. To avoid doubt, permission is not required to make available collated / grouped data of monitoring results. For example, of 20 spirometry tests undertaken, one individual has been referred to their GP.

In the event of a critical event, accident or incident where an employee's health may have been harmed, health testing / screening may be required to assess or treat any injury with the employee's consent.

If sub-optimal or abnormal results occur:

- The employee is informed at the time of the test. A follow-up test is arranged
- If this test is also abnormal, a referral is made to the employee's GP
- The manager to consider medical and vocational needs of the individual and discuss with POD Manager, if needed
- A review of the hazard(s) involved to be undertaken to assess the adequacy of existing hazard controls, and to determine whether additional control measures are required

For further information on health monitoring requirements, including what should be in the health monitoring reports, when control measures should be reviewed and when WorkSafe should be informed, see [WorkSafe Health Monitoring fact sheet](#)

RECORDS

- Health Monitoring Consent forms (form on NMIT intranet)
- Health monitoring reports

4.1 PROCEDURE FOR INDUCTIONS

PURPOSE

To ensure that employees are informed of their responsibilities and the Institute's responsibilities for health and safety in the workplace; that employees have specific knowledge of hazards that affect them and are equipped to undertake their roles and tasks in a way that maintains their health and minimises any potential for injury to themselves or others.

PROCEDURE

A health and safety induction training will be provided for all new employees or employees transferring to a new work environment, role or task.

The Manager is responsible for completing the induction when the employee starts their new role. This induction will include specific health and safety information relating to their area and includes:

- An overview of health and safety within the area
- Hazards, risks and control measures specific to the area
- What to do in an emergency
- How to report an injury, near miss incident, pain and discomfort

The Manager and employee sign-off the New Staff/Area Induction checklist as a record of this induction and the form is attached to the employee's training record in Assura.

All employees will be required to complete the online Safety, Health and Wellbeing at NMIT module via Moodle available on the intranet. This online resource is designed to provide a general understanding of health and safety at the Institute.

At a later date further safety, health and wellbeing information will be delivered during a formal group induction day.

RECORDS

- Team NMIT Health and Safety Induction checklists (form on NMIT intranet and Snaphire)
- Results from the online Safety, Health and Wellbeing module

PURPOSE

To ensure that training needs in relation to safety are identified and records kept of employees' skills, competencies and qualifications.

PROCEDURE

The Director of People and Organisation Development (or POD staff member), is responsible for ensuring the required competency is met for health and safety in specific roles or areas of work during the recruitment process. Where possible, copies of records of training, certificates or licenses should be obtained. Where gaps are identified during the recruitment process a training plan will be put in place to be implemented when the employee starts their role.

During the course of the employee's employment, further health and safety training may be identified by the employee, Manager, H&S or POD staff. Training must be approved by the Manager who will take into account the level of skill competency or qualification required for the employee to undertake their duties. Once training is completed this will be recorded in Assura, along with copies. Automated reminders will be sent when certification is due to expire to allow time for further training to be undertaken to remain current.

Internal or external trainers may be used to undertake training. Selection will be based on cost and ensuring the trainer is competent and has the necessary skills, experience and qualifications.

Employees undergoing on-the-job training will be buddied with the a person with relevant skills and experience to ensure the employee does not pose a health and safety risk to themselves or others. The Buddy will be responsible for supervising the employee and sign off that the employee is competent to perform the work activity when they have demonstrated that they have an understanding of key safety components of the job, have undertaken any training as required and can demonstrate safe working behavior.

RECORDS

- Copies of employee records of training, certificates or licenses
- Copies of trainer qualifications skills, or experience
- Confirmation of competency of employee undergoing on the job training.

SECTION 5 – HEALTH AND SAFETY EVENT MANAGEMENT

5.1 PROCEDURE FOR REPORTING HEALTH AND SAFETY EVENTS

PURPOSE

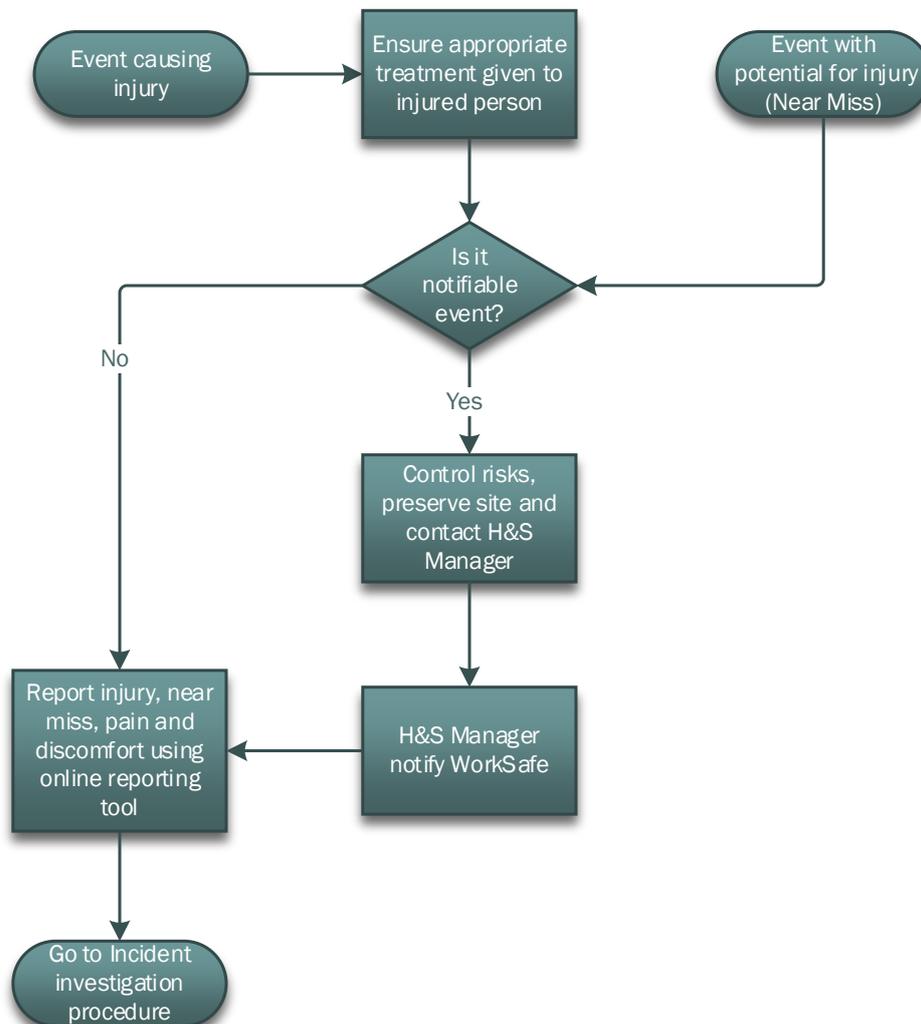
To ensure that proper and prompt assistance is obtained for any injured person and to initiate investigations for health and safety events. Health and safety events are when death, injury or illness, near miss, pain or discomfort, property or environmental damage occur as a result of work.

The HSWA requires that any notifiable events be reported to WorkSafe.

PROCEDURE

The priority should anyone be injured, is to ensure they receive appropriate medical attention when it is safe to do so. This may involve getting a first aider to assist, and / or calling emergency services.

Procedure for Reporting Health and Safety Events



All employees and students are required to report near misses, injuries, property or environmental damage, early signs of discomfort, gradual process injuries or work-related illnesses. All events are to be reported using the Assura within 24 hours. If the employee or student does not have access to Assura, the Near Miss, Accident, Pain & Discomfort form available on the intranet, can be completed for input into Assura at a later time. Once the information has been inputted into Assura the paper form can be destroyed.

Any injuries should be notified to the injured person's Tutor or Manager at the time of injury. The injured person's Manager, Tutor or First Aider in attendance must report the event in Assura if not already logged. Only one event is required to be logged in Assura for each incident. If there are multiple employees involved in the event they should agree on who will log the event in Assura.

Notifications will be automatically sent to appropriate parties when events are reported in Assura.

The Area Manager, when notified of an event should review information provided to determine if immediate action is required. In reviewing the need for immediate action the Manager will take into consideration the following:

- Treatment of the injured person
- Any need to make the site safe or minimise the risk of someone else being hurt
- Duty to preserve the site of a notifiable event
- Duty to notify WorkSafe of a notifiable event

All events are to be investigated to ensure, so far as is reasonably practicable, that the health and safety of employees and other persons are not put at risk from work carried out by the Institute. Investigations shall be carried out as per 5.2 Procedure for Investigating Events.

DUTY TO REPORT NOTIFIABLE EVENTS

Under the HSWA PCBUs must notify WorkSafe when certain work-related events occur. A notifiable event is when any of the following occurs as a result of work:

1. A death
2. Notifiable illness or injury
3. A notifiable incident (serious near miss)

WorkSafe have a [Notifiable Event tool](#) to help with understanding which events are notifiable.

The Health and Safety Manager (or delegate) must be notified immediately when a notifiable event has occurred. If you are unsure whether or not it is a notifiable event, contact the Health and Safety Manager. The Health and Safety Manager will notify WorkSafe as soon as possible so they can investigate or follow up on significant events immediately.

Those attending to the event (response team) must take all reasonable steps to ensure the site of the notifiable event is preserved and may only be disturbed if:

- you need to assist the injured person
- it's essential to make the site safe or minimise the risk of someone else being hurt or killed
- directed to do so by the Police
- permitted by the WorkSafe

To ensure the site is not disturbed:

- the work set-up should not be changed
- any plant, substances or other things involved in the event should stay where they are
- work that could interfere with the site should stop. Work may continue in other parts of the

workplace

- no alterations should be made to the plant, vehicles, or structures involved.

RESPONSIBILITIES

- All employees and students are required to report health and safety events
- Manager, Tutor or First Aider to ensure health and safety events are reported via Assura
- Manager to actively encourage the early report of any pain and discomfort
- The response team will ensure that the injured person receives appropriate treatment
- When a notifiable event has occurred, the response team is to ensure that immediate risks are controlled, the scene is preserved and the Health and Safety Manager is notified immediately
- The Health and Safety Manager (or their delegate) will notify WorkSafe of any notifiable events

RECORDS

- Near Miss, Accident, Pain & Discomfort Report forms (online form via Assura and hardcopy form on NMIT intranet)
- WorkSafe Notifications (pdf and online form on WorkSafe website)

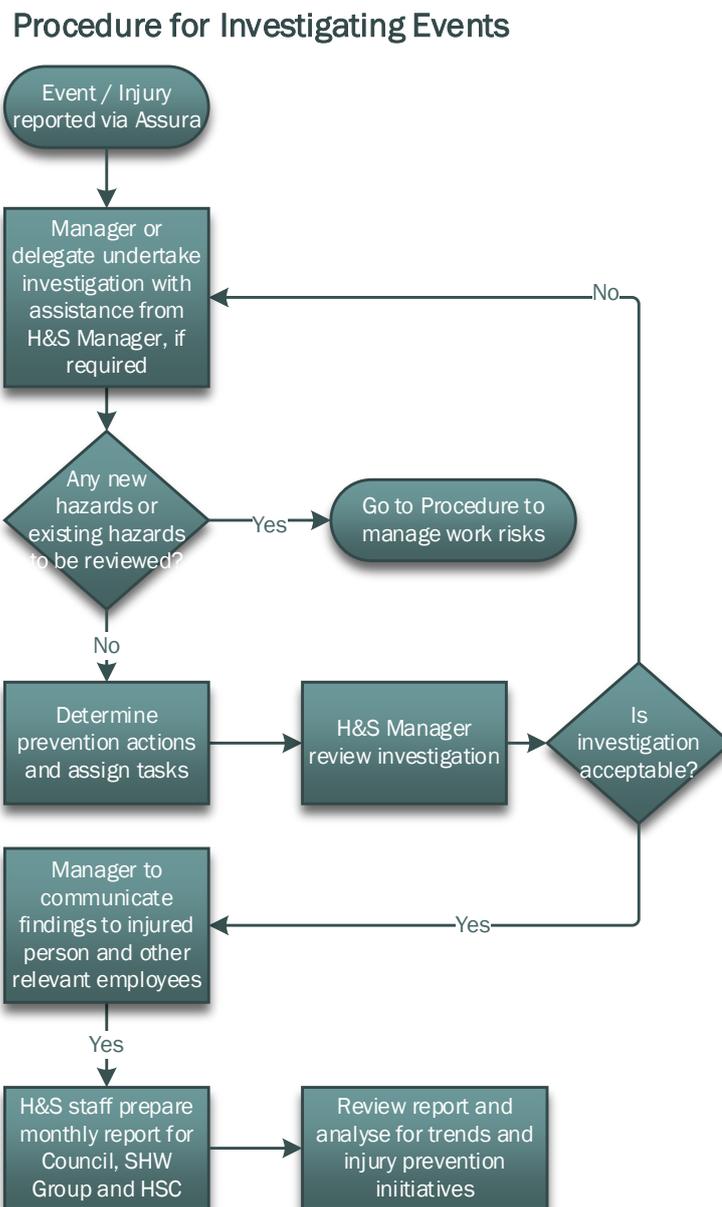
PURPOSE

This procedure is undertaken to determine the root causes of an event, what lessons can be learnt and ascertain actions to prevent reoccurrence.

Although the HSWA does not explicitly state that PCBUs must investigate health and safety events, such investigations form part of good practice to identify and manage work risks.

PROCEDURE

This procedure is initiated following the report of a work-related injury, illness, near miss incident, pain and discomfort issue, property or environmental damage.



The investigation will generally be completed by the Manager, or their delegate, with assistance from the Health and Safety Manager, if necessary. The investigation will commence as soon as practicable after the event has occurred. An investigation allows the Institute to determine the underlying causes of the event by establishing and analysing the facts. Where the event is of a serious nature, the Health and Safety Manager may recommend a [WorkSafe Duty Holder Review](#) is completed as part of the investigation or WorkSafe may require one to be completed. It is designed to assist investigators to analyse and understand why an accident occurred and what the failures were in the health and safety systems that allowed the accident to occur.

The findings from the investigations, including photos, video clips, communications, and any details of corrective actions, assigned tasks, timeframes and further recommendations to be recorded in Assura. See Section 3.1 Procedure to Manage Work Risks if a new hazard or risk assessment review of an existing hazard is identified during the investigation.

The Health and Safety Manager will review investigations for quality and refer back to the investigator, if necessary. Notifications will be automatically generated for any overdue corrective or prevention action(s) and escalated as necessary.

The Manager, or delegate, is to report investigation findings to the injured person and other relevant employees.

EVENT ANALYSIS

The Health and Safety Manager, in conjunction with the Health and Safety Administrator will prepare for each month information on health and safety events for:

1. Council report
2. Safety, Health and Wellbeing Leadership Group (SHW Leadership Group)
3. Health and Safety Committee (HSC)

This is designed to assist in identifying trends and areas of focus within the Institute and prioritising injury prevention initiatives.

This information, along with any initiative information and outcomes resulting from the analysis will also form part of the health and safety annual management review as per Section 2.

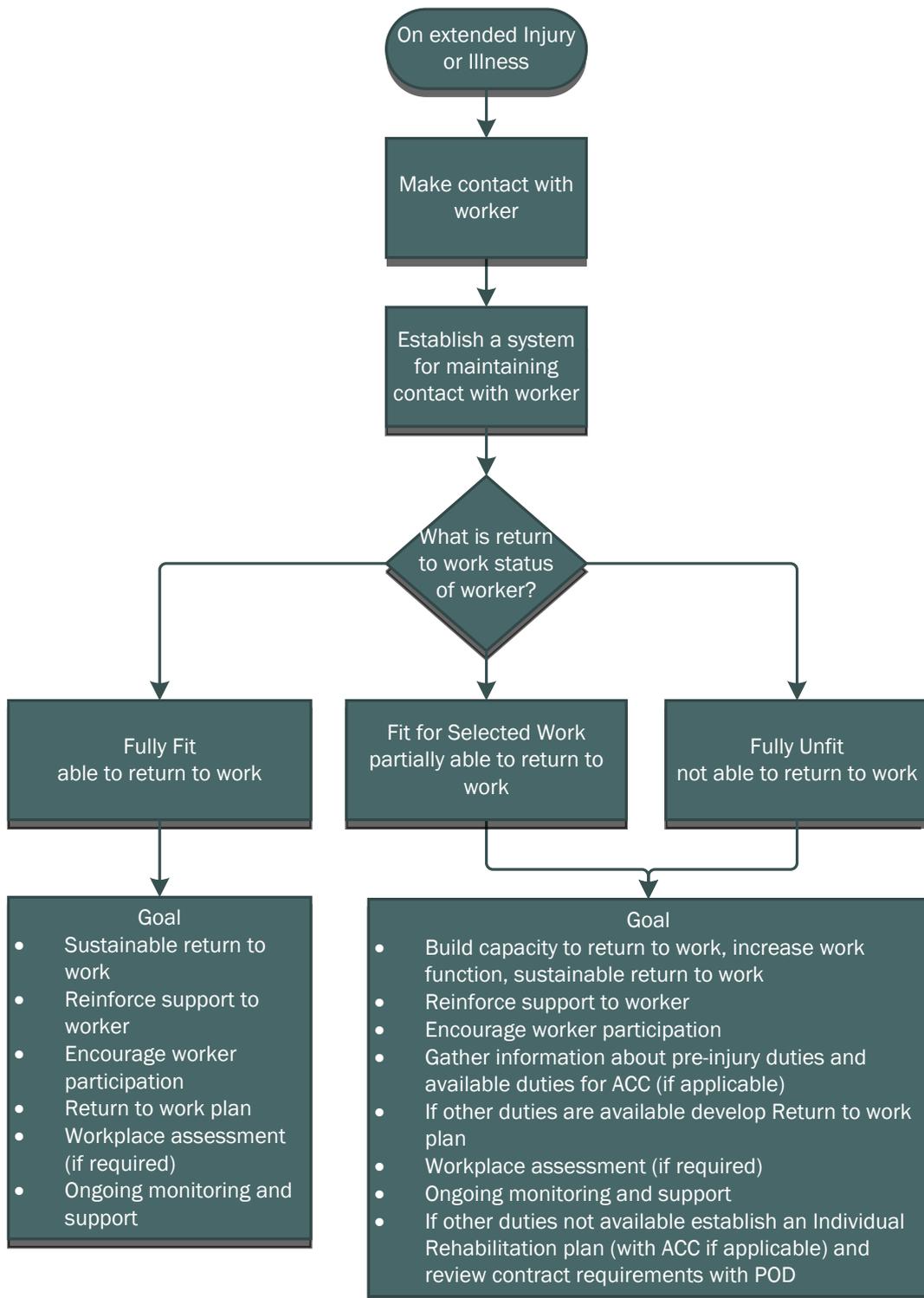
RECORDS

- Event details
- Investigations reports
- Event Analysis reports

PURPOSE

This procedure is undertaken to provide a process for managing and coordinating the rehabilitation and return to work of employees on extended leave due to injury or illness.

Return to Work procedure



The Manager and / or Director of People and Organisation Development (or delegate) will make contact with the employee as soon as possible after the injury/illness to provide reassurance and support. They will ensure constant communication is maintained with the employee throughout the return to work process. Communication may also be made by the Health and Safety Representative.

The employee is responsible for providing clearance from a medical professional (e.g. GP, Physiotherapist, surgical specialist) that states an employee is fit to return to work. If required, guidance on reduced tasks and/or reduced timeframes should be provided by the medical professional where a return to normal duties is not recommended.

The Manager, in conjunction with the Director of People and Organisation Development, will be responsible for managing the return to work process and will encourage the employee to participate in the process by formulating information on what they do as a job now and what other possible jobs could be performed, the development of a their ACC Individual Rehabilitation Plan and/or Return to Work Plan and any other aspects associated with the process.

The Manager will identify the return to work status of the employee in consultation with the employee's health provider (once written consent has been received from the employee), employee and ACC Representative (if required).

The Manager will then organise a meeting to discuss what needs to be put in place for the employee to return to work. Actions from the meeting will be recorded on Form 5-4A "Return to Work". Prior to the employee returning to work a workplace assessment may be arranged by People and Organisation Development staff to identify and implement any changes necessary to assist their return to, or sustain their normal or temporary duties safely.

Once the employee has returned to work their Manager will have responsibility to monitor them to make sure the return to work is sustainable.

If, due to the type of injury/illness and after assessment, continued work is unable to be undertaken within the Institute the Director of People and Organisation Development will initiate and manage this process.

RECORDS

- Return to Work forms (form on NMIT intranet)
- ACC Individual Rehabilitation Plans
- Workplace Assessments
- Records of monitoring progress and / or updated Return to Work form to reflect changes

6.1 PROCEDURE FOR EMPLOYEE ENGAGEMENT AND PARTICIPATION

PURPOSE

This procedure is undertaken to ensure that all employees have reasonable ongoing opportunities to be involved in the development and evaluation of safe workplace practices and foster positive health and safety practices in the Institute.

Under the HSWA, a PCBU must:

- Engage with its workers on issues which will or are likely to affect health and safety, and
- Have practices that provide reasonable opportunities for its workers to participate effectively in improving health and safety

PROCEDURE

The Institute must engage with employees by;

- Sharing information about health and safety matters with employees
- Give employees time to consider issues
- Give employees a reasonable opportunity to:
 - Express their views and raise health and safety concerns
 - Contribute to decisions about health and safety
- Take employees' views into account and let them know of the outcomes in a timely way

If employees are represented by an HSR, engagement must involve that representative. Engagement should be regular and ongoing. Health and safety can be affected by how work is organised as well as changes in technologies, equipment or work methods.

The Institute will have three areas of formal employee participation:

- Health and Safety Representative (HSR)
- Health and Safety Committee (HSC)
- Safety, Health and Wellbeing Leadership Group (SHW Leadership Group)

Information on these participation practices are described in the HSR role description, and Terms of Reference for the HSC and SHW Leadership Group.

Employee participation will further be encouraged through:

- The use of the Institute's intranet to ensure employees are kept up to date with issues and make suggestions
- Include health and safety as a routine agenda item at department meetings
- Focus groups of employees when reviewing documentation or seeking feedback on safety initiatives

REFERENCES

- Health and Safety Representative role description
- Health and Safety Committee Terms of Reference
- Safety Health and Wellbeing Leadership Group Terms of Reference

RECORDS

- Meeting minutes
- Written records of engagement undertaken
- Training records for HSRs

SECTION 7 – EMERGENCY PLANNING

7.1 PROCEDURE FOR EMERGENCY PLANNING RESPONSE AND READINESS

PURPOSE

To identify and establish effective and efficient emergency plans to assist in the protection of employees and students in the event of any emergencies that are likely to occur within the Institute.

PROCEDURE

The Health and Safety Manager, in conjunction with the SHW Leadership Group and HSC will identify emergency situations that are relevant to the various departments and areas within the Institute. These may be identified through hazard/risk management; audits; incident investigations etc.

Each potential emergency situation that is identified will have a documented procedure which will outline the process that needs to be followed to keep employees, students, contractors and other people in the vicinity in the event of emergency safe and any specific emergency service requirements.

This information will be made available to employees and students via the induction process, intranet, signage which is displayed around the Institute and through refresher training. Emergency scenario drills will be undertaken at least six monthly to ensure employees are aware of how to behave safely in an emergency situation and identify any areas for improvement.

Building Wardens to complete evacuation reports for planned (practice drills) and unplanned (actual emergency) events, These reports to be provided to HSC for review to determine whether changes should be made to procedures.

Where employees have been given responsibility for controlling an emergency situation, or have/are designated responsibilities, such as wardens or first aiders, they will be provided with relevant training and experience to ensure they are competent to carry out the task required of them.

REFERENCES

- NMIT Crisis Procedure
- Emergency Procedures
- Communicable Diseases Procedure

RECORDS

- Minutes of meeting involving emergency scenario identification and review of evacuation reports
- Evacuation reports
- First Aiders role description
- Area Warden duties

SECTION 8 – CONTRACTOR MANAGEMENT

8.1 PROCEDURE FOR CONTRACTOR MANAGEMENT

PURPOSE

This procedure is undertaken to evaluate the capability of a potential Contractor to ensure the health and safety of workers (e.g. employees or contractors, including their subcontractors or workers) or other persons are not put at risk while undertaking the contracted work.

Under the HSWA, PCBUs must, as far as is reasonable practicable, consult, co-operate and coordinate activities with other PCBUs who have health and safety duties in relation to the same matter (overlapping duties).

For the purposes of this section, contractor workers exclude contracted tutors and student interns.

PROCEDURE

The Campus Services Manager and his team will have overall responsibility for Contractor Management within the Institute.

Contractor Management will be split into three levels.

LEVEL ONE

This will apply to contractors who are involved in large scale new build or major rebuilding projects within the Institute. In this situation the following process will be considered:

Scoping the Work – this will involve initial consideration in terms of the extent of the work to be contracted out; the broader health and safety considerations including hazards and high risk activities; and what basis the contractor will be selected on. This information will then be set in the tender document and provided to tenderers.

Contractor prequalification – If not already prequalified, as part of the tender process, contractors will be required to submit a questionnaire with SiteWise to have their health and safety capability assessed and graded. Reassessment is required every 12 months to remain current. Where the contractor can provide evidence of prequalification with another reputable company (eg. Impac), this may be accepted in place of the SiteWise prequalification.

Contractor Selection – As part of the tender process, the Institute will provide further information to potential contractors on any further health and safety information or hazards that arises. Tenderers will be required to provide evidence of prequalification certification.

Awarding the Contract – After evaluation of the tender submission a contractor will be awarded the contract for works. The contract must include health and safety provisions. The contractor must then supply a completed site specific safety plan (SSSP) prior to the commencement of work. Consultation is required between the Institute and the Contractor to help avoid unnecessary duplication of effort (eg when providing welfare or first aid facilities) and help to prevent gaps in managing health and safety risks. It helps to reach a common understanding and establish clear roles, responsibilities and actions. Contractors may be required to provide documents which describe how specific tasks will be carried out safely. This documentary evidence may be in the form of a Job Safety Analysis (JSA) a Task Analysis (TA) or similar. All contractor workers will be required to undertake a health and safety

induction prior to starting work on any Institute property. This will include confirmation the contractor has read and understood the contractors' health and safety information booklet.

Monitoring the Contract – This will be ongoing throughout the contract by the Campus Services staff, through conversations with the contractor to discuss any health and safety concerns and resolve any safety issues; walk over audits/inspections to ensure the performance meets the agreed standard and that relevant systems are in place for managing risks, including having appropriate permit to work and qualifications. The contractor will be informed of any results of monitoring.

Post Contract Review – Once the contract has been completed a post contract review will be undertaken to determine the success of the contract and highlight any areas of improvement and what went well.

LEVEL TWO

This will apply to contractors who are involved in mostly repairs and maintenance within the Institute and where the work activity being undertaken has the potential to cause illness or injury. In this situation the following process will be considered:

Scoping the Work – this will involve initial consideration in terms of the extent of the work to be contracted out; the broader health and safety considerations including hazards and high risk activities; and what basis the contractor will be selected on.

Contractor prequalification – If not already prequalified, contractors will be required to submit a questionnaire with SiteWise to have their health and safety capability assessed and graded. Reassessment is required every 12 months to remain current. Where the contractor can provide evidence of prequalification with another reputable company (eg. Impac), this may be accepted in place of the SiteWise prequalification. An exception to this requirement may be given to one-off maintenance contractors. However, to compensate for not going through the prequalification process, they may be required to supply additional health and safety documentation to give assurance their health and safety systems are satisfactory.

Contractor Selection – Contractors past health and safety performance may be considered when selecting a contractor. The Institute reserves the right not to select a contractor where past health and safety performance has been unsatisfactory.

Awarding the Contract – Work instructions will be provided to the pre-qualified contractor in the form of a work order or other written communication and further safety information as it arises. Consultation is required between the Institute and the Contractor to help avoid unnecessary duplication of effort (eg when providing welfare or first aid facilities) and help to prevent gaps in managing health and safety risks. It helps to reach a common understanding and establish clear roles, responsibilities and actions. Contractors may be required to provide documents which describe how specific tasks will be carried out safely. This documentary evidence may be in the form of a Job Safety Analysis (JSA) a Task Analysis (TA) or similar. All contractor workers will be required to undertake a health and safety induction prior to starting work on any Institute property. This will include confirmation the contractor has read and understood the contractors' health and safety information booklet. A further induction is required if it has been 12 month's since their last induction.

Monitoring the Contract – This will be ongoing throughout the contract by the Campus Services and / or H&S staff; through conversations with the contractor to discuss any health and safety concerns and

resolve any safety issues; walk over audits/inspections to ensure the performance meets the agreed standard and that relevant systems are in place for managing risks, including having appropriate permit to work and qualifications. The contractor will be informed of any results of monitoring.

Post Contract Review – Once the contract has been completed a post contract review will be undertaken to determine the success of the contract and highlight any areas of improvement and what went well.

LEVEL THREE

This will apply to contractors involved in work activities where there is a low risk of illness or injury. All Level Three contractor workers will be required to undertake a health and safety induction prior to starting work on any Institute property. This includes confirmation the contractor has read and understood the contractors' health and safety information booklet. A further induction is required if it has been 12 months since their last induction. Regular visitors to site will also be regarded as Level Three. Regular visitors, after being provided with a health and safety induction, may be given authority to have open access. One off visitors may be provided with health and safety information and then accompanied throughout their time on the site.

SIGN IN/OUT PROCEDURE

So that there is a record of who is on our site, and for the purposes of coordinating work activities, all contractor workers are required to sign in prior to commencing work and sign out at the completion of work, each day. For work at Nelson Campus contractors to sign in/out at the Campus Services Office in H block. For other campus this is done at reception.

RECORDS

- Relevant Tender and/or Contract information developed by the Institute
- Contractors Health & Safety Information Booklet
- Contactor / Visitor Sign In sheets (form on NMIT intranet)
- Contractor Health and Safety Induction forms (form on NMIT intranet)
- Monitoring records – meeting minutes / audits / inspections, walkovers etc
- Contractor Incident reports
- Post Contract evaluations
- SiteWise Prequalification Database

REFERENCES

INTERNAL

Safety, Health and Wellbeing Policy
Offsite and Workplace Learning
SmokeFree Policy
Health and Safety Committee Terms of Reference
Safety, Health and Wellbeing Leadership Group Terms of Reference
Quality Management System Policy
Programmes' own procedures for Risk Management in Educational Activities

EXTERNAL

HSWA 2015
General Risk and Workplace Management Regulations 2016
WorkSafe website <http://www.business.govt.nz/worksafe>
Education Outside the Classroom website <http://eotc.tki.org.nz/EOTC-home/EOTC-Guidelines/Tool-Kit>
Ministry of Education website <http://www.education.govt.nz/ministry-of-education/specific-initiatives/health-and-safety>