1. Overview

The Wudinna District Council (the Organisation) recognises its obligation to consult with its workers (and/or their representatives) who are, (or are likely to be,) directly affected by a matter relating to work health and safety (“WHS”).

This procedure aims to:

(a) Ensure that the Organisation’s WHS Management System conforms with legislative requirements and ReturnToWorkSA’s Performance Standards for Self-Insurers (“PSSI”);

(b) Provide a system that enables, so far as is reasonably practicable, workers and/or their representatives to be consulted in decisions that directly affect, or are likely to directly affect, work health and safety;

(c) Provide a mechanism that enables consultation to take place with other PCBU’s, so far as is reasonably practicable, where the Organisation’s WHS duties overlap with theirs; and

(d) Make sure consistent communication practices are in place for WHS matters.

2. Core components

The core components of the Organisation’s Communication and Consultation Procedure aim to:

(a) Identify and document the information and types of information that need to be communicated to enable effective implementation of the Organisation’s WHS Management System, including:
   i. Internal, for example: policies, procedures, performance indicators, changes to the workplace; or
   ii. External, for example: mandatory notifications (to SafeWork SA and Office of the Technical Regulator), LGAWCS advice, legislative changes;

(b) Provide workers and/or their representatives with a genuine opportunity to express their views in order to contribute to decision making in regards to WHS;

(c) Require an up to date list of Health and Safety Representatives (“HSRs”) and deputy HSRs to be maintained and displayed at the workplace in a central location that is readily accessible to all relevant work groups;

(d) Require that HSRs attend the prescribed days for HSR training (if requested);

(e) Define the role of the Health and Safety Committee (“HSC”) and ensure that it meets at least once every three months;

(f) Implement a system for:
   i. Maintaining confidential personal and medical information that does, or could, identify a worker in such a manner that it is not accessible, or provided, to the HSC or a HSR;
   ii. Retention of communication and consultation documentation (e.g. HSC, management, team meeting minutes etc.) in a way that makes it easily accessible; and
   iii. Communicating relevant information in a timely, usable and accessible manner.

3. Definitions

<table>
<thead>
<tr>
<th>Agreed Procedure</th>
<th>An agreed process or outline of the steps involved in resolving health and safety issues in the workplace.</th>
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<td>[as defined in the Worker Representation and Participation Guide, p.31]</td>
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## WHS Communication and Consultation Procedure

<table>
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<tr>
<th>Communication</th>
<th>The imparting or exchange of information by speaking, writing or using some other medium [Oxford Dictionary 2012]</th>
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| Consultation  | (1) Consultation under the Work Health and Safety Act 2012 requires:  
  (a) that relevant information about the matter is shared with workers; and  
  (b) that workers be given a reasonable opportunity—
    i. to express their views and to raise work health or safety issues in relation to the matter; and
    ii. to contribute to the decision-making process relating to the matter; and
  (c) that the views of workers are taken into account by the PCBU; and
  (d) that the workers consulted are advised of the outcome of the consultation in a timely manner.  
(2) If the workers are represented by a HSR, the consultation must involve that HSR. [as defined by the Work Health and Safety Act 2012, Part 5 Division 2, Section 48] |
| Health and Safety Committee ("HSC") | A HSC brings together workers and management to assist in the development and review of health and safety policies and procedures for the workplace. [as defined by the Approved Code of Practice: Work Health and Safety Consultation, Co-operation and Co-ordination, p.14] |
| Health and Safety Representative ("HSR") | In relation to a worker, means the HSR elected for the work group of which the worker is a member. [as defined by the Work Health and Safety Act 2012, Section 4] |
| Issue | Any concern about health and safety at the workplace that remains unresolved after consultation with the affected workers and the relevant PCBU has occurred. [as defined in the Worker Representation and Participation Guide, p.31] |
| Parties to an issue | (1) Parties, in relation to an issue, means the following:  
  (a) the PCBU or the person’s representative;  
  (b) if the issue involves more than one business or undertaking, the person conducting each business or undertaking or the person's representative;  
  (c) if the worker or workers affected by the issue are in a work group, the HSR for that work group or his or her representative;  
  (d) if the worker or workers affected by the issue are not in a work group, the worker or workers or their representative.  
(2) A PCBU must ensure that it’s representative (if any)  
  (a) is not a HSR; and  
  (b) has an appropriate level of seniority, and is sufficiently competent, to act as the person’s representative. [as defined by the Work Health and Safety Act 2012, Part 5, Division 5, Section 80] |
| PCBU | Person Conducting a Business or Undertaking [as defined in the Work Health and Safety Act 2012, Section 5] |
| Provisional Improvement Notice ("PIN") | A notice that is issued by a HSR to a person requiring them to address a health and safety concern in the workplace. |
4. Procedure

4.1. Management Nominated Person

4.1.1. The Senior Management Team (SMT) has nominated the Office Manager to oversee the Organisation’s consultation and communication arrangements.

4.2. Consultation overview

4.2.1. As part of normal business operations, consultation will take place with workers and their representatives when:

(a) Identifying hazards and assessing risks arising from the work carried out or to be carried out;

(b) Making decisions about ways to eliminate or minimise those risks. For example when:
   i. Reviewing WHS audit findings;
   ii. Developing, implementing and reviewing corrective and preventative action plans; and
   iii. Reviewing and evaluating the WHS Management System;

(c) Making decisions about the adequacy of facilities for the welfare of workers;

(d) Proposing changes that may affect the health or safety of their workers. For example when:
   i. The issue resolution procedure is commenced; or
   ii. Formulating WHS Plans (before they are finalised); depending upon the planning processes within the Organisation, this may include strategic plans, departmental plans and the WHS Plan, as relevant.

(e) Making decisions about (including the development, review or evaluation of) the procedures/processes for:
   i. Consultation with workers;
   ii. Resolving WHS issues;
   iii. Monitoring the health of the workforce;
iv. Monitoring the conditions at the Organisation’s workplaces; and
v. Providing information and training for workers.

4.2.2 The consultative process may be supported by:
(a) E-mail to all or selected workers;
(b) Hard copy communication to all or selected workers;
(c) Discussion with HSRs;
(d) A working group of representative workers;
(e) Discussion with the HSC and/or sub-committees;
(f) Individual and location forums or discussions;
(g) Workers being invited to attend HSC meetings to address specific issues;
(h) Discussion with other PCBU’s whose workers are undertaking work for the Organisation, when relevant; and/or
(i) Facilitating the attendance by workers and/or their representatives to external forums and/or seminars, where appropriate.

4.2.3 All Managers and Supervisors, in consultation with the WHS Coordinator, will make sure that:
(a) Workers are provided with information about the Organisation’s consultation and communication processes during induction;
(b) WHS information is presented and communicated in a way that can be easily understood by workers and takes into account any language and literacy needs of the worker/s;
(c) The outcomes of the consultation process are communicated to the worker or workers directly affected by the WHS matter, as soon as reasonably practicable; and
(d) Documented evidence of consultation and communication activities is retained (refer to section 6 for some examples).

4.3. Consultation will occur, in the first instance, by Managers and Supervisors consulting with the worker or workers directly affected by a WHS matter and/or the relevant HSR for the work group (if elected), as far as is reasonably practicable.

4.4. Department Managers / Supervisors will:

4.4.1 Identify meetings (e.g. tool box, work group meetings) where WHS is a standard agenda item and make sure all workers are given information about these meetings during the departmental induction; and

4.4.2 Make sure the meetings where WHS is a standard agenda item are held at least monthly and all WHS matters discussed are documented and retained.

4.5. Communication overview

4.5.1 External Communication

The WHS Coordinator will make sure that:
(a) Communication pathways are maintained with relevant external agencies (e.g. LGAWCS, SafeWork SA, Office of the Technical Regulator);
(b) Evidence of communication is retained; and
(c) Incoming WHS information is communicated to the relevant internal groups in order to maintain legislative and PSSI compliance, and records of communication are retained.

4.5.2 Internal Communication

(a) WHS information will be made readily accessible to workers and relevant HSRs; and

(b) Managers and Supervisors will communicate, where reasonably practicable, with workers and HSRs to keep them up to date with:
   i. WHS information, and
   ii. The outcomes of consultation.

4.5.3 Communication may be distributed by:

(a) Newsletters,
(b) Notice boards,
(c) Intranet,
(d) Email, and/or
(e) Meeting agendas, minutes, reports etc.

4.5.4 Review and verification

There should be a process for evaluating the effectiveness of the consultation process. Some examples include:

(a) Focus groups;
(b) Discussion with HSRs; and/or
(c) WHS Survey.

4.6. Specific consultation mechanism: Health and Safety Representatives (“HSR”)

4.6.1 The powers and functions of HSRs are limited to the workers they represent in the work group unless:

(a) there is a serious risk to health or safety emanating from an immediate or imminent exposure to a hazard that affects or may affect a member of another work group; or

(b) a member of another work group asks for the HSR’s assistance and, in either case:
   The HSR and deputy HSR (if any) for that other work group is found to be unavailable after reasonable inquiry.

4.6.2 The powers and functions of HSRs include:

(a) Representing the workers in their work group in relation to WHS matters. Some of these functions include being involved in:
   i. Empowering the workforce to maintain a safe work environment;
   ii. Making recommendations to management regarding inappropriate or inadequate corrective actions;
   iii. Modelling safety culture and encouraging safety initiatives;
   iv. WHS issue resolution;
   v. Issue PINs where issue resolution fails;
   vi. Training and induction;
vii. WHS investigations and, where required, accompany a Safework SA Inspector; and
viii. Workplace inspections.

(b) Monitoring the measures taken by the Organisation to comply with the Work Health and Safety Act in relation to workers in their work group;

(c) Investigating complaints from workers in their work group about WHS; and

(d) Inquiring into anything that appears to be a risk to the health or safety of workers in their work group arising from the conduct of the business or undertaking.

4.6.3 The Senior Management Team will:

(a) Consult, so far as is reasonably practicable, with HSRs on WHS matters at the workplace;

(b) Confer with a HSR, whenever reasonably requested by the HSR, for the purposes of ensuring the health and safety of the workers in the work group;

(c) Allow a HSR access to information that the Organisation has relating to hazards and risks affecting the health and safety of the workers in the work group;

(d) Allow a HSR access to information relating to the health and safety of the workers in the work group (e.g. health surveillance, noise testing, air quality assessments etc.);

Note: The HSR will not be provided with personal or medical information concerning any worker without that worker’s written consent.

(e) Allow HSRs to attend interviews concerning WHS between one or more workers (with their consent) and an inspector or another PCBU at the workplace (or their HSR). The HSR should be informed of any such interview and the HSR and worker may wish to consult before and/or after the interview;

(f) Provide HSRs with training, resources, facilities and assistance that are reasonably necessary to enable the HSR to exercise their powers and perform their functions under the Work Health and Safety Act;

(g) Allow a person assisting a HSR to have access to the workplace if it is necessary to enable the assistance to be provided.

Note: The Organisation:

i. Is not required to pay for a person who provides assistance to the HSR;

ii. Can refuse a person assisting the HSR access to the workplace if:

- They have reasonable grounds to do so; or

- The assistant has had their WHS entry permit revoked, or is currently suspended or disqualified from holding a WHS permit.

(h) Permit the HSRs to accompany an inspector during an inspection of any part of the workplace where a member of the HSR’s work group performs work;

(i) Provide any assistance to the HSR required by the Work Health and Safety Regulations;

(j) Allow the HSR as much time as is reasonably necessary to perform their powers and functions under the Work Health and Safety Act; and

(k) Pay HSRs performing their role the same amount they are entitled to receive when performing their normal duties.
4.6.4 Managers and Supervisors will make sure that HSRs are included in any consultation that affects or is likely to affect the health and safety of members of their work group.

4.6.5 The WHS Coordinator will make sure that an up to date list of HSRs and deputy HSRs is maintained and is readily accessible to workers:
   (a) On the Council intranet, and/or
   (b) On noticeboards when workers do not have ready access to a computer.

4.7. Specific consultation mechanism: Health and Safety Committee (“HSC”)

4.7.1 A HSC is a forum for consultation on the management of health and safety across the Organisation.

4.7.2 A HSC must be established if a request is made by 5 or more workers or a HSR.

4.7.3 The HSC must meet at least once every 3 months or at any reasonable time at the request of at least half of the HSC members.

4.7.4 HSC functions include:
   (a) Facilitating co-operation between the Organisation and workers in instigating, developing and carrying out measures designed to ensure the health and safety of workers;
   (b) Assisting in developing standards, rules and procedures relating to health and safety that are to be followed or complied with at the workplace;
   (c) Any other functions agreed by the SMT and members of the HSC;

4.7.5 The SMT, in consultation with workers, will make sure that procedures have been developed outlining the HSC Terms of Reference and include information relating to its specific function and the planning and conduct of meetings.

4.7.6 The Organisation will make sure HSC members are allowed to spend time during work hours as is reasonably necessary to attend Committee meetings and carry out functions as a member of the Committee, including to prepare for meetings and to report outcomes.

4.7.7 The Organisation will allow the HSC to have access to information it has relating to hazards and the health and safety of workers at the workplace but will not provide personal or medical information that does, or could, identify any worker to the HSC without that worker’s consent.

4.7.8 The WHS Coordinator will make sure that the following information is maintained and is readily accessible to workers on the intranet and/or on noticeboards when workers do not have ready access to a computer:
   (a) The HSC structure;
   (b) An up to date list of HSC members; and
   (c) Minutes of HSC meetings.

4.8. The Chief Executive Officer should make sure that, if the Organisation has both HSRs and a HSC, there is a clear distinction between their roles.

4.9. Specific consultation mechanism: Consultation with other PCBUs

4.9.1 Department Manager’s must, when engaging in work that involves (directly or indirectly) another PCBU, identify circumstances where there is a potential for the obligation for consultation to overlap between the parties.
4.9.2 The Organisation will consult, co-operate and co-ordinate activities with any PCBU whose workers undertake work for (or on the premises of) the Organisation or where those workers are, or are likely to be, directly affected by a matter relating to WHS arising from the Organisation’s functions or activities.

4.9.3 If the Organisation works with another PCBU:

(a) The processes for identifying and eliminating or, where elimination is not reasonably practicable, controlling health and safety risks will be documented in the contractual arrangements for the activity. This should include:

i. A documented requirement for parties to consult, co-operate and co-ordinate with the Organisation on health and safety matters;

ii. Risk management measures, including where risks cannot be eliminated, a description of when and how control measures are to be implemented and maintained; and

iii. Actions to make sure control measures complement each other and remain effective;

(b) Regular communication should occur between the parties;

(c) The Organisation will cooperate with reasonable requests from other parties to assist them in complying with their health and safety duties;

(d) The Organisation will co-ordinate with other parties so that each can meet their WHS duties effectively without leaving any gaps in health and safety protection. Where work is not effectively co-ordinated, the parties will consult further to determine what should be changed; and

(e) If there is disagreement between the Organisation and another PCBU as to the extent of consultation, co-operation and co-ordination of activities that is required, the Contract Superintendent will make sure the other PCBU(s) are aware of the contractual obligations for consultation, co-operation and co-ordination and enforce these as necessary.

4.10. Issue resolution

4.10.1 Agreed Procedure

The Organisation must ensure that any Agreed Procedure for issue resolution is set out in writing and is communicated to all workers to whom the agreed procedure applies. For a procedure to be an Agreed Procedure it will meet the following criteria:

(a) It will be agreed (this means that it is consensual and there has been genuine consultation and agreement between the Organisation, the HSRs and workers);

(b) It will not be imposed by one party or the other or arise out of a flawed process for reaching agreement, for example:

i. Where only a select group of workers were involved in developing the procedure, or

ii. Where agreement is reached through an unrepresentative process, for example not all HSRs or all HSC members or all relevant workers and their representatives were able to participate in the agreement process;

(c) It will outline a process or steps for resolving issues (not just set out what the outcome would be in specified circumstances); and

(d) It will relate to WHS issues and not a procedure that exists solely for other purposes (such as a grievance or complaint procedure) unless such a procedure is agreed to be utilised for WHS issues.
The Agreed Procedure must also be consistent with the Work Health and Safety Act and cannot remove the power of an HSR to issue a PIN or to exercise any other power that the Work Health and Safety Act gives a HSR.

4.10.2 A worker may raise a WHS issue with their Manager or Supervisor. When a WHS issue is raised, the Hazard Report Form should be completed.

4.10.3 To avoid doubt, nothing in this procedure prevents a worker from bringing a WHS issue to the attention of the worker’s HSR.

4.10.4 Department Managers and Supervisors will attempt to resolve any issue within the department in the first instance:

(a) As soon as a Manager/Supervisor has been informed of a WHS issue the parties must meet and communicate with each other to attempt to resolve the issues having regard to relevant matters including the following:
   i. The degree and immediacy of risk to workers or other persons involved in the issue;
   ii. The number and location of workers and other persons affected by the issue;
   iii. The measures (both temporary and permanent) that must be implemented to resolve the issue; and
   iv. Who will be responsible for implementing the resolution measures.

(b) The parties to a WHS issue must include:
   i. The Department Manager or Supervisor (note: a Supervisor involved in issue resolution must have an appropriate level of authority and be sufficiently competent to act for and behalf of the Department Manager);
   ii. A HSR, where one exists, or
   iii. If a HSR has not been elected, the worker or workers affected by the issue or their representative and
   iv. If other PCBU’s are involved, the PCBU or their nominated representative.

4.10.5 Details of the meeting should be recorded on the Consultative Meeting Record (Document #12.3.23.3).

4.10.6 The parties will make reasonable efforts to achieve a timely, final and effective resolution of the issue.

4.10.7 The Department Manager should make sure the issue is logged on the Hazard / Risk and Corrective and Preventative Action (CAPA) Register/s.

4.10.8 The Department Manager may consider consultation with other stakeholders external to the department to provide opportunities for resolution including:

(a) External expertise;
(b) HSC
(c) WHS Coordinator; and
(d) The LGAWCS.

4.10.9 Persons holding WHS entry permits may enter the workplace for the purposes of attending discussions with a view to resolving the issue.

4.10.10 Escalation: issue requiring escalation to the Chief Executive Officer
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<th>Version No.</th>
<th>3.0</th>
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<tr>
<td>Issued:</td>
<td>16 June 2010</td>
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<td>31 August 2016</td>
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<td>31 August 2019</td>
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(a) If the Department Manager determines that the issue is outside their scope or ability to manage, the matter will be referred to the Chief Executive Officer for direction.

(b) Outcomes of the Chief Executive Officer considerations will be documented in SMT meeting minutes and be reported to the HSC. The Department Manager will convey these considerations to all parties to the issue.

4.10.11 If the issue is resolved and any party to the issue makes a request then details of the issue and its resolution will be set out in a written agreement.

(a) If a written agreement is prepared, all parties to the issue must be satisfied that the agreement reflects the resolution of the issue.

(b) A copy of the written agreement will be given to:
   i. All parties to the issue; and
   ii. The HSC, if requested.

4.10.12 Issue not resolved

(a) If, after reasonable efforts, an issue has not been resolved, a party to the issue may ask SafeWork SA to appoint an inspector to attend the workplace to assist in resolving the issue.

   A party to the issue will notify the other parties to the issue of an impending decision to involve a SafeWork SA Inspector before that request to SafeWork SA is made.

(b) A request to SafeWork SA does not prevent:
   i. A worker from exercising the right to cease work; or
   ii. A HSR from issuing a PIN or a direction to cease work.

4.11. Ceasing work

4.11.1 A worker may cease, or refuse to carry out, work if they have a reasonable concern that to carry out the work would expose the worker to a serious risk to their health or safety, emanating from an immediate or imminent exposure to a hazard.

   (a) The worker should notify their Manager or supervisor as soon as practicable that they have ceased work, if work has ceased without the direction of a HSR;

   (b) The worker will remain available for suitable alternative work; and

   (c) The issue resolution procedure is to be commenced upon notification.

4.11.2 A HSR may direct work to cease if the HSR has a reasonable concern that to carry out the work would expose a worker to a serious risk to the worker’s health or safety, emanating from an immediate or imminent exposure to a hazard.

   A HSR may issue a PIN if they reasonably believe that a person is contravening or has contravened a provision of the Work Health and Safety Act 2012 in circumstances that make it likely that the contravention will continue or be repeated.

4.11.3 The HSR will inform the Department Manager as soon as work has ceased.

   (a) The Department Manager is responsible for communicating the situation to the Chief Executive Officer and following their directives.

   (b) The issue should be investigated and a permanent resolution implemented wherever possible.

   (c) The Department Manager should make sure the issue is logged on the Hazard / Risk and CAPA Register/s.
4.11.4 If the issue has not been resolved to the satisfaction of the HSR or management, a SafeWork SA Inspector may be requested to attend to resolve the matter relating to cessation of work.

4.12. Monitoring and evaluation

4.12.1 The WHS Coordinator should monitor and maintain the currency and accessibility of WHS information across the Organisation.

4.12.2 Department Managers should monitor the flow of WHS information and review the effectiveness of the consultation and communication activities that occur within their department. This includes regularly checking that:

(a) Meetings are held regularly where WHS is discussed;
(b) Evidence demonstrates consultation has occurred where workers have been directly affected by a WHS matter;
(c) Relevant WHS information has been communicated to relevant Managers, Supervisors and workers;
(d) The roles and responsibilities for the shared management of health and safety risks when working with other PCBUs have been documented and are being implemented; and
(e) The currency of relevant WHS legislative information and system documentation is maintained within the department.

4.12.3 The HSC should monitor and review consultation and communication processes at least annually during its meetings. A report will be presented to the SMT listing outstanding items requiring direction or enforcement.

4.12.4 The SMT will regularly review hazard and incident statistics, audit results, legislative changes and other information relating to the Communication and Consultation Procedure and direct action when required. Minutes will record outcomes of discussion and actions undertaken.

4.12.5 The Communication and Consultation Procedure should be subject to internal audit and form part of the ongoing management review process.

4.12.6 The SMT may set, monitor and review objectives, targets and performance indicators for communication and consultation, as relevant.

5. Training

5.1. All workers should have the Communication and Consultation Procedure explained to them during the induction process including the role of the HSR and the HSC.

5.2. The Organisation will provide HSRs and Deputy HSRs with the opportunity to undertake the training as prescribed in the Work Health and Safety Act 2012, Section 72, (i.e. 5 days in the first year (Level 1) as a HSR, 3 days in the second (Level 2) and 2 days in the third year (Level 3), with this sequence repeating in subsequent terms that a HSR serves).

5.3. Training for HSC members may be considered to enable effective Committee functioning.

6. Records

Records of consultation and communication will be maintained. Records include, but are not limited to:

6.1. SMT, department, team, toolbox meeting minutes and agenda (as relevant);
6.2. Records relating to specific consultation activities - emails, reports of work groups etc.;

6.3. Records related to HSC formation and Terms of Reference;

6.4. HSC Agenda and Minutes;

6.5. Records related to the establishment of workgroups and elections of HSRs;

6.6. Records related to shared activities with other PCBUs; and

6.7. Training records.

All records will be managed in line with the current version of General Disposal Schedule 20 for Local Government.

7. Responsibilities

7.1. The Chief Executive Officer is accountable for:

7.1.1 Monitoring and making sure that WHS legislative compliance is maintained;

7.1.2 Implementing measures that ensure the requirement for WHS consultation is embedded into all Council activity;

7.1.3 Approving reasonably practicable expenditure necessary for effective communication and consultation;

7.1.4 Overseeing the election and maintenance of the HSC;

7.1.5 Making sure that if the Organisation has both a HSC and HSRs, there is a clear distinction between their roles;

7.1.6 Making sure that the HSC and elected HSRs have documented roles and responsibilities;

7.1.7 Holding all persons and consultative bodies with a responsibility for WHS communication and consultation accountable for their actions;

7.1.8 Making sure that WHS is a regular meeting agenda item within each department and at SMT meetings; and

7.1.9 Making sure that the requirements of the Performance Standards for Self Insurers are met.

7.2. The Senior Management Team is accountable for:

7.2.1 Nominating a responsible person to oversee WHS communication and consultation;

7.2.2 Establishing work groups, where required;

7.2.3 Making sure that WHS information is communicated to workers and their representatives directly affected by a WHS matter, any feedback is considered and decisions are communicated in a timely manner;

7.3. Department Managers and Supervisors are accountable for:

7.3.1 Making sure workers are provided with information about the Organisation’s communication and consultation processes during induction;

7.3.2 Discussing WHS as a standard item in relevant department meetings and holding regular department meetings;

7.3.3 Consulting with workers directly affected by a WHS matter, their representatives and/or the relevant HSR (if elected), so far as is reasonably practicable;
7.3.4 Providing information to workers regarding any changes to work, the workplace or other issues that may affect their WHS;

7.3.5 Encouraging and supporting active participation in consultative processes;

7.3.6 Making sure that WHS information is presented and communicated in a way that can be easily understood by workers, taking into account any language and literacy needs of the workers;

7.3.7 Providing HSRs and HSC members with sufficient time to undertake their roles effectively;

7.3.8 Making sure consultation outcomes are documented and forwarded, where appropriate, to the HSC and/or SMT;

7.3.9 Making sure relevant information from the HSC and/or management is communicated and discussed within the department;

7.3.10 Advising workers and others of final outcomes of any decisions affecting WHS in a timely manner;

7.3.11 Making sure contractual agreements document the shared WHS responsibilities when the Organisation works with other PCBUs on shared jobs; and

7.3.12 Making sure the contractual agreements for shared WHS responsibilities when working with other PCBUs are complied with.

7.4. The Office Manager is accountable for:

7.4.1 Overseeing the election and provision of training for HSRs;

7.4.2 Assisting in the development of role, responsibility and accountability statements for the HSC and HSRs and making sure that if the Organisation has both a HSC and HSRs, there is a clear distinction between their roles;

7.4.3 Notifying the SMT of outcomes from communication and consultation processes;

7.5. The WHS Coordinator is accountable for:

7.5.1 Maintaining the currency and distribution of WHS information across the Organisation; and

7.5.2 Making sure that incoming WHS information is communicated to relevant persons.

7.6. Workers are accountable for:

7.6.1 Participating in department meetings and other consultative forums;

7.6.2 Providing comment/feedback when requested within the specified timeframe; and

7.6.3 Co-operating with the Organisation’s policies and procedures relating to communication and consultation.

7.7. The Health and Safety Committee (HSC) function is to:

7.7.1 Comply with its Terms of Reference;

7.7.2 Facilitate communication and consultation between the Organisation and workers in instigating, developing and carrying out measures designed to ensure the workers’ health and safety at work.

7.8. Health and Safety Representatives (HSR) function is to:

7.8.1 Comply with their legislative functions as outlined in the Work Health and Safety Act and Regulations 2012;

7.8.2 Make representations on WHS matters affecting their work group;
WHS Communication and Consultation Procedure

7.8.3 Consult with Managers and Supervisors and in relation to WHS matters affecting their work group; and

7.8.4 Assist in the resolution of WHS matters affecting their work group.

8. Review

8.1. The WHS Communication and Consultation Procedure will be reviewed by the HSC in consultation with the SMT, workers or their representatives, every thirty six (36) months, or more frequently where legislation or Organisational needs change. This may include a review of:

8.1.1 Feedback from Managers, workers, HSRs, HSC members or other relevant stakeholders;
8.1.2 Legislative compliance;
8.1.3 Performance Standards for Self Insurers (PSSI);
8.1.4 Internal or external audit findings; and
8.1.5 Any other relevant information.

8.2. Results of reviews may result in preventative and/or corrective actions being implemented or revision of this document.

8.3. The WHS Coordinator shall report on the outcomes of such reviews to the HSC and SMT.

9. References

Work Health and Safety Act 2012
Work Health and Safety Regulations 2012
State Records Act 1997
General Disposal Schedule 20 for Local Government
ReturnToWorkSA’s Performance Standards for Self-Insurers
Worker Representation and Participation Guide
Code of Practice: Work Health and Safety Consultation, Co-operation and Co-ordination

10. Related documents

WHS Communication and Consultation Policy (Document number 12.3.23)
Resolution of WHS Issues Flowchart (Document number 12.3.23.2)
Consultative Meeting Record (Document number 12.3.23.3)
HSC Terms of Reference (Document number 12.3.24)
WHS Hazard Management Procedure (Document number 12.3.7.3)
Hazard / Risk Assessment Register (Document number 12.3.7.3.5)
Hazard Report Form (Document number 12.3.7.4.4)
CAPA Register (Document number 12.3.16.5.1)
Relevant HSR procedures, e.g. when a HSR issues a PIN
WHS Contractor Management Procedure (Document number 12.3.25.1)
**WHS Communication and Consultation Procedure**

**Version No:** 3.0  
**Issued:** 16 June 2010  
**Reviewed:** 31 August 2016  
**Next Review:** 31 August 2019

**SIGNED:**  
Chief Executive Officer  
Chairperson, Health and Safety Committee  
Date: ____/____/_____  
Date: ____/____/_____

11. **Document Review History**

<table>
<thead>
<tr>
<th>Document History:</th>
<th>Version No:</th>
<th>Issue Date:</th>
<th>Description of Change:</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.0</td>
<td>Dec 2009</td>
<td></td>
<td>New Document.</td>
</tr>
<tr>
<td>2.0</td>
<td>08/07/13</td>
<td></td>
<td>Terminology changes to reflect 2012 Work Health and Safety Act, Regulations and Codes of Practice. Examples of changes include; OHS to WHS, employee to worker and employer to PBU where appropriate Inclusion of requirements regarding shared duties with other PCBU’s for coordination and cooperation as well as consultation.</td>
</tr>
<tr>
<td>3.0</td>
<td>25/04/16</td>
<td></td>
<td>References to WHS Committee (WHSC) amended to Health and Safety Committee (HSC) for consistency with Work Health and Safety Act and Codes of Practice; Removal of WHSC involvement in issue resolution; Inclusion of Senior Management Team within the Consultation Process; formatting &amp; language</td>
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