O.H.S.

VICTORIAN TRADES HALL COUNCIL

HSR CONFERENCE 2022

LIFESAVERS

CONFERENCE PROGRAM & WORKBOOK

Slater Gordon Lawyers

Fighting for the rights of Unions and their members for 85 years.

We fight to achieve the best outcomes for our clients, while reducing the stress they go through to obtain their compensation.

With our No Win. No Fee* offer for Personal Injury Law and a Free Initial Appointment, you can afford access to the justice you deserve.

If you've been injured or suffered a loss, ask your Union for a referral to Slater and Gordon Lawyers.

Ask your union rep about our exclusive Union member benefits.

*NWNF T&C's: slatergordon.com.au/NWNF
**Free appointment T&Cs: slatergordon.com.au/FIA

CONFERENCE PROGRAM

SESSION 1 - 90 MINUTES (8:30AM – 10:00AM)

Welcome to Country

Luke Hilakari

Colin Radford

Ingrid Stitt

Q&A

Panel 1 – *HSRs Keynote Presentation*

Hear from 3 HSRs as they share their stories in addressing COVID-related and psychosocial hazards in their workplaces.

Q&A

MORNING TEA BREAK 10:00AM – 10:30AM

SESSION 2 – 105 MINUTES (10:30AM – 12:15PM)

10:30am-11:15am Professor Ben Cowie
COVID-19 in Victorian workplaces and the role of HSRs in reducing its spread

Professor Benjamin Cowie is an infectious diseases physician and epidemiologist, with appointments at the Royal Melbourne Hospital and the Doherty Institute. In addition, Ben serves as Acting Chief Health Officer in the Department of Health, Victoria.

He is a Professorial Fellow in the Department of Infectious Diseases, Melbourne Medical School. During the COVID-19 pandemic, Ben has supported the Victorian Government's responses with a focus on community engagement, clinical care for people living with COVID-19, control of community transmission of infection, and in helping establish Victoria's COVID-19 vaccination program.

11:15am-12:15pm Panel 2 – *Creating Psychologically Health Workplaces*

The ACTU, AMWU, AWU and CPSU have run pilot programs under the WorkWell Mental Health Improvement Fund. Representatives from these unions will discuss their projects and key lessons and insights that have been gained to assist HSRs in identifying and negotiating controls to psychosocial hazards in the workplace.

LUNCH BREAK 12:15PM – 1:00PM

SESSION 3 – 90 MINUTES (1:00PM – 2:30PM)

Breakout Sessions

Breakout sessions are an opportunity to debrief the day, apply skills and ideas, and give HSRs an opportunity to ask questions around issues that they may encounter upon returning to work

Some breakout sessions will be run by unions for their members. Others will be for those HSRs who have not identified an affiliated union. Check signage on the day for your breakout room.

WORKSHEET 1 - DEBRIEF

1. THE KEYNOTE SPEAKERS

a. What were some of the key themes that were mentioned?

_____

_____

b. Was there anything that stood out for you?

_____

_____

_____

2. THE HSRS PRESENTATION

a. What were the hazards affecting the workers, and what were the consequences of leaving that hazard inadequately controlled?

_____

_____

_____

b. What do you think worked in their approach?

_____

_____

_____

c. Is there anything you would do differently? If so, why?

_____

_____

_____

d. What are the lessons that can be taken from the way these HSRs carried out their role?

_____

_____

_____

3. REFLECTING ON PROFESSOR BEN COWIE'S PRESENTATION:

a. What is the most useful thing you've learnt?

_____

_____

b. Are there any controls or measures you will speak to workers and your employer about on your return to ensure your workplace is COVIDsafe?

_____

_____

c. Do you have any follow up questions that weren't answered?

_____

_____

4. THE WORKWELL Q&A PANEL DISCUSSION

a. Is there anything the panellists or other speakers said today that stood out for you? Why?

_____

_____

b. What is the most useful thing you've learnt?

_____

_____

c. Is there anything you can take back and apply at your workplace?

_____

_____

d. Do you have any follow up questions that weren't answered?

_____

_____

5. The conference has addressed both psychosocial hazards and the COVID-19 response. What links did you identify between these two topics?

_____

_____

WORKSHEET 2 - WORKPLACE REFLECTION

This year we would like HSRs to focus on psychosocial hazards in their workplace, including those hazards precipitated or exacerbated by COVID-19.

1. Can you think of any psychosocial hazards present in your workplace that may pose a risk to psychological health?

_____

_____

_____

_____

2. We know that in recent years claims for psychological injuries are the fastest growing category of WorkCover claims. Why do you think this is happening?

_____

_____

_____

_____

3. How do you/how would you know that psychosocial hazards are present in your workplace? What are some of the signs or evidence you might look for?

_____

_____

_____

_____

4. Are psychosocial hazards controlled in your workplace? If so, how are they controlled? Are these controls working?

_____

_____

_____

_____

5.   How are these hazards currently affecting members of your DWG and other workers?

_____

_____

_____

_____

6.   How do you think the hierarchy of control and prevention plans in the proposed Psychological Health Regulations will be useful in advocating for a heathier workplace?

_____

_____

_____

_____

7.   What are some higher order controls that could be implemented to tackle psychosocial hazards on site?

_____

_____

_____

_____

8.   As a HSR trying to address psychosocial hazards on site, who could you get help and support from?

_____

_____

_____

_____

_____

_____

WORKSHEET 3 - CASE STUDY

You are an HSR at the local supermarket. One of the workers in your DWG, Narelle, has been working as a casual for the last three years, but usually gets full time hours.

During the pandemic lockdowns, your workplace continued to operate as normal. Narelle lives with her grandparents who are in a high-risk category for COVID so she was very careful to make sure she took steps to stay as safe as possible, including wearing a mask whenever she was out the house. As the pandemic wore on, a lot of her co-workers started to wear their masks on their chins, or not at all. Some time ago, whilst the mask mandate was still in place, WorkSafe inspectors visited the site about the lack of compliance with COVID measures. Co-workers report that the managers did not look happy after that meeting.

Someone started a rumour that it was Narelle who called WorkSafe, and since that time she feels that she is being treated differently by a group of her co-workers. She tells you that she has seen them whispering whilst looking for her. Whenever they walk past her they exaggeratedly pull their masks up and ask her if they are wearing it right before pulling it back down and laughing as soon as they are past her.

She recently spoke to her supervisor Colin about this, but Colin didn't seem interested in helping. He told her to suck it up and if she wanted to run around dobbing people in, she should expect blowback. Narelle also had her next two shifts cancelled after this conversation, despite absences, meaning the store was always short staffed. Since she returned she has worked every shift on the registers, whereas before she was rotated around different roles. Colin knows that she does not like to work on the register as it requires dealing with members of the public and some people have been very aggressive about her continuing to wear a mask whilst serving them.

QUESTIONS

1. What psychosocial hazards can you identify?

_____

_____

_____

2. What about COVID Safe breaches?

_____

_____

_____

3. What are the employer's duties under the current OHS laws? How do you think the proposed Regulations may assist?

_____

_____

_____

4. What are some control measures that should be considered to prevent or reduce the effects of these risks on Narelle's psychological health?

_____

_____

_____

5. What would you as the HSR do?

_____

_____

_____

6. Who else should Narelle speak to?

_____

_____

HSR TOOL - HAZARD SURVEY

Psychosocial hazard survey

Studies show that the hazards listed below are very strong predictors of the overall mental health of a workplace. Not all industries and workplaces will encounter all hazards, so identifying the hazards to which you and your co-workers are most exposed is the first step to create a tailored plan for improving the psychosocial wellbeing in your workplace.

This survey is designed to by anonymous and link in with the example hazards in the proposed Psychological Health Regulations. It helps you identify broader trends in your workplace by identifying hazards that are deeply felt and widely felt.

To fill out the survey below, rank each factor on a scale of 1 to 5 according to how severe a problem that thing is in your workplace, by circling the number you want. 1 means not a problem at all, 5 means it is a serious problem.

Bullying
(Repeated unreasonable behaviour)

1   2   3   4   5

Gendered Violence including Sexual Harassment
(Gender or LGBTQIA+-based harassment)

1   2   3   4   5

Exposure to Occupational Violence and Aggression
(For example, co-workers, customers, patients, managers)

1   2   3   4   5

Exposure to Traumatic Events and Content
(Either as an expected part of your role or not)

1   2   3   4   5

High Job Demands
(High levels of sustained or repeated physical, mental or emotional effort)

1   2   3   4   5

Low Job Demands
(Low levels of sustained or repeated physical, mental or emotional effort)

1   2   3   4   5

Low Job Control
(Little or no say over how work is carried out)

1   2   3   4   5

Poor Support
(Either from co-workers or managers)

1   2   3   4   5

Poor Organisational Justice
(Unfair or inconsistent use of policies or procedures, or a lack of procedural fairness)

1   2   3   4   5

Low Role Clarity
(Unsure of expectations, requirements e.g. frequent changes to tasks and work standards or where important information is not made available)

1   2   3   4   5

Poor Environmental Conditions
(Exposure to poor quality/hazardous working environments)

1   2   3   4   5

Isolated or Remote Work
(Especially for long periods of time)

1   2   3   4   5

Poor Organisational Change Management
(When change related to an employee's work conditions is managed or communicated poorly)

1   2   3   4   5

Low Recognition and Rewards
(Low level of acknowledgement, reward, or recognition for employee's contributions, achievements and efforts)

1   2   3   4   5

Poor Workplace Relationships
(Negative interactions at low intensity e.g. incivility, sarcasm, mocking or social exclusion, and, if unaddressed, can escalate into more damaging interactions)

1   2   3   4   5

Insecure Work
(High levels of casual/fixed term/labour hire workers. Workers unable to plan or budget for the future)

1   2   3   4   5

Fatigue
Caused for example by long shifts, shift work or high cognitive demands over a sustained period of time)

1   2   3   4   5

Intrusive Workplace Surveillance
(Excessive monitoring of emails, key strokes, calls, CCTV or trackable devices etc to manage performance)

1   2   3   4   5

USING THE SURVEY

This survey:

- Allows members of your DWG to raise their concerns anonymously
- Allows everyone in the DWG an opportunity to participate
- Identifies hazards that are deeply and widely felt
- Note that a small cluster of '5's, under certain hazards (e.g. sexual harassment) may still be a red flag that something is wrong and would need further investigation.
- Gives HSRs an evidence base to make a case there are inadequately controlled psychosocial hazards in the workplace
- Adds to employer's state of knowledge, and therefore their obligations to eliminate or control the risks so far as is reasonably practicable (see s.20 OHS Act, what is reasonably practicable depends on what is known or ought reasonably to be known)
- Links in to the examples of psychosocial hazards contained in the proposed Psychological Health Regulations

CALCULATING THE RESULTS

The way to use this survey test is a simple averaging exercise. Essentially someone needs to add each the scores from each hazard and then divide by the number of surveys.
i.e. 10 surveys distributed and returned. Under the heading people gave the following scores:

SURVEY NO.	BULLYING SCORE	SEXUAL HARASSMENT SCORE	HIGH JOB DEMANDS SCORE	ETC.
1	2	1	5	
2	5	2	4	
3	3	2	5	
4	4	1	4	
5	5	2	4	
6	4	1	4	
7	5	2	2	
8	1	3	4	
9	5	1	5	
10	4	5	5	
total	**38**	**20**	**42**	

Bullying: 38 (total) divided by 10 (surveys) = averaged score of 3.8

Sexual Harassment: 20 (total) divided by 10 (surveys) = averaged score of 2.0

High Job Demands: 42 (total) divided by 10 (surveys) = averaged score of 4.2

VICTORIAN TRADES HALL COUNCIL
Wurundjeri Woi Wurrung Country
Ground Floor, Old Building, Trades Hall,
Cnr. Victoria and Lygon St Carlton VIC 3053

Phone: (03) 9659 3511 Email: info@vthc.org.au
www.weareunion.org.au

ohsrep.org.au

Ask Renata

Join a union