

Welcome to the **49th** edition of the **Work Health Safety News Bulletin**

NEW APPOINTMENT HUMAN RESOURCE COORDINATOR



Meercroft Care Inc. is pleased to announce the appointment of **Jacqui Surtees** (*picture above*) to the position of Human Resource Coordinator.

Jacqui, who has an extensive background in **HR**, will be responsible for staff recruitment and associated records, as well as the management of workers' compensation claims.

Jacqui will also assist in the coordination of staff education/training programs.

FLU VACCINATIONS

Confirmation has been received from Terry White Pharmacy that influenza vaccinations will be available to staff **in-house** at the end of March 2018.

The cost of same will be subsidized by the Board of Governance as on previous occasions.

Given the events stemming from the 2017 flu season, staff are encouraged to immunize against same.

Senior representatives (3) from Meercroft Care Inc. will also be attending an **Influenza in Aged Care Workshop** at Campbell Town in March 2018 hosted by DHHS, Public Health Services.

STAFF YEARS' OF SERVICE RECOGNISED

At the staff Christmas function held in the Multi-Function Room on December 19th 2017 our CEO/DON, Wendy Shearer presented the following staff with a **Certificate of Service** in recognition of their dedicated and valuable years of service to the Home.



Name	Current Position	Service
Melanie Muir	Registered Nurse	25 years
Kevin Garguilo	Extended Care Assist'	25 years
Christine Stevens	Services Employee	25 years
Kim Banks	Services Employee	20 years
Debra Tetonga	Enrolled Nurse	15 years
Jo Bellchambers	Extended Care Assist'	15 years
Nicole Evans	Extended Care Assist'	10 years
Jean Stones	Admin Employee	10 years
Leah Roney	Services Employee	10 years
Suzanne Horne	Registered Nurse	5 years
Robyn Hind	Enrolled Nurse	5 years
Jodie Jolly	Enrolled Nurse	5 years
Judith Robson	Enrolled Nurse	5 years
Zanna Duggan	Extended Care Assist'	5 years
Patricia Denby	Extended Care Assist'	5 years
Lyndy Keeler	Extended Care Assist'	5 years
Sage Lamprey	Extended Care Assist'	5 years
Shanee Sharman	Extended Care Assist'	5 years
Paul Tripptree	Extended Care Assist'	5 years
Christopher Turner	Extended Care Assist'	5 years
Anne Townsend	Extended Care Assist'	5 years
Roslyn Upton	Extended Care Assist'	5 years
Amanda Rayner	Admin Employee	5 years
Shirley Broderick	Service Employee	5 years
Stephen Booth	Service Employee	5 years
Lisa Jacklyn	Service Employee	5 years
Beverley Nash	Services Employee	5 years
Kim Nicolle	Services Employee	5 years

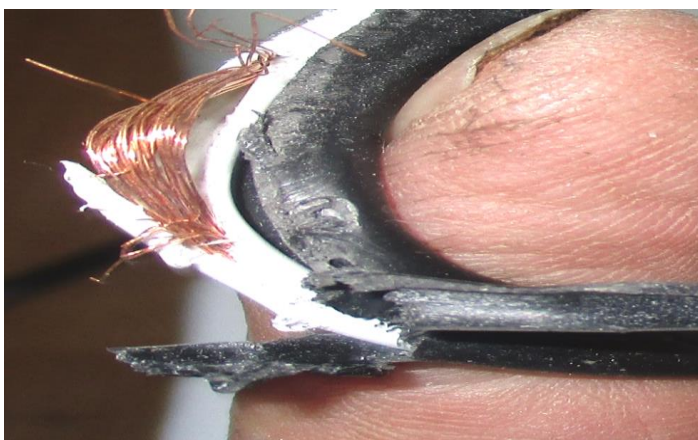


INCIDENT / HAZARD

During a routine training exercise, involving the use of an electrically operated low-line bed, it was discovered that an electrical cord leading from a transformer plugged into the power point had been severely damaged.

Upon inspection it was duly noted that the cord had been wrapped around the bed frame, whereas the cord should have **remained free / controlled**.

Each time the bed was raised, the cord pulled tight causing the outer covering on the cord to be severed, thereby exposing the wires in the process as *pictured below*:



If staff see anything like this, please report immediately!
DO NOT TOUCH!

ORNAMENTAL WATER WALL FEATURE

Concern was raised recently by a staff member re the possible risk of **waterborne bacteria legionella** developing in the ornamental water wall feature located in the airlock at the Main Front Entrance.

The matter was subsequently investigated resulting in the following outcome - *reference: IHF048*.

► lighting used is not submerged and the LED used is of very low heat.

According to the guidelines the bacteria will only reproduce at temperatures of between 68 F and 122 F [P 3 of the "Guidelines for Control of Legionella in Ornamental Water Features"}] reference:2005 Legionella Risk Management, Inc. www.legionellae.org

The temperature of the water taken at 2 different points [the water wall face and tank] was **63.5 F – 4.5 degrees below** the "breeding temperature" for legionella.

For legionella to grow in an ornamental feature, the legionella bacteria must be present in the supply water or aerosolized legionella must enter the feature from another source.

Given all of the above information, it is reasonable to suggest that waterborne bacteria legionella developing in the ornamental water wall feature would be **low risk!**

HIERARCHY OF CONTROL

The Hierarchy of Control is a list of control measures, in priority order, that is used by Meercroft Care Inc. as standard practice to eliminate or minimize exposure to the hazard pending investigation.

It consists of two levels. Consider elimination before all other options.

LEVEL 1

1st Priority **Elimination of Hazard**



LEVEL 2

Minimisation Options which substantially reduce the risk.

2nd Priority **Substitution**

3rd Priority **Engineering**

4th Priority **Administration**

Last Priority **Personal Protective Equipment (PPE)**

BANKSIA SECURE UNIT

A series of recent incidents / near misses in the Banksia secure unit has prompted the following action:



Pictured above top right hand corner: locable cupboard installed in Banksia main communal toilet to illievate items being flushed down toilet.



*Pictured above: **telephone cradle** affixed to wall (LHS) in Banksia kitchenette to restrict easy access to non-staff personnel.*

“TRIANGULATION” IN THE WORKPLACE

When we have disagreements or disappointments at work, we all know that we should address them constructively and as soon as possible with the person with whom we have the conflict. But this doesn't always happen. Instead, we tend to share those situations with someone other than the person with whom we are upset. Often, we do this because we just want to vent or justify or stand. When we do this, we are engaging in a communication phenomenon called triangulation.

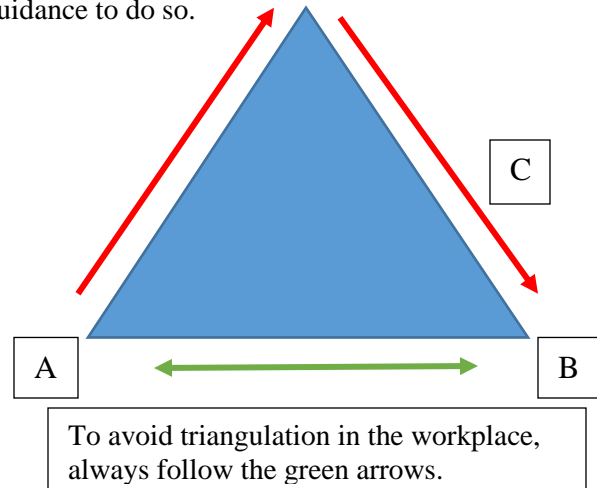
When you triangulate with people at work, you complain about someone without a commitment to resolve the matter directly; it does not drive change or allow you to solve the conflict. Instead, triangulation can drag you and your team down because it:

- Wastes valuable time.
- Reinforces your upset and can make you feel more exhausted – it can drain your inspiration and creativity and takes you even further away from a reconciliation with the person you are in conflict with.
- Almost always gets back to the person with whom you have the conflict with, causing them to distrust you and deepen the rift between you.
- Allows the problem to persist – when you go to a third party instead of the person you have conflict with, you cannot identify the true cause of your anger or disappointment and generate a solution that allows you both to move forward.

Most of us do not engage in triangulation to be hurtful, or because we think it is ok to gossip – we do it because we don't know how to address the conflict effectively. If you are unsure of how to address your concerns, you could use some of the following conversation starters:

- I am not sure that you are aware that ...
- I wanted to be sure you were aware of the expectation that we ...
- I have an expectation and I'm not sure that I have communicated it clearly to you ...
- I expected ..., but experienced ... and wanted to get your input on why that is

In some cases, you may need to take the issue to your team leader or management because you feel the situation warrants their involvement, you want coaching on how to handle the matter, or your previous attempts to resolve the conflict yourself have not been successful. In such cases, this is not triangulation because you are committed to driving a resolution to the conflict and you are seeking guidance to do so.



Article by: Jennifer Wilson, of Convergence Coaching

COMPLIANCE WITH ORGANISATIONAL POLICIES AND PROCEDURES

From the beginning it is important to understand what is meant by the terminology policies and procedures and their differences.

Policy and Procedures – What is the Difference?

- ▶ **Policies** are the business rules and guidelines of a company that ensure consistency and compliance with organisation's strategic direction. The Policies lay out the business rules under which an organization, division, or department will operate.
- ▶ Policies are the guidelines under which Procedures are developed. There is not a one-to-one relationship between Policy and a Procedure. Policies are not part of the Procedure, because they cannot be properly structured. However, the Procedure must reflect the organization's rules contained in the Policies.
- ▶ Policies address **what** the Policy is and its classification, **who** is responsible for the execution and enforcement of the Policy, and **why** the Policy is required.

Whereas;

- ▶ **Procedures** define the specific instructions necessary to perform a task or part of a Process. Procedures can take the form of a work instruction, a desk top Procedure, a quick reference guide, or a more detailed Procedure.
- ▶ Procedures usually are structured by subject (for example, system instructions, report instructions, or Process tasks). A Procedure usually addresses only a single task. This separation enables Procedure components to be compiled into special Procedure manuals for specific audiences, end users, and purposes.
- ▶ Procedures detail **who** performs the Procedure, **what** steps are performed, **when** the steps are performed, and **how** the Procedure is performed?

As detailed above **both** components play an intergral part in creating the policy document.

Assuming a particular policy has been approved and adopted by the **PCBU** (person conducting the business undertaking) and or their officers; all **officers, workers and others**, who are directly and or indirectly effected by the said policy at the workplace have a statutory obligation to adhere to the contents contained therein under *section 29* of the *WHS Act 2012*.

Generally all policies and procedures at Meercroft Care Inc. must be reviewed **no less** that 3 yearly. Notwithstanding, some policies are reviewed more frequently.

Compliance with organisational policies and procedures is an essential part of the day-to-day operation of the Home.

Their success depends largely on consultation, cooperation and coordination, implementation, access to the policy, education and training. Memorandums as well as ongoing feedback i.e. unit meetings, news bulletins and newsletters.

Compliances can be measured in numerous ways. For example: key performances indicators (KPIs) re the collation of monthly incident, accident, hazard reports and the dissemination thereof. Also by other reporting processes i.e. meeting minutes, observations, work practices, audits, suggestions and complaints etc.

ORGANISATION (PCBU) NON-COMPLIANCE

In the case of a WHS non-compliance of the organisation's own policies and procedures the following actions may be taken against the organisation.

Notwithstanding, some policies are also linked to the various *Acts* and *Regualtions* and therefore the organisation may come under greater scrutiny if it was found to be non-compliant.

Namely:

Health and Safety Representative (HSR) – direct work to cease / issue a Provisional Improvement Notice.

The Regulator – Improvement Notice / Prohibition Notice / Penalty.

Australian Aged Care Quality Agency – sanctions.

EMPLOYEE NON-COMPLIANCE

In the case of an employee WHS non-compliance of organisational policies and procedures the following action may be taken against the employee.

Namely:

Investigation / consultation / reprimand / first warning / second warning / final warning / dismissal

WORKER i.e. Contractor

PCBU response

The Regulator



Work Health Safety Committee 2018