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OHSA Inc. COMMITTEE 2026

EXECUTIVE

President Lance Keys - Anglo American T&S Services
Joint Vice Dr Amy Bright - OMEMA
 President Sharon Stratford- Retired & Passionate
 Secretary Ali Martins – OH&S Consulting
 Treasurer Peter Nicholls – Mine Safety & Training

COMMITTEE

Dr KC Wan – Occupational Physician
 Dr Celine Murphy – CMC
 Nandy Blay – PhD Student/WorkSafe WA
 Dr Cathal Ahern – Alcoa Kwinana
 Sandra Smith – Contract Injury Mgmt Consul'nt
 Vishali Mohan – PR Consultant

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Report from the Editor



Welcome to our first edition of the Monitor for 2026. I am sure that you all survived the festive/holiday season with aplomb and is now a distant memory. But are you surviving and thriving

in the heat? Thank the Lord for Air Con. is my catch cry! Check the varying state approaches to our increasing heat waves [In HEALTH](#).

2026 is going to be very exciting! We have a **new, energised committee** hailing from diverse OSH backgrounds (*refer to meet the committee*) who are actively exploiting their established networks to market OHSA, plan new meaningful and topical events, bring in new members and heighten OHSA Inc. communications.

As our new joint Vice President – Sharon Stratford posted in Linked In:

"We have kicked off 2026 with our new OHSA Committee holding their first meeting where we robustly discussed our strategy for 2026 under incoming President Lance Keys. The strategy focuses on enhancing connections for members around occupational health fundamentals including an 'It Pays to Care Community of Practice' in WA."

Sharon has also successfully canvassed Rebecaa Harris from **Workcover WA** and secured **\$5000 sponsorship** for It Pays to Care Community of Practice events.

Watch out for more including our first event of the year **"Out of Africa" - the Challenges we Face in Safeguarding Health in Africa and Beyond**, AND our first

joint **Community of Practice with IPTC** in May. Check out our [FUTURE OSHA EVENTS](#) for further details.

Our President has been very busy and has coopted a PR Consultant to the Committee and engaged a website designer to **invigorate and relaunch our website** and communications through social media. This work is a very much overdue and you as members will reap the rewards whilst also increasing the profile of OHSA. Items such as seamlessly paying renewals online with auto notifications; increasing search functionality so users can find articles from past Monitor magazines by topic; mobile compatibility; member only access to the Membership Directory & generally improving the look, intuitiveness and functionality. Watch this space.

At the **2025 AGM** on the 4th of December, we were privileged to benefit from a fantastic presentation by one of our Corporate Members, Abbotts Wealth Management and Personal Insurance – **"Financial Health in Retirement – Do you have Enough"**. Please refer to [In Events](#) for an overview of what pearls of wisdom attendees received, questions asked and answered, further food for thought and some happy snaps.

In 2026, OHSA will make a concerted effort to target Student Membership, through the **Student Award for Excellence**. This will be open to all OSH related studies whether undergraduate or postgraduate. Currently we are actively refining our criteria for the Award – watch this space.

So, it is all systems GO! Happy reading and Play Safe,

A. M. Martins

Alison Martins
Editor/Secretary

Meet the 2026 Committee



THE EXECUTIVE

The OHS Inc. 2026 Committee Hard at Work

President – Lance Keys

Lance is a passionate Health and Safety professional with a long history in the mining and minerals exploration space. He is part of Anglo American's Discovery & Geosciences team, where he combines subject matter expertise with a people first approach to help create safer, more effective ways of working. Lance is based in Perth, but a lot of his work spans different countries and functions — from occupational health and risk management to emergency preparedness and contractor safety.

Over the past 13 years with Anglo American, he has built deep experience across global exploration drilling safety, geophysical survey safety, vehicle and driver safety, remote work safety, aviation, and workforce health. He has enjoyed a great mix of learning, collaborating, and applying a practical, risk based approach to some of the company's highest risk activities in some of the most remote corners of the world. Lance holds Post Grad qualifications in OSH.



Joint Vice President – Dr Amy Bright

Dr. Amy Bright is a highly qualified Occupational Physician, who is a fellow of the Australasian Faculty of Occupational and Environmental Medicine. She has extensive experience in employment-related medical assessments and health standards, health surveillance, injury management, rehabilitation, and medico-legal assessments, including international and global experience.

She has a background in physiotherapy and holds a postgraduate diploma in Occupational Health and Safety. Dr. Bright is dedicated to providing high-quality medical services and promoting the health and well-being of individuals in the workplace.

Amy is a dynamic and down to earth speaker who regularly is requested to speak at conferences.



Joint Vice President – Sharon Stratford

Sharon has over 30 years of experience in workers' compensation insurance and injury management. During most of this time, she held various senior leadership roles at WorkCover Queensland but has also in more recent years been Lead Advocacy Advisor for It Pays to Care while based in Perth. Her tertiary qualifications include physiotherapy, business systems, policy and management.

Sharon's was awarded the national PIEF award for outstanding contribution to the personal injury industry in 2021. Despite being retired now, she is still passionate about injury prevention and management as well as travelling the world.



Secretary – Ali (Alison) Martins

Ali has over 40 years of experience in safety and health management of which 31 years have been as the Principal Consultant of OH&S Consulting. She is desperately trying to retire, but is keeping skin in the game with OHS Inc. and only servicing her existing, diverse client base. Ali holds a Master's degree in App Sc (OSH) built on her OSH post graduate studies and undergraduate degree in Nursing. She was an OHSWA past President, VP and Treasurer and has significant expertise in all facets of safety and health management – OSHMS development, Incident Investigations, Risk Assessments, Safety Management Plans, Health & Injury Management; OSH training, etc. She is a published author and has delivered many presentations at OSH conferences. She is a lover of AFL, sailing and boating, travelling and thoroughly enjoys a cocktail and likes to get down and boogie. However, she continues to learn.



Treasurer – Peter Nicholls

Peter is the Managing Director of Mine Safety & Training PTY LTD (MST) in 2019 after spending 37 years working in the mining industry in Australia, Ghana, Mali, Egypt and South Africa working in various operational roles on the surface and underground. Peter moved into senior Safety management positions working with both contractors and owner operators. Peter has both the hands-on practical experience in implementing and managing safety systems, as well as the expertise to deal with the legislative compliance requirements faced by all companies. Peter has a Grad Dip in OSH with formal qualifications as a lead auditor, training and assessment.



COMMITTEE MEMBERS**Dr KC (Kar Chan) Wan – Retired Occupational Physician**

Occupational Physician, Dr K C Wan MBBS,DIH, M.Sc, MFOM, FAFOEM, GDip Public Admin.

retired from medical practice on 1 July 2026. He was former OHSa President, Worksafe WA Chief Occupational Health Physician, Chairman Australian New Zealand Society of Occupational Medicine (WA), Vice President Chung Wah Association WA and Occupational Medicine Adjunct Professor at ECU & Curtin University WA. He continues as the Chairman of the Industrial Diseases Medical Panel at Workcover WA. KC has championed OHSa since its inception and marketed it aggressively with all colleagues and contacts, roping many unsuspecting people into the Association resulting in BOOM time membership of the Society during the 1990's & early 2000's. He is an invaluable member of OHSa Inc. with his rich background.

**Nandy Blay – Occupational Health Nurse Practitioner & PhD Student**

Nandy Blay is a UK-trained and AHPRA-registered Occupational Health Nurse Specialist with over 20 years' experience across public service, healthcare, mining, infrastructure, disability, and regulatory environments in the UK, Australia, and internationally, including 15 years as an independent specialist. She brings a systems-thinking approach to workplace health, with specific expertise in health risk assessment, psychosocial hazard management, pre-employment screening, and rehabilitation case management. Passionate about dignified, evidence-based occupational health practice, Nandy advocates for the recognition of occupational health nursing as a specialist discipline and for embedding prevention, early intervention, and compassion at the heart of workforce health and wellbeing.

**Dr Cathal Ahern – Occupational Physician Registrar**

Educated in Ireland and practicing medicine in Australia since 2018, Dr Cathal 'Carl' Ahern serves as a Medical Advisor to Alcoa Australia and is an Occupational Physician Registrar. He holds a Licentiate of the Faculty of Occupational Medicine from the Royal College of Physicians of Ireland and maintains occupational medicine certifications as a Medical Review Officer (AMROA), OEUK/OGUK Examining Doctor, and RISSB Authorized Health Professional. Cathal's professional focus encompasses a broad range of industrial health challenges, with particular interests in fitness for work assessment, vocational rehabilitation, occupational respiratory diseases, and worker's compensation. His clinical expertise further extends to legislated health monitoring, chemical burns, heat stress, and the comprehensive assessment and rehabilitation of workplace injuries.

**Dr Celine Murphy – Occupational Physician**

Celine hails from sunny Ireland and has extensive experience across government, rail, aviation, and private sectors. Dr. Murphy brings invaluable expertise to our organisation.

She is an Approved Permanent Impairment Assessor (APIA) for Workcover Western Australia. She is qualified to do IME assessments for upper and lower extremities, Spine and Nervous System. She is also a Medical Review Officer with Australasian Medical Review Officers Association and has special interest in injury management, aviation and travel medicine.

Celine was the WA chair of ANZOM for 3 years, past president of the Biological Society and member of The Overseas Elective Scheme (TOES) with subsequent elective in Maun Botswana Africa

**Sandra Smith- Injury Management Consultant**

Sandra has a great deal of experience in return-to-work case management for workers' compensation and preventative employer initiatives. She has worked in private practice, the government sector, and in-house as an Injury Management Coordinator and Occupational Health and Safety Advisor, where she implemented injury prevention and fitness for work strategies. Sandra has also had a five years' hospital and community-based Occupational Therapy experience.

Sandra is a Registered Occupational Therapist (AHPRA); holds a Post Graduate Diploma (OSH); Graduate Certificate (Business Administration); and is a member of several professional associations.

**Vishali Mohan - Talent Acquisition Leader and Founder, Vishali In Your Corner**

Vishali is a Talent Acquisition Leader and founder of Vishali In Your Corner. She has 20 years of experience supporting organisations across utilities, energy, resources, and corporate sectors. Over the course of her career, she has partnered closely with executives and hiring leaders to attract and secure critical talent, strengthen recruitment frameworks, and improve hiring outcomes.

Her expertise spans strategic sourcing, executive and technical recruitment, and the implementation of compliant, best-practice hiring processes aligned with Fair Work and EEO principles. Vishali has also contributed to strengthening employer brand, enhancing candidate and hiring leader experience, and supporting inclusive talent pipelines. With a strong foundation in behavioural assessment, stakeholder engagement, and conflict de-escalation, she brings both technical expertise and a calm, thoughtful approach to complex hiring environments.



New & Renewed Members

A special and warm welcome to the New Members to the Occupational Health Society of Australia Inc. Our new committee are working hard to bolster new membership, so if you have a colleague who would benefit from the collegiality and professional development offered by OHS Inc. please encourage them to join.

We have attached a [Membership Application form](#) at the back of this issue of the Monitor. Please feel free to share this membership application form with your colleagues and likeminded OHS professionals.

The following are New and Renewed Members since the last Newsletter in 21st December 2025.

New Members:

CORPORATE – Nil

ORDINARY – Vishali Mohan

STUDENT – Dr Manoj Rajakamuna

Renewed Members: Nil

We invite you all to [provide us with feedback](#) on what “**Hot Topics**” you would like explored by the Society as a Professional Development Event, dynamic speakers that you have been exposed to relevant to OHS and local venues that are suitable and central that will entice you to attend the next event.

We are the sum of our whole and need growth to allow us to continue with a professional, on point, relevant to member interest, topical and engaging rigour.

Legislative Changes



NSW PASSES LANDMARK DIGITAL WORK SYSTEMS LAW

New South Wales has become the first Australian jurisdiction to legislate **workplace health and safety duties covering digital work systems**, with the Work Health and Safety Amendment (Digital Work Systems) Bill 2025 passing NSW Parliament on the 12th February.

The legislation, introduced in November, requires *persons conducting a business or undertaking (PCBUs) to ensure that the health and safety of workers is not put at risk from the allocation of work by a digital work system — defined as “an algorithm, artificial intelligence, automation or online platform.”*

Introducing the Bill to the Legislative Assembly, NSW Work Health and Safety Minister Sophie Cotsis described

it as aimed at protecting the “*safety and dignity of workers in the digital age.*” She told Parliament the legislation is “simple” at its heart: ensuring workers operating under digital systems have the same rights as all other workers.

“If PCBUs delegate tasks to an algorithm which creates harm, the Bill clarifies that managers are responsible for the human impact,” Cotsis said. *“That is crucial to the expanding cohort of gig workers.”*

The Minister cited **food delivery riders** as a key example, noting that “the pressure of near-constant, unreasonable directions adds to the potential for injury or death,” and that **warehouse workers** “*are losing their meal and toilet breaks to keep up with pick rates.*”

Under the new laws, PCBUs must consider whether their digital systems create or result in excessive or unreasonable workloads, excessive performance metrics, unreasonable monitoring or surveillance of workers, or unlawful discriminatory decision-making. PCBUs must also provide WHS entry permit holders — typically union officials — with reasonable assistance to access and inspect digital work systems relevant to a suspected contravention.

The Bill’s passage came after the Upper House passed several amendments in the afternoon, with the Legislative Assembly agreeing to the changes at around 10pm. The most significant amendment requires entry permit holders to give a PCBU at least 48 hours’ notice, but no more than 14 days’ notice, before requiring access to a digital system for inspection. This is a departure from standard WHS entry provisions, under which permit holders are not required to give notice until “as soon as is reasonably practicable after entering” the workplace.

A further amendment prevents the new entry provisions from taking effect until one month after SafeWork NSW finalises guidelines that entry permit holders must follow when accessing digital systems. SafeWork’s drafting process must include a public consultation phase and the regulator is required to consider all feedback received.

An additional review requirement will compel the Minister to identify any adverse outcomes from the legislation 12 months after commencement. The laws will also be subject to review if Safe Work Australia makes changes to the national model WHS Act dealing with substantially the same subject matter, with NSW required to align its duties if the national standard provides an equivalent or higher level of protection for workers.

The amendments were made in part to address concerns raised by business stakeholders. NSW Shadow Treasurer Scott Farlow had warned the right-of-entry provisions would give union officials “unprecedented new powers” to access confidential business information, including payroll systems, rostering software, email platforms, performance management tools, customer databases, and point-of-sale systems.

Cotsis reassured PCBU's that existing safeguards would protect sensitive commercial information, including provisions allowing businesses to withhold access where doing so would contravene other laws, and prohibiting the unauthorised use or disclosure of any information obtained by an entry permit holder during an inspection.

Unions NSW secretary Mark Morey welcomed the legislation's passage, describing it as a “*breakthrough for hundreds of thousands of workers.*” He said **the laws address critical health and safety gaps** identified through parliamentary inquiries, **particularly around work intensification and psychological risks linked to automated decision-making.**

“These laws ensure that when an algorithm decides your hours, your pay, or your pace of work, there are clear rules and real human oversight to prevent harm,” Morey said. **“Technology should serve the workforce rather than exploiting it.”**

Taken from National Safety Online 13/02/2026

EARTHMOVING MACHINERY CONSULTATION

Safe Work Australia's discussion paper ***Improving the safety of earthmoving machinery used for lifting operations*** has now been released for [public consultation](#).

Machinery such as excavators, backhoes and front end loaders are widely used across several industries and present significant work health and safety risks when used to lift suspended loads.

For those interested in improving the safety of earthmoving machinery used for lifting operations are encouraged to contribute to the consultation, as well as those involved in other high risk lifting activities such as dogging and rigging.

The proposed options are:

- Retaining existing arrangements with the development of supporting national guidance
- Establishing a requirement for earthmoving machinery used for lifting operations to be fitted with engineering controls.
- Establishing a mandatory training requirement covering earthmoving machinery used for lifting operations

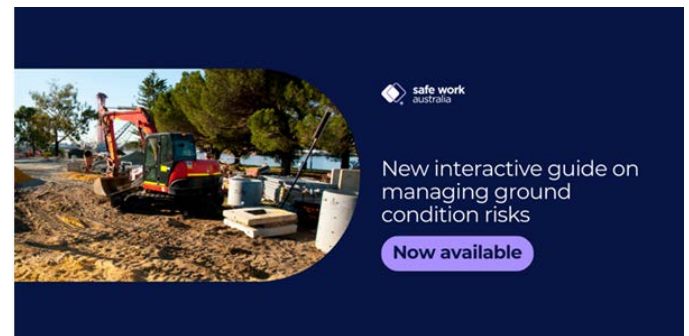
- Establishing a new HRW class specifically covering earthmoving machinery used for lifting operations.

For more information, visit [Safe Work Australia's Consultation Hub](#).

Taken from WorkSafe News Alert 12/02/2026

MOBILE PLANT: NEW INTERACTIVE GUIDE ON MANAGING GROUND CONDITION RISKS

Safe Work Australia has released an interactive guide on managing the risks associated with ground conditions for the safe set up and operation of mobile plant.



The [interactive guide](#) is designed to provide practical WHS guidance on assessing ground conditions for the safe set up and operation of mobile plant, such as mobile cranes and elevating work platforms.

Ground conditions can vary dramatically from one workplace to another and even within the one workplace. The ground can appear to be solid, but underneath there may be hazards such as soft or waterlogged soils, voids, or underground services not visible from the surface.

The guide is aimed at people who have a responsibility for mobile plant in the workplace. This includes those who operate, work with, or hire mobile plant, and employers of workers who work with mobile plant.

The guide illustrates key concepts when assessing ground conditions and is designed to help users recognise:

- the ground conditions that may pose a risk when setting up and using mobile plant
- how to assess and control ground risks to keep themselves and others on the site safe, and
- when to get expert advice (e.g. from a geotechnical specialist).

The interactive guide has 3 easy-to-follow modules with 3 scenario-based videos, interactive and visual exercises, and supporting resources.

Safe Work Australia has also recently released a [new model Code of Practice: Elevating Work Platforms](#) to help employers and businesses involved with the use,

installation and supply of EWP to comply with their WHS duties.

Extract from SafeWork Australia Website 04/02/26

NEW MODEL COP FOR ELEVATING WORK PLATFORMS

Safe Work Australia has released the model Code of Practice: Elevating Work Platforms. The model Code provides practical guidance for PCBUs (employers) and other duty holders on how to manage health and safety risks related to elevating work platforms.



Elevating work platforms (EWPs) are powered mobile plant designed to lift or lower people and equipment from a base support.

The new model Code is designed to support PCBUs and other duty holders in understanding and

fulfilling their responsibilities.

It outlines:

- ✓ common risks associated with EWP use
- ✓ examples of effective control measures, and
- ✓ guidance on inspection, maintenance, and the proper use of EWPs

Employers and other duty holders must ensure, as much as possible, that workers are not exposed to risks to their physical or psychological health and safety. Where eliminating risks is not feasible, they must be minimised as much as possible.

To achieve this, the model Code recommends following a risk management process – identifying hazards, assessing and controlling risks, and reviewing control measures.

The model Code focuses on the operational, ground conditions, fall, electrical and other hazards, risks, and control measures needed to prevent or minimise the risks associated with EWPs.

The model Code of Practice **will replace** two existing guides

- ✗ the guide to managing the risks of elevating work platforms and
- ✗ the guide to inspecting and maintaining elevating work platforms.

Extract from SafeWork Australia Website 27/01/26

HIA WARNS OF ADDED COMPLICATIONS IF FAIR WORK AMENDMENT BILL PASSED - WFH

The Housing Industry Association (HIA) has released a statement calling for the [Fair Work Amendment \(Right to Work from Home\) Bill 2025](#) to be rejected, believing it would only add further regulatory pressure on small building businesses already struggling with rising costs and labour shortages.

“Flexible work arrangements can play an important role in supporting workforce participation, and the current laws already provide a clear and functioning framework for employers and employees to establish effective working from home arrangements,” said HIA Senior Executive Director Compliance & Workplace Relations Stuart Collins.



*“Whilst there has been a lot of discussion around **mandating work from home** in recent months, these changes would create a blanket one-size-fits-all obligation that disregards the operational realities of many industries, including home building businesses, adding compliance pressure and complexity for employers.*

“For housing construction, work from home mandates would be impractical as many roles in home building require work that must be done onsite. Supervising construction, managing trades and ensuring safety compliance simply can’t be done remotely.”

“Mandating a broad right to work from home risks creating confusion, more disputes and extra compliance costs, particularly for small businesses. “It would also create added work health and safety complications for employers, who remain responsible for workplace safety even when that workplace is someone’s home.”

“Importantly, HIA’s position as set out in our recent submission to the Senate Standing Committees on Education and Employment is broadly supported by the Productivity Commission, who have outlined similar concerns with this proposed legislation in their submission.”

"The Productivity Commission (PC) submission states that 'Australia appears to have arrived at a sensible middle ground' and '... the need for a legislated right to work from home is not clear'."

"This position by the PC confirms what Australian business and workers already know: that further interference in negotiated and flexible employment arrangements risks significantly undermining productivity, employment choice and can lead to unfairness and inequity in the workplace."

"At a time when Australia faces a critical housing shortage, policy settings should support productivity and reduce regulatory imposts. Adding another layer of workplace regulation without clear evidence of a problem will only make it harder to focus on what matters most, building more homes for Australians," Collins concluded.



In Australia, mandatory, universal work-from-home (WFH) laws are not in place, with states like Western Australia (Aug 2025 – State law) ruling them out. However, Victoria is planning 2026 legislation to allow employees to work from home for two days a week. Currently, employees can request flexible work arrangements, but these can be refused on reasonable business grounds.

Image Credit: Stock Image used for illustrative purposes Only
https://www.servcorp.com.au/media/41020/20032025_remotework2.jpg?width=500&height=333.56353591160223

Extract from Safety Solutions 06/02/2026

NATIONAL CONSTRUCTION CODE 2025

PREVIEW NOW AVAILABLE

The Australian Building Codes Board (ABCB) has released the [NCC 2025 preview draft](#) with adoption in Western Australia (WA) from 1 May 2026.

The National Construction Code is Australia's primary set of technical design and construction provisions for buildings. As a performance-based code, it sets the minimum required level for the safety, health, amenity, accessibility and sustainability of certain buildings. The Australian Building Codes Board, on behalf of the Australian Government and each state and territory government, produces and maintains the National Construction Code.

Some sections of the preview draft are omitted because publication of NCC 2025 is yet to be completed. The ABCB has also produced a supplementary document that contains omitted text which is to be read in conjunction with other preview draft documents.

The NCC 2025 preview includes several updates intended to improve safety, performance and usability across the built environment.

We encourage you to review the changes ahead of the 1 May 2026 adoption date.

Extract from Building and Energy Website 05/02/2026

NEW WORKPLACE EXPOSURE LIMITS TO APPLY FROM 1 DECEMBER 2026



Safe Work Australia and national work health and safety ministers have agreed to introduce a new set of Workplace Exposure Limits (WELs) for airborne contaminants that **will apply from 1 December 2026**.

Work health and safety (WHS) ministers have agreed to the new WEL list and a harmonised transition period ending on 30 November 2026. This change comes after extensive work and consultation to revise the Workplace exposure standards for airborne contaminants (WES).



The WEL will Replace the Current WES.

WHS ministers agreed to rename the Workplace exposure standards (WES) as Workplace exposure limits (WEL) to make it clear that these are a limit that should not be exceeded, and for Australia to align with terms used internationally.

When Will the Changes Happen?

From 1 December 2026, and following implementation into the WHS laws of the Commonwealth, states and territories, the [Workplace exposure limits for airborne contaminants \(WEL list\)](#) will be adopted throughout Australia.

Until 1 December 2026, persons conducting a business or undertaking (PCBUs) must continue to ensure no person is exposed to an airborne concentration of an airborne contaminant higher than its exposure standard listed in the WES List.

What's Changing?

While most exposure limits remained unchanged, the WES Review did result in some changes, including reductions and increases in limits for certain chemicals

and the removal or introduction of new limits for others. For more information on what has changed, see our webpage on the [changes between the WES and WEL](#).

What are the Next Steps?

Following the WES Review, Safe Work Australia is undertaking additional work:

- New guidance is being developed to assist PCBU with the transition to the WEL. These resources will be published throughout the transition period and beyond.
- WHS ministers have requested additional impact analysis on the proposed changes to the exposure standards for the following chemicals/substances before their WEL limit will be updated in the WEL:
 - ☠ respirable crystalline silica,
 - ☠ formaldehyde,
 - ☠ benzene,
 - ☠ chlorine,
 - ☠ copper (fumes, dusts and mists),
 - ☠ hydrogen cyanide,
 - ☠ hydrogen sulphide,
 - ☠ nitrogen dioxide,
 - ☠ titanium dioxide.
- Determining how to best regulate under the model WHS laws 33 airborne contaminants that are non-threshold genotoxic carcinogens (NTGCs), and do not have a safe exposure limit. For more information on these NTGCs, see our webpage on the [changes between the WES and WEL](#). PCBU must continue to comply with the exposure standards set out for these airborne contaminants in the WES List until 1 December 2026.

Where do I Find Out More?

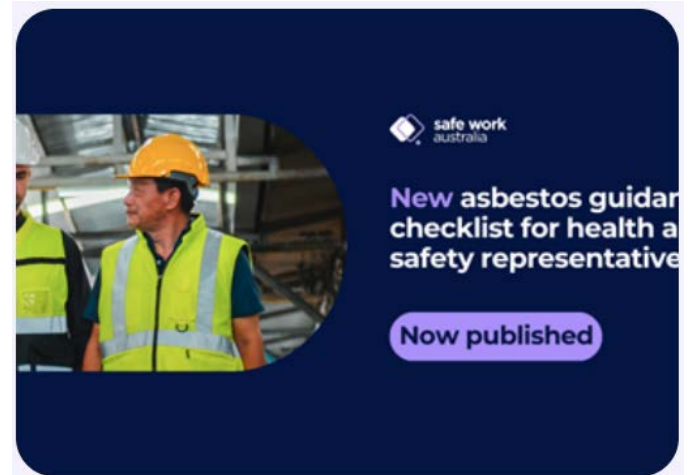
You can find out more information on the WEL list on the [Safe Work Australia website](#) and [subscribe](#) to the 'Exposure standards for airborne contaminants' emailing list for:

- updates on the transition to WEL,
- alerts to new and updated guidance, and
- further updates on the additional impact analysis and NTGCs.

Extract from Safe Work Australia's Website 23/04/25

NEW GUIDANCE FOR HEALTH AND SAFETY REPRESENTATIVES ON ASBESTOS

Safe Work Australia, in collaboration with the Asbestos and Silica Safety and Eradication Agency, have released a [new guide and checklist](#) specifically for HSRs.



It has been released to support Health and Safety Representatives (HSRs) in understanding and managing asbestos risks in the workplace. The [guidance](#) is designed to help HSRs confidently carry out their representative role in workplaces where asbestos may be present or disturbed.

Asbestos remains a significant health risk, particularly in older buildings, plant and infrastructure. When asbestos-containing materials are disturbed, fibres can become airborne and inhaled, leading to serious long-term illnesses including mesothelioma, lung cancer and asbestosis. HSRs play an important role in representing workers' concerns and supporting effective asbestos risk management.

What the Guidance Covers

The [guidance](#) provides practical information to help HSRs recognise where asbestos risks may arise and understand how those risks should be managed. It explains common sources of asbestos-containing materials, how exposure can occur, and the importance of preventing disturbance wherever possible.

A key focus is helping HSRs ask the right questions and engage in meaningful consultation. The [guidance](#) supports HSRs to check whether asbestos risks have been identified, whether appropriate controls are in place, and whether workers have been provided with clear information, instruction and training.

An [accompanying checklist](#) is intended as a practical tool to assist HSRs when discussing asbestos with management and workers. It helps prompt conversations around asbestos registers, risk assessments, control measures, monitoring and communication.

The Role of HSRs in Asbestos Safety

The guidance reinforces that **HSRs are not expected to be asbestos experts**, nor are they responsible for fixing asbestos hazards. Their role is to represent their work

group, raise concerns, participate in consultation and help ensure asbestos risks are identified and managed appropriately.

By having a clearer understanding of asbestos risks and control measures, HSRs can more confidently exercise their powers and functions, support workers, and contribute to safer decision-making where asbestos hazards are present.

What This Means for Workplaces

For workplaces where asbestos may exist, the guidance serves as an important reminder of the ongoing need for effective asbestos management. Employers should ensure HSRs are supported to access this guidance, raise concerns, and participate in asbestos-related discussions and risk management processes.

Supporting HSRs in their role helps improve awareness, strengthens consultation, and contributes to safer workplaces where asbestos risks are managed responsibly and proactively.

Taken from Safe Work Australia Website, 23/01/26

WA PUBLIC CONSULTATIONS

Dangerous Goods Safety Act 2004 & Regulations Reform



There's still time to lodge your submissions on the Dangerous Goods Safety Act 2024 and associated regulations changes.

Your feedback will help ensure the updated legislation reflects what works on the ground, making the laws clearer, more practical and better able to protect both industry and the community.

Submissions close **5.00 pm, Friday 27 February 2026**

Make Your Submission

Public Consultations Closing in March

[Draft code of practice: Emergency management for Western Australian mines](#) – closes 6 March 2026

- The Code assists a person conducting a business or undertaking, including the mine operator, to meet the requirements of the Work Health and Safety (Mines) Regulations 2022 in relation to emergency management planning at a mine site.
- The Code provides guidance on:
 - establishing procedure development and content
 - maintenance of the emergency plan
 - how to test the emergency plan
 - when to use the emergency plan.

[Draft code of practice: Excavation work](#) – closes 13 March 2026

- The Code builds on the transitional code of practice, Excavation, developed under the Occupational Safety and Health Act 1984, and incorporates new requirements following the introduction of the Work Health and Safety Act 2020 (WHS Act).
- The Code assists a person conducting a business or undertaking to meet the requirements of the WHS Act and associated regulations in relation to excavation work. The Code also provides guidance on:
 - controlling access to excavations, including not allowing people into excavations when they are not required
 - minimising the time workers spend in excavations
 - providing suitable access to and egress from excavations
 - mechanising work to be carried out in excavations
 - providing adequate induction, training and information for those involved in excavation work
 - conducting emergency planning.

[Draft code of practice: Person overboard – prevention and response](#) – closes 20 March 2026

- This Code updates the previous 'Man Overboard: Prevention and Response' guidelines developed under the Occupational Safety and Health Act 1984 and incorporates new requirements introduced by the Work Health and Safety Act 2020 (WHS Act).
- It will assist persons conducting a business or undertaking (PCBUs) to meet the requirements of the WHS Act and related regulations in relation to work carried out on commercial vessels. The code will also provide guidance on:
 - safe systems of work to prevent person overboard situations
 - effective emergency measures to minimise the risks of injury, harm or death in the event of a person overboard incident
 - risk management processes to address potential hazards and risks in relation to a person overboard situation.

PSYCHOSOCIAL HAZARDS & HARASSMENT COP COMMENCE IN SOUTH AUSTRALIA.

New codes of practice on psychosocial hazards and sexual and gender-based harassment have commenced in South Australia.

The codes of practice:

- [Managing psychosocial hazards at work](#) and
- [Sexual and gender-based harassment](#)

commenced in the jurisdiction on 19 February 2026; based on the national model Code of Practice developed by Safe Work Australia, the codes incorporate significant further consultation with South Australian unions and employer representatives.



The new codes of practice follow the adoption of the Work Health and Safety (Psychosocial Risks) Amendment Regulations 2023, which came into effect in South Australia on 25 December 2023.

Unreasonable job demands, lack of role clarity, fatigue, inadequate rewards and recognition, job insecurity and traumatic events or material in the workplace are common examples of psychosocial hazards.

Sexual and gender-based harassment is also a psychosocial risk and can occur across all industries. It can cause physical and psychological harm to the person it is directed at and anyone witnessing the behaviour.

In the psychosocial code, 17 types of hazards are defined, including the harmful workplace behaviours of bullying, sexual harassment and aggression.

In the code, how to consult with workers is explained, the code also includes:

- ① different types of control measures descriptions;
- ① recording the risk management process and outcomes guidance;
- ① responding to reports, complaints or incidents, including through formal investigations, guidance; and

- ① case studies describing how psychosocial risks can be managed in different industry and workplace settings.

The sexual and gender-based harassment code provides clear definitions and descriptions on a range of harassment and behaviours based on gender and sex that create a risk of harm at work.

"Managing psychosocial hazards should not just be a legal duty — it should be the core of every business who cares for its workers and wants the best success," said SafeWork SA Executive Director Glenn Farrell.

"These codes of practice are a vital tool to help employers identify, control and manage psychosocial safety risks at work, as well as informing workers of their rights to a safe workplace," Farrell added.

"The regulations and new codes of practice will support businesses in ensuring their most valuable assets — their workers — are free from harm at work."

If you are affected by any of the issues discussed in this article, 1800RESPECT has a 24/7 support service that can help; please call 1800 737 732.

SafeWork SA News Release 20/02/2026

MEMBER PROFILE - STEPPING AHEAD

It gives me great pleasure to introduce to you one of our newest Corporate Members –

Stepping Ahead: Putting Humanity Back into Recovery.



STEPPING AHEAD
Complete Injury Management

Most people never expect to need a Workplace Rehabilitation Provider. *Injury or psychological trauma arrives uninvited*, often disrupting identity, confidence and financial security in ways people never anticipated.

In those moments, the quality of support someone receives can shape not only recovery outcomes, but their confidence in returning to work and rebuilding their future.

That belief sits at the heart of Stepping Ahead.

For more than 20 years, Stepping Ahead has supported individuals across Western Australia to navigate complex return-to-work journeys following physical and psychological injury. As an **independent Workplace Rehabilitation Provider**, the organisation has built a reputation for balanced advice, clinical integrity and outcomes that prioritise sustainable recovery over process-driven solutions.

Today, Stepping Ahead continues to evolve under the **leadership of Laura Finlayson** (BSc(Psychology)(Honours), BSc(Chiro), B.Chiro), whose pathway into workplace rehabilitation began in academia. Her early research explored the experiences of female healthcare workers returning to work after being sexually assaulted or harassed by their patients, work that highlighted a lasting truth within injury management: recovery is rarely linear, and well-intentioned systems can unintentionally silence individuals when process outweighs empathy. Combined with extensive private practice experience supporting injured individuals, and later years working within the corporate mining sector leading health and global leadership development, a consistent lesson emerged, people do not recover through policies alone. They recover when they feel seen, respected and understood.



The Stepping Ahead Team

These experiences now shape Stepping Ahead's philosophy: humility outweighs process, listening precedes advising, and meaningful outcomes occur when individuals are treated as people first, claims second.

Independence remains central to how the business operates. Stepping Ahead is *not aligned with any insurer*, ensuring recommendations remain grounded in professional judgement and ethical practice. This independence enables honest (and sometimes challenging) conversations but ultimately leading to clearer decision-making and more durable outcomes for workers, employers and stakeholders alike.

As a boutique provider, Stepping Ahead intentionally maintains a service model that prioritises relationships over volume. Its team of experienced rehabilitation counsellors and allied health professionals *are known for their practical, calm and human approach* during what is often a highly uncertain period in a person's working life. *Clients are not managed through transactional systems, but supported through thoughtful, individualised planning.*

Over two decades, the organisation has developed trusted referral partnerships across legal, healthcare and employer networks and is recognised for delivering balanced, defensible and clinically sound recommendations. **Services include** case management, vocational assessment, psychosocial support and return-to-work planning, delivered in close collaboration with employers, insurers, legal representatives and treating professionals to bring clarity to complex situations.

At its core, Stepping Ahead exists to ensure recovery restores more than work capacity, it restores confidence, dignity and direction. We deliver workplace rehabilitation services across the WorkCover WA, motor vehicle accident (ICWA), Comcare (coming soon!) and private sectors.

If you would like to connect, collaborate, or have a client we may be able to support, we welcome you to reach out.

IN EVENTS

Financial HEALTH in Retirement

**AGM Guest
Speakers –**

Duncan Mitchell

& Scott Reid.

Thursday

4th December

2025

Westralia House –

East Perth

Sorry you missed it...



OHSA Inc. 2025 AGM Guest Speaker

Financial Health in Retirement – Do YOU have ENOUGH?

Thursday 4th December 2025 from 6.15 pm (6.30pm start)

The Occupational Health Society of Australia Inc. is proud to present Mr Scott Reid – Director Abbotts Personal Insurance (B.Comm, AdvDip FP, FAAA) & Mr Duncan Mitchell, Financial Advisor (Dip FP, B.Sc, FA, AFSI) from Abbotts Group, who will provide an Overview of all the MUST DO's to assure your wealth and comfort in retirement. This presentation will be followed by a Networking Soiree with light refreshments, beer, wine & soft drinks where you will have opportunity to meet & chat with the speakers and then we will hold the formal OHSA Inc. AGM.



The Abbotts Group is a client focused professional services group whose aim is to provide peace of mind for their clients who seek exceptional outcomes in their financial lives. The Abbotts Group's professional services focus is on enabling clients to be highly efficient in their business and taxation affairs, generate and protect their wealth and manage their debt and borrowings effectively.

Both Scott & Duncan have collective experience of 30 years+ in financial planning, personal insurance and wealth management that allows them to navigate their client's financial journey through smart strategies shaped by real-world experience and a genuine passion for helping people make informed decisions to secure their future.

Whether you have enough to retire depends on your desired lifestyle and income. There's no magic number for "how much" you'll need in retirement, it's different for everyone. While you might have heard you need \$1 million in super or more, the reality is you could need a lot less depending on your situation.

For most people, having around 70% of their current take-home pay is enough to keep the lifestyle they have now. Factors like owning a home, your spending habits, and potential Age Pension eligibility significantly influence how much you will need. Scott and Duncan will explore these scenarios and suggest required strategies you need to consider in your pre-planning to ensure that your retirement is comfortable.



At the 2025 AGM, we were privileged to hear from two experienced and well versed speakers who hail from one of our **Corporate Members – Abbotts Group**. Both Scott Reid and Duncan Mitchell addressed our concerns on **"How much do I need to retire comfortably?"** and stressed that we all had to **Plan our Cashflow**. We were joined via MS Teams by several of our members who were unable to join us in person.

They focused us to question ourselves on **"what we wanted out of retirement"** i.e. Prioritising travel; staying at home with the grandkids; retire debt free?? They *prioritised cashflow for basic living needs + lifestyle expenses*. They illustrated the **Association of Superannuation Funds Australia (ASFA)** estimate table where:

- ASFA's 'modest' standard estimates how much money is needed for *the basics*.
- ASFA's 'comfortable' standard estimates how much money is needed for retirees to be involved in a range of leisure activities and to have a good standard of living including: private health insurance, a reasonable car, household goods and holidays.

Both standards apply for people retiring at age 65 who will live to an average life expectancy of about 85. Both assume you own your home, unless noted. They felt that in reality a comfortable lifestyle for a couple retiring at 65 is probably more like \$100,000 per annum.

The Association of Superannuation Funds of Australia's (ASFA) estimate of how much money you'll need in retirement, depending on your lifestyle.

ASFA Retirement Standard	Annual living costs	Weekly living costs
Couple – modest	\$50,866	\$978
Couple – modest (renting)	\$67,125	\$1,290
Couple – comfortable	\$76,505	\$1,471
Single – modest	\$35,199	\$677
Single – modest (renting)	\$49,676	\$955
Single – comfortable	\$54,240	\$1,043



ASFA estimates that a **modest lifestyle**, which covers the basics, is mostly met by the Age Pension. They estimate the *lump sum* needed to support a modest lifestyle for a single or a couple is \$100,000!

ASFA estimates that the *lump sum* needed at retirement to support a **comfortable lifestyle** is \$690,000 for a couple and \$595,000 for a single person. *This assumes a partial Age Pension.*

ASFA produces a *separate retirement standard for older retirees* where these amounts are ~ \$40,000 more. For more information they referred us to the [ASFA Retirement Standard](#).



OHSA 2025 AGM
4dec2025 Thursday
Central Hall, Westroom
128 Palace St, Perth

Duncan Mitchell -
Abbotts Wealth Management

We were urged to get our 'house in order' and plan for required structures especially if you are a self funded retiree (*of which the majority of us were!*).

Application of the '**rule of 20**' when determining your ideal lump sum. i.e. if you are a couple with a projected requirement of \$100,000 per Annum, then multiply it by 20 with a result of \$2 Million. This then brought us back to '*required structures/strategies*' for our lump sum to generate to meet our retirement lifestyle and leave a family legacy?

We discussed how much risk should we take, getting used to being a Growth Investor and keeping large cash balances available for pension/ lifestyle requirements. This is where we were encouraged to speak openly with our accountant or access a registered Financial Advisor.

Requirements for Estate Planning was explored in terms of ensuring you had a Will and/or making sure that it was current (*I fessed up that mine was near on 30 years old before we updated it !*) and the need to explore Trust Deeds and testaments if necessary; making arrangements for Power of Attorney, Guardianship, Advanced Health Directives and Death Benefit Nominations.

For all the consultants out there or contract workers, we also discussed Personal Income Protection Insurance – the pros and cons.

Overall a very illuminating and thought provoking discussion that had them deluged with questions. Members in attendance were very impressed at the quality and delivery of the presentation with significant positive feedback received. Both Duncan and Scott were presented with Certificates of Appreciation and gift bag. They in turn, gave all participants a goodies bag of useful items.

If you missed this session, you missed out, but can view the ppt at the OHSa Inc. website - <https://www.ohsociety.com.au/>

IN SAFETY

\$750K Fine Follows Worker's Sleeve Getting Caught in a Nip Point - WA

A mining services company has been fined \$750,000 — and ordered to pay \$6702.70 in costs — after a heavy diesel mechanic became entangled in a stacker after getting their sleeve caught in a nip point.



The incident occurred in April 2022 at a gold mine 20 km west of Kalgoorlie. The company-employed mechanic — who had 15 years' experience — was performing recurring maintenance on a stacker while it was in use, the stacker's unguarded side access port enabling the heavy diesel mechanic to reach some of the operating machinery's moving parts.

The company pleaded guilty to contravening sections 19(1) and 31(1) of the Work Health and Safety Act 2020, having failed to ensure, so far as was reasonably practicable, the health and safety of a worker, a failure that caused serious harm to an individual. In this case, the worker suffered a serious crush injury and a left humerus fracture.

The company “could have easily and inexpensively enforced isolation procedures to ensure the stacker was de-energised before any worker accessed the tail drum roller via the side access port to remove material from the conveyor belt tracking adjusters,” WorkSafe WA Commissioner Sally North said.

If the company “had taken that reasonably practical measure”, North added, “it would have reduced the risk of the heavy diesel mechanic becoming entangled in the stacker, and consequently, the risk of the worker sustaining the serious injuries that they suffered in their workplace.”

The company had various procedures in place, including the Isolation and Tagging — Bulk Haulage Procedure that described the process for isolation and tagging of plant and equipment, which the fitter was aware of at the time of the incident, and an established job hazard analysis procedure on the site. But site workers were not provided with either a safe work procedure/statement or job hazard analysis specific to clearing material on the adjusters of the belt of the stacker.

When the company received the stacker in December 2020, it had guarding installed. However, **the guarding around the stacker's side access port and tail drum roller had been absent since the company commissioned its use** at the incident site in May 2021. Following the incident, the company removed the stacker from service.

Image Credit: iStock.com/Mikhail Dmitriev. Stock image used is for illustrative purposes only

Taken from LGIRS website 14/01/2026 & Safety Solutions 27/01/26

Abattoir Safety – 562 Improvement Notices Issued

Following a visit from WorkSafe WA regional, agricultural and industrial inspectors, 19 regional abattoirs were issued with 562 improvement notices and six prohibition notices.

At 81 notices, **guarding of machinery ranked as the most common reason** for the issue of notices, this was followed by provision of safe layout including floor demarcation (52 notices), maintenance and inspection of mobile plant (20 notices) and emergency stops (18 notices).



“The high number of notices issued at abattoirs illustrated that safety issues were widespread in the industry,” WorkSafe WA Commissioner Sally North said. “The workplaces involved have now been required to put additional safety measures in place to keep their workers safe.”

“It's evident that the program has raised awareness of the common workplace hazards and risks in abattoirs, and that work health and safety standards across the meat processing industry have been improved as a result of this inspection program,” North added. “WorkSafe will continue to monitor safety standards in this sector.”

The knife was the most common tool used in the industry and the cause of the most lost time injuries — the usage and care of knives being the primary focus of the inspection program.

Concerning knives, common issues included:

- ☠ workers walking around with knives,
- ☠ knives being left unsecured around the workplace,
- ☠ workers sharpening knives near other workers, and
- ☠ workers using damaged knives.

WorkSafe WA said that the best practice system seen in workplaces involved asset tracking, where workers received a sharp, sterilised knife at the start of their shift and returned the knife at the end of the shift for resharpening and storage.

A snapshot of the program's findings and a checklist for the industry are available on the WorkSafe website at [Health and Safety Snapshot: Abattoir - Meat Processing Project](#) and [Abattoir Safety: Checklist](#).

Image credit: iStock.com/CatEyePerspective. Stock image used is for illustrative purposes only.

Taken from LGIRS Website, 10th February 2026

Hard Lesson from Inadequate Sub-contractor Control in NSW

A principal contractor has been convicted and fined \$300,000 after **failing to respond to warning signs that a subcontractor's operations were unsafe**, leading to a worker receiving an electric shock.

In December 2022, the worker sustained the electric shock when a 16-metre steel reinforcement cage buckled and made contact with two 11,000-volt overhead powerlines at a North Wollongong construction site.

The worker and a colleague were assisting a mobile plant operator to lift and position the cage into a previously bored hole when he heard a breaking noise and moved away, moments before the cage struck the lines.

Although the worker was not touching the cage, he was standing on wet, muddy ground and experienced a surge of electricity passing through his body. He was transported by ambulance to hospital, examined and discharged, and returned to work the following day.



Image credit: <https://www.cranesandlifting.com.au/wp-content/uploads/2020/06/BeamCaldwell.jpg> Stock image used is for illustrative purposes only

Following a SafeWork NSW investigation, the PCBU was charged with and pleaded guilty to exposing the worker to a risk of serious injury or death, contrary to section 32 of the State Work Health and Safety Act 2011.

In Industrial Court proceedings, the PCBU acknowledged it could have:

- ✓ redirected the overhead powerlines underground,
- ✓ implemented separation controls for mobile plant operating near live overhead powerlines, and
- ✓ properly reviewed the subcontractor's safe work method statement to minimise site risks.

SafeWork submitted the offence was within the high range of objective seriousness, arguing **the avoidance of death or serious injury was "serendipitous" rather than the result of the PCBU's safety planning**. The method for moving steel reinforcement cages at the site was "an incident waiting to happen", it added.

NSW Industrial Court Justice Jane Paingakulam noted it was agreed that the **subcontractor's SWMS was signed by workers after the incident and was backdated**, suggesting the PCBU failed to review it at the relevant time.

She also noted a significant contributing factor was the workers' lack of necessary qualifications, training and experience to perform the work safely. While it was the subcontractor's responsibility to engage qualified workers, **the PCBU approved the site induction of workers who both explicitly stated they did not possess trade licences or high-risk certificates**.

"That should have prompted some investigation by [the PCBU] into the appropriateness of the workforce and the systems that [the subcontractor] had in place," Justice Paingakulam emphasised.

The PCBU also failed to address the absence of the subcontractor's risk assessment for the piling rig, despite its own WHS management plan requiring one for mobile plant.

Taking these matters into account, Justice Paingakulam found the offence fell above the mid-range of objective seriousness, assessing the PCBU's culpability based on its failure to act on warning signs that the subcontractor's operations were unsafe.

She determined an appropriate penalty was \$400,000, reduced by 25 per cent to reflect the guilty plea, imposing a fine of \$300,000.

Key lessons for PCBUs:

- ✦ Properly review subcontractor safe work method statements before work commences
- ✦ Act on warning signs that subcontractors may be operating unsafely
- ✦ Verify subcontractor workers have appropriate qualifications and training
- ✦ Implement separation controls for mobile plant near overhead powerlines
- ✦ Ensure subcontractors conduct required risk assessments for mobile plant

Taken from National Safety Online, 6th February 2026

Chain of Responsibility – Transport & Logistics

From fatigue and scheduling pressures to load safety and compliance reporting, transport and logistics organisations face complex health and safety challenges. The Chain of Responsibility framework makes it clear that safety responsibility extends across the entire transport chain.

UNDERSTANDING THE CHAIN OF RESPONSIBILITY IN AUSTRALIAN LOGISTICS

The transport and logistics sector plays a vital role in moving goods and people across Australia, yet it sits among the highest-risk industries for workplace incidents, particularly in road transport. Under Australian law, safety in this sector is a shared legal and ethical responsibility that extends throughout the supply chain. This is the essence of the Chain of Responsibility (CoR).



WA, along with the Northern Territory, has not adopted the HVNL and continues to operate under its own, separate, and more stringent set of regulations.

KEY DETAILS REGARDING HEAVY VEHICLE REGULATION IN WA:

Regulator: Heavy vehicle operations in WA are regulated by Main Roads Western Australia (Heavy Vehicle Services), not the National Heavy Vehicle Regulator (NHVR).

Applicable Law: WA relies on the Road Traffic (Vehicles) Act 2012 and the Road Traffic (Commercial Vehicle Drivers) Act 2013.

Interstate Operations: If a WA-registered heavy vehicle crosses the border into an HVNL state (e.g., SA, NT), it must comply with the HVNL regulations while in that jurisdiction.

Accreditation: WA operates its own accreditation scheme, the WA Heavy Vehicle Accreditation (WAHVA), which is mandatory for many operators in the state.

Differences: WA's regulations are often different from the HVNL, particularly regarding fatigue management (which focuses on 12-hour shifts rather than the 14-hour rules in some HVNL jurisdictions) and stricter, more granular Chain of Responsibility (CoR) application.

For interstate operators, you must understand both the HVNL requirements and WA-specific regulations, as a vehicle configured for one might not be compliant in the other.

WHAT IS THE CHAIN OF RESPONSIBILITY (CoR)?

The Chain of Responsibility is a legislative framework embedded in the Heavy Vehicle National Law (HVNL). It spreads legal accountability beyond the driver to every party that influences transport activities. This includes companies that consign, load, schedule, receive, or otherwise influence how heavy vehicle transport is planned and executed.



Under CoR, any person or organisation with control or influence over a transport task is responsible for ensuring safety is maintained and breaches of the HVNL are prevented. These obligations rely on the functions performed rather than job titles. Consequently, a

consignor, scheduler, or director may be held liable if their decisions contribute to unsafe practices.

WHY CoR MATTERS FOR HEALTH & SAFETY

Drivers were traditionally held solely responsible for breaches of road and safety laws, yet this approach missed the upstream causes of unsafe situations. CoR recognises that decisions made in offices, warehouses, or boardrooms well before a truck hits the road can create conditions that make breaches almost inevitable.

For example, unrealistic delivery schedules can pressure drivers to exceed speed limits or skip rest breaks. Poor loading practices can lead to overloaded or unstable vehicles, while inaccurate load documentation can expose drivers and other road users to risk. By legally linking these decision points to safety outcomes, CoR creates a shared safety culture that aligns with broader workplace health and safety law.

REGULATORY IMPACTS ON THE TRANSPORT & LOGISTICS INDUSTRY

1. Expanded Duty Across the Supply Chain

Under CoR, every party involved in road transport, including employers, consignors, packers, loaders, schedulers, operators, and consignees, must take reasonable steps to ensure safety so far as is reasonably practicable. This mirrors obligations in general workplace health and safety law. Executive officers also face an executive duty of due diligence which requires proactive oversight to ensure compliance at all levels of the organisation.

2. Risk-Based Compliance

A key shift under CoR is the move toward risk-based safety management. Rather than focusing strictly on compliance with discrete rules, organisations must operate holistically. They must identify hazards related to transport tasks such as fatigue, speed, and loading weight. They must also assess and prioritise risks based on likelihood and severity, implement controls that eliminate or minimise risk, and review these controls over time. This approach mirrors the WHS risk management hierarchy and encourages continuous improvement.

3. Heavy Emphasis on Documentation & Reporting

To demonstrate compliance under CoR, organisations must document their actions regarding safety risk management. In a prosecution scenario, the business has to show it took all reasonable steps to prevent a breach and that those steps were proportionate to the risk. Regular reporting to executives and structured audits are therefore essential.

TOP HEALTH & SAFETY PRIORITIES UNDER CoR

To succeed under the Chain of Responsibility framework, transport and logistics organisations should prioritise several key areas.

1. Fatigue Management

Driver fatigue remains one of the most significant work health and safety hazards. Under the HVNL and CoR, businesses must ensure drivers do not exceed regulated hours without adequate rest. This requires proactive scheduling and workload planning in addition to driver compliance.

2. Realistic Scheduling & Timeframes

Pressure from clients, sales teams, or internal KPIs that encourages unrealistic timeframes can directly push drivers toward speeding, fatigue breaches, or unsafe driving practices. CoR compliance means planning schedules that are reasonable, safe, and cost-efficient.

3. Load Safety & Mass Compliance

Incorrectly loaded or overweight vehicles pose serious safety risks ranging from rollovers to cargo shifting. Organisations must implement checks at loading points and ensure that weight declarations and restraints are accurate. This responsibility extends to consignors and loaders alike.

4. Safety Culture & Worker Engagement

A strong safety culture supports open hazard reporting, shared responsibility for safety outcomes, and continuous learning. Senior leadership commitment is foundational for both compliance and the meaningful reduction of harm.

5. Integrating Safety Management Systems

A modern Safety Management System (SMS) can integrate CoR risk controls into everyday operations. This includes workflows for hazard identification, risk assessment, incident reporting, training records, and performance monitoring. All of these elements must be documented and easily auditable.

REAL-WORLD COMPLIANCE STRATEGIES

Here are practical steps organisations can take to align with CoR expectations:

Map Your Transport Chain: Identify every role and party that influences transport activities, including external contractors and clients.

Assess Risk Holistically: Use structured risk assessments that consider workload pressures, delivery timing, and environmental factors.

Review Contracts & KPIs: Eliminate contractual incentives or penalties that might encourage unsafe behaviour, such as penalties for late delivery.

Document Decisions & Controls: Maintain records of policies, training, safety checks, and risk treatments alongside the outcomes.

Continuous Training: Provide targeted training on CoR duties for schedulers, loaders, operators, and executives.

These strategies embed safety at every decision point and make compliance a proactive business advantage. Chain of Responsibility reinforces the truth that safety cannot be delegated. Every link in the transport and logistics supply chain influences outcomes on the road. By embracing CoR principles ranging from realistic scheduling to robust risk management, organisations can protect workers, improve compliance, and enhance operational resilience.

Image credit: National Heavy Vehicle Regulator 2023 Image used is for illustrative purposes only.

Extract from MYOSH, Mel Ikac 03/02/2026

Tas - Fatigue Management Responsibility – Horse Racing

Prosecutors have blamed a Tasmanian harness racing company's failure to ensure adequate rest breaks for a crash that seriously injured workers and killed four horses.

Ben Yole Racing Pty Ltd is facing trial in the Launceston Magistrates Court on charges including two counts of failing to comply with a health and safety duty (Category 2) and two counts of failing to comply with a health and safety duty (Category 3). The company has pleaded not guilty.

The charges stem from a crash near Sidmouth in January 2023, when five young employees aged between 14 and 20 were **driving back from a race day** in Hobart. The company has already pleaded guilty to failing to notify of a notifiable incident.

After an evening of races at Elwick Racecourse on January 29, 2023, casual employee Lily Blundstone was driving a Ford Ranger with four passengers while towing a horse float back to the company's stables. In the early hours of January 30, Ms Blundstone dozed off on a curve on the Batman Highway at Rowella.

The car crashed into a tree, seriously injuring several workers and killing four horses, two instantly and two later euthanised.



Image credit: Stock image used is for illustrative purposes only. <https://cdn.ranger5g.com/attachments/98/98622-bcb76a281acef392d79730a01d008b7b.jpg>

Prosecutors argue the company failed in its health and safety duties by not ensuring employees had regular breaks and adequate rest before driving. They also allege Ben Yole Racing failed to ensure the brakes on the vehicle and horse float were properly maintained, and that the ute was towing more than the recommended 750 kilograms.

The first prosecution witness, Ms Blundstone, told the court she was given no instructions about breaks on a typical race day. She testified she arrived at the Sidmouth stables at 7.30am and had only an approximate 15-minute break around 3.45pm before leaving Hobart after the last race finished just before 10pm.

Ms Blundstone said her passengers fell asleep during the drive but she did not feel tired. She remembered driving past the Batman Bridge but must have dozed off while going around a corner. She tried to correct the vehicle but said there was nothing she could do.

Defence lawyer Damien Sheales argued Ms Blundstone had been employed solely to drive to and from the races with no expectation of other work. He said passengers were not properly wearing seatbelts and it was the driver's responsibility to ensure road rules were followed.

"It was her obligation that she was fit to drive. Whether she chose to help others gear up is not to the point," Mr Sheales said.

The hearing before Deputy Chief Magistrate Ken Stanton is expected to hear from several other witnesses including Ben Yole Racing employees, a WorkSafe investigator and a fatigue expert.

Ms Blundstone previously pleaded guilty to two counts of causing grievous bodily harm by negligent driving and received a wholly suspended ten-week jail sentence.

Taken from National Safety Online, 26/01/26

USA - More Women on Boards Linked to Safer Workplaces

Companies with greater female representation on their boards of directors tend to have better workplace safety records, according to research from the University of Notre Dame.

The study, published in the *Journal of Operations Management*, found that organisations with more women in board positions had fewer workplace accidents and injuries. *However, researchers noted that simply adding women to boards wasn't enough to achieve these benefits.*

"Their influence on future workplace safety increases significantly when they hold powerful positions on key board committees because they feel more comfortable speaking up and get better traction on their ideas," said Associate Professor Kaitlin Wowak from Notre Dame's Mendoza College of Business.



Professor Wowak, along with Assistant Professor Yoonseock Son from Notre Dame and Professor Corinne Post from Villanova University, analysed a unique dataset covering 1,442 firm-year observations across 266 firms from 2002 to 2011.

The team examined OSHA workplace safety data and director-level variables from Institutional Shareholder Services, along with information from Violation Tracker including fines and penalties levied by US regulatory agencies, the US Department of Justice, and state attorneys general.

The research found that boards with higher female representation prioritised and enhanced workplace safety, likely because women directors tended to consider a wider range of stakeholders in their decision-making, exhibited greater risk aversion and favoured regulatory compliance.

These findings were supported by prior studies showing that female directors often have more experience in

community outreach and philanthropy than their male counterparts, making them more likely to advocate for prosocial issues. The researchers said women were more likely to show greater consideration and care for employee wellbeing, including a desire not to cause harm in their decision-making.

Greater focus on risk aversion and regulatory compliance at board level may also improve rule-following and protocols for properly using equipment. For example, boards could request that management monitor and report on safety precautions.

With workplace accidents estimated to cost US employers more than \$170 billion annually, University of Notre Dame Professor Son said the findings could help organisations avoid prioritising efficiency at all costs, which is a critical determinant of unsafe work behaviours.

"A board with more women will specifically ask the top management team to report to them on workplace safety," Professor Son said. *"Women will set the tone at the top that employees must strictly follow rules, including safety guidelines."*

In an extension of their main analysis, the team examined racial and ethnic minority representation on boards and found similar results. The researchers suggested this was because both groups have unique safety-relevant social perspectives while sharing the characteristics of being underrepresented board members whose views tend to be overlooked.

The study also found a synergistic effect when both female and minority board representation increased together.

"With more females in the upper echelons, the effect of similar minority representation on future workplace safety becomes even stronger, and vice versa," Professor Wowak said.

As the first study to suggest that board diversity can enhance a firm's operations through workplace safety benefits, the researchers recommended that companies appoint women and minorities to influential board committees and strengthen accountability measures.

"Having power reduces their inhibitions, limits interference from others and provides more opportunities to speak up and steer discussions," Professor Son said. *"And boards facing greater scrutiny are more likely to leverage their unique perspectives."*

Source Credit: Shutterstock / Jacob Lund – image used for illustrative purposes ONLY

Taken from the National Safety Online 28/01/2026

The Dynamic Swiss Cheese Model

This post by *QHSE Standard on Linked In* was shared with me. At first glance I thought 'what are they on about', that is NOT what James Reason said, but I am a reasonable person and went with the flow of the message. See what you think.

https://www.linkedin.com/posts/qhse-standard_theqhsestandard-swisscheesemodel-jamesreason-activity-7425899444069580800-7Qor/?utm_source=share&utm_medium=member_android&rcm=ACoAAoRWIBVkcLobiANE4rZsJ5WfFXmdLW48g

Your safety barriers are not solid walls. They are moving targets. (*agreed*)

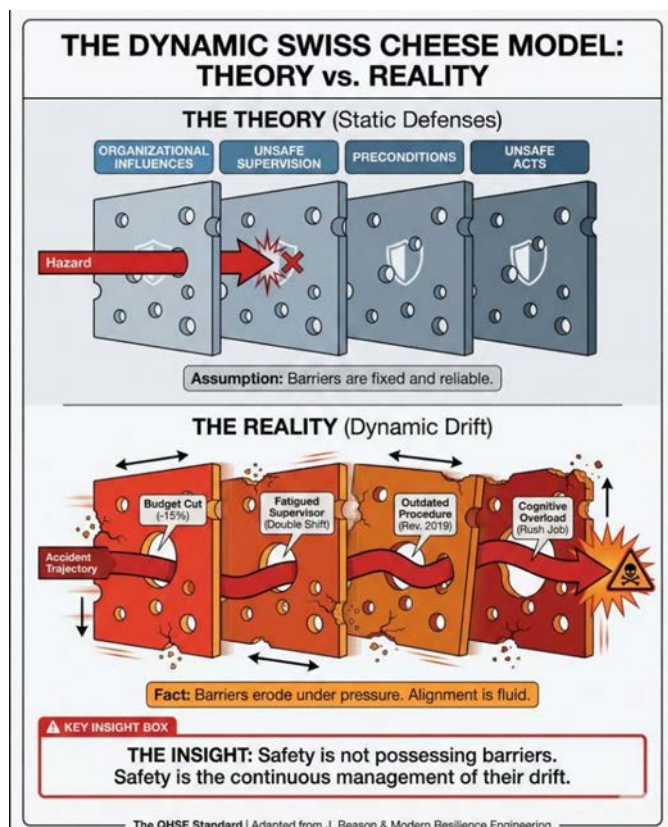
James Reason's "Swiss Cheese Model" is perhaps the most famous diagram in safety history. It taught us that accidents happen when the holes in our defenses align.

But for 30 years, we have misinterpreted it. (*Don't agree*)

They forward the argument that *We treat the "slices of cheese"* (our procedures, training, interlocks, and supervision) *as static, permanent fixtures*. We think that once we write a procedure, that "slice" is in place forever. (*Don't agree*)

THIS IS THE "STATIC FALLACY."

The reality of complex operations is that the cheese is constantly moving. (*agreed*)



Under the pressure of production targets, budget cuts, and time constraints, our defenses "*drift*."

As the infographic illustrates, *the "holes"* are not just abstract gaps. They *are specific, observable realities*:

- The training that expired last month.
- The supervisor who is covering two shifts today.
- The alarm that was silenced because it was annoying.
- The procedure that hasn't been updated since 2018.

In a dynamic organization, success is not about having perfect, hole-free slices (that is impossible). Success is about constantly monitoring the movement of the slices.

Safety management is the endless task of noticing when the holes are starting to align and acting before the arrow passes through.

If you believe your barriers are solid just because they exist on paper, you are preparing for a static world that does not exist.

THE BLACK BOX SCENARIO:

1. The Barrier (*Slice 1*): A "Permit to Work" system.
2. The Drift (*The moving hole*): Over 6 months, the team gets busy. They stop doing site visits and start signing permits in the office to save time. The "hole" gets bigger.
3. The Alignment: A complex job comes up (*Hazard*). The permit is signed without a check (*Hole 1*). The backup supervisor is inexperienced (*Hole 2*). The gas detector battery is dead (*Hole 3*).
4. The Event: The accident happens.
5. The Lesson: The barriers existed on paper, but they had drifted in reality.

You will say:

"We audit our barriers annually."

You are wrong because:

An annual audit is a photograph of a marathon. It tells you where the runner was at that second, not where they are now. You need continuous monitoring of barrier health, not just periodic checks.

THE 24H CHALLENGE:

Pick one critical "slice of cheese" in your operation (*e.g., a specific safety interlock or a critical procedure*).

Do not ask *"Is it there?"*

Ask *"How has it changed in the last 6 months?"*

Has maintenance been deferred? Are the people operating it newer? Has the budget been cut?

Find the Drift.

Many of the responses to this post I agreed with in that I do not believe that James Reason ever suggested that the defenses were static and for us to challenge what defenses were in place at the time of the event. I am going back to my first introduction to this theory back in the early 1990's, but it very much the base of incident causation theory.

Once again -Food for Thought!

*Image Credit: #TheQHSEStandard hashtag#SwissCheeseModel
hashtag#JamesReason hashtag#SafetyScience hashtag#RiskManagement
hashtag#SystemDrift hashtag#OperationalReality hashtag#ComplexSystems
hashtag#Infographic*

IN HEALTH & INJURY MANAGEMENT

Workplaces HEATING Up – What’s the Latest ?

ACTU

The Australian Council of Trade Unions has escalated its campaign for major workplace health and safety reforms, calling for employers to be required to stop work or adjust tasks when specific high temperatures are reached.

Last year, the ACTU urged Safe Work Australia and other bodies to establish WHS regulations addressing heat-related risks using risk assessment criteria similar to those applied to hazardous manual tasks, drawing on an International Labour Organisation review which found several national frameworks “use a heat stress indicator to assess the level of exposure”.

The union’s push stems from a national risk assessment projecting that Australia will face more frequent and severe climate hazards, along with a substantial rise in heat-related deaths.

The ACTU stated that increasingly common heatwaves caused by climate change now represent a significant WHS threat.

ACTU president Michele O’Neil stated that *“There is no excuse for Australia to leave workers exposed without clear, enforceable rules, especially when the [Federal] Government’s own reports project heat-related deaths to more than quadruple in our major cities.”*

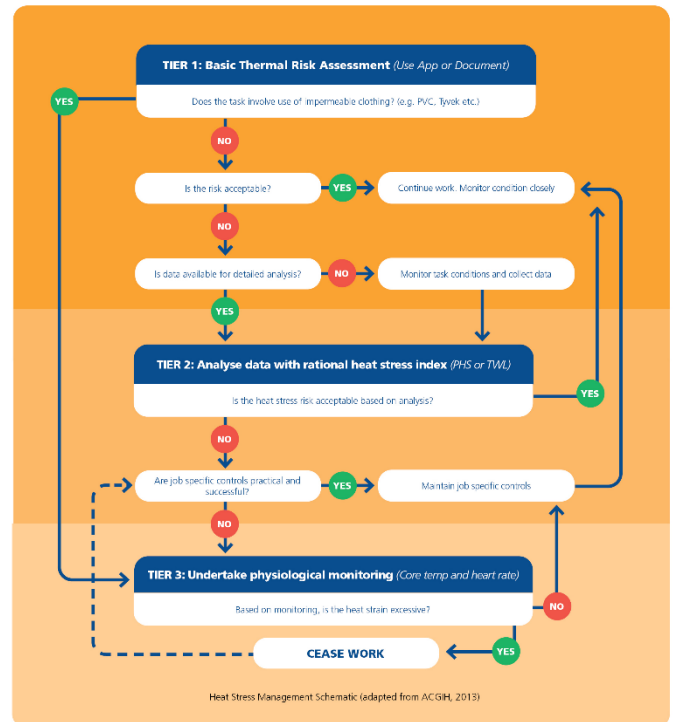
The ACTU has also advocated for dedicated workers’ compensation protections for heat-related illnesses, and amendments to the National Construction Code requiring climate-resilience measures in new residential buildings.

SAFESWORK SA

SafeWork SA has developed [new resources](#) to help employers and workers manage the risks associated with working in hot conditions.

They remind that the **work health and safety legislation does not specify a ‘stop work’ temperature**. A single ‘stop work’ temperature would not capture the range of factors that make working in the heat hazardous, such as humidity, air flow, the source of the heat (internal or external), the physical intensity and duration of the work, individual factors of workers (eg physical fitness and acclimatisation), and if controls can be implemented (eg providing access to shade and/or air conditioning).

They advocate a [3-stage approach to risk assessment](#) based on The Australian Institute of Occupational Hygienists, three-stage approach to risk assessment which is dependent on the level of risk encountered.



- Tier 1 – Basic Thermal Risk Assessment
- Tier 2 – Heat Stress Index Assessment
- Tier 3 – Physiological Monitoring

Click on the above link to view this diagram with supporting guidance and resources.

WORKSAFE WA

Heat stress is a serious risk across Western Australia (WA) particularly during summer, but it can affect workers year round. It occurs when the body cannot balance heat gained from the environment and physical activity with heat released through the skin. If the body cannot restore balance, heat stress may progress to heat illness—ranging from mild symptoms such as rashes, cramps or dizziness to life threatening heat stroke requiring urgent medical attention.

Workers more vulnerable to heat illness include those with medical conditions, on certain medications, pregnant or not acclimatised to hot conditions. Acclimatisation usually takes 7 - 14 days but can be lost after only a few weeks away from hot work.

Click here for [More Resource Information](#) including guides, checklists, posters and risks assessments

SAFE WORK AUSTRALIA

Safe Work Australia provides the following resources below:

- [Managing the risks of working in heat fact sheet](#)
- [Checklist for risk-managing heat in the workplace](#)
- [Guide for managing the risks of working in heat](#)
- [Managing the risks of solar ultraviolet radiation fact sheet](#)
- [Guide on exposure to solar ultraviolet radiation](#)
- [Model Code of Practice: How to manage work health and safety risks](#)

Image Source: <https://www.AdvancedHeadacheCentr.com/Migraines>

Extract from ACTU Media Release 04/02/26 & ABC Health Newsletter 07/08/25

Heatwaves are BAD for our Health

A large portion of the country has been sweating through an intense heatwave during December, January & this month and there looks to be little reprieve coming.

Heatwaves are dangerous to our health, in fact they kill more Australians than all other natural disasters combined, research shows.

The most affected are people with chronic health conditions, the elderly and young children.

But then, I am a reasonably fit 60ish year old and I suffered badly after lining up in the sun for over an hour in 35°C ambient heat on Saturday when I attended the Optus Stadium for the AFL State of Origin match. I don't know what was the radiant heat (from the surrounding concrete) was. I purposely did not take a hat as we were seated in the shade, but did use a 'fan poster' as a head shade whilst we waited in line! Despite drinking copious amounts of water when we were finally admitted, I was feeling 'off' for most of the game and on return home had to lie down under the air conditioning to cool down. I further compromised my situation by having several alcoholic drinks during the course of the day. Multiple causation factors and environmental conditions impacted my health on the day.

INCREASE IN BIOLOGICAL AGING?

Living in extreme heat may accelerate a person's biological age by 14 months, according to a [study from the US](#) (Science Advances 26/02/2025). The authors stated that "Heatwaves and prolonged exposure to hot weather can have [physiological effects on the human body from heart disease to kidney dysfunction](#)."

Australian researchers, not involved in the study, say the results should be read cautiously and there may be other factors involved.

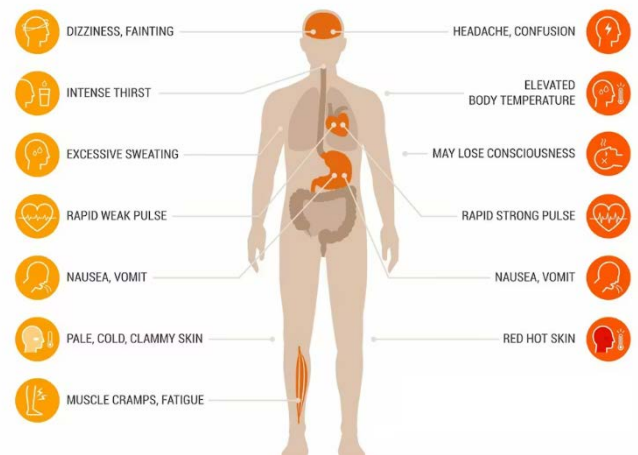


Image credit: <https://images.theconversation.com/files/481141/original/file-20220825-20-etgu94.jpg?ixlib=rb-4.1.0&q=45&auto=format&w=1000&fit=clip>

What's Next?

Further research is needed into whether there are links between biological ageing from extreme heat and mortality rates.

Read the [full article in ABC Science 27/02/25](#)

WHY HEAT KILLS

When your core temperature gets to about 41°C your body essentially starts to cook from the inside.

To protect itself, your body tries to keep warm blood away from your internal organs and redirects it to your skin. And your sweat glands release water and salts, which evaporate to cool your body down.

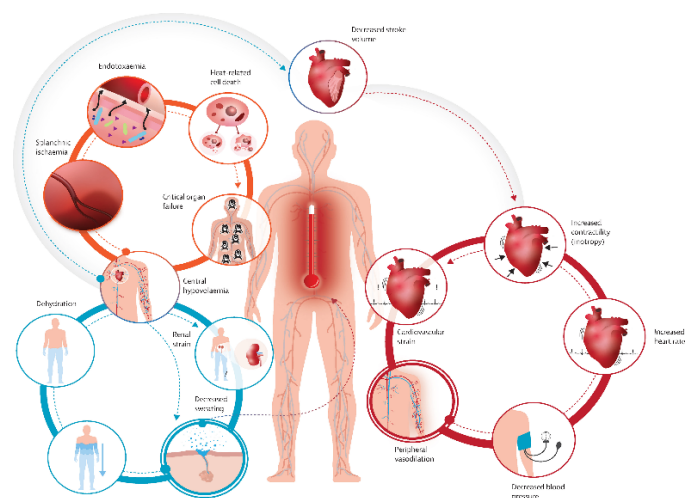


Image Credit: The Lancet [https://www.thelancet.com/cms/10.1016/S0140-6736\(21\)01208-3/asset/eca7fb89-76b6-4a37-94f5-be36427a7d40/main.assets/gr1_lrg.jpg](https://www.thelancet.com/cms/10.1016/S0140-6736(21)01208-3/asset/eca7fb89-76b6-4a37-94f5-be36427a7d40/main.assets/gr1_lrg.jpg)

But cooling the engine room comes at a cost. As you redirect blood to your skin there's less blood (and therefore less oxygen) flowing to your gut.

This can cause your intestines to leak toxins into your blood — a condition known as "leaky gut" — which can lead to multi-organ failure, blood clotting and death. This is what happens when someone has "classic" heat stroke.

Another way heat can kill is by overworking your heart. As blood is diverted to your skin, your heart has to pump harder to maintain blood pressure. This could put you at risk of having a heart attack, especially if you have an underlying condition like heart disease, says Ollie Jay, director of the Heat and Health Research Incubator at the University of Sydney.

"Often people with these problems haven't been diagnosed and then they get over-exposed to heat and then boom, it happens." Re-routing blood to the skin can also be a problem for your kidneys.

As less blood flows to your kidneys, your risk of going into renal failure increases. The risk is even worse when you're dehydrated.

In hot areas of Central America and South-East Asia there's an epidemic of kidney disease among agricultural workers who endure hot temperatures day in, day out, with few breaks.

Even small increases in temperature for short periods of time can also affect our brain and mood.

Heat can disturb communication between nerve cells which can lead to irritability or impaired judgement.

It can exacerbate psychiatric conditions like bipolar disorder and depression, and has been [linked with increased rates of suicide](#).

RISKS BEYOND THE TEMPERATURE GAUGE

Temperature is one of the main contributors to heat stress but it doesn't stop there.

"The environmental factors that impact how hot you get are dependent on temperature, humidity, wind, and the amount of solar radiation that's in the environment. And it also matters what you're doing and what you are wearing," Professor Jay says.

Humid days can be particularly dangerous, adds University of New South Wales climate scientist Sarah Perkins-Kirkpatrick.

Sweating becomes ineffective as a cooling technique when the air is saturated, because it can't evaporate from your skin. This is also why the "feels like" temperature is so much higher on a humid day.

Wind, on the other hand, can make you feel cooler, Professor Jay says. That's not to say dry heat doesn't

carry dangers. In those climates, the risk is how much you can sweat in the first place.



Image Credit: <https://apac.tencatefabrics.com/hs-fs/hubfs/APAC/Heat-related%20illness%20risk%20factors.jpg?width=529&name=Heat-related%20illness%20risk%20factors.jpg>

THE LIMITS OF HUMAN SURVIVABILITY

Humans are remarkably well adapted to survive the heat.

[Research has shown](#) our body can learn to better cope with heat in a matter of weeks (up to a point), if it's sufficiently exposed to high levels of repeated heat stress, through physiological changes like producing more sweat.

Though trying to replicate this in everyday life may not be as effective, says Professor Jay, because of air-conditioning and variable weather.

[There is also evidence](#) to suggest deaths from heatwaves increase when the average heatwave temperature is more than 7C hotter than the average temperatures in that location over the past month.

Western Sydney University health economist Thomas Longden, who was an author of the study, said this may explain why heatwaves can be more deadly in milder climates, like Melbourne or even Montreal, which have had deadly heatwaves in the past.

"That could either be the body's response to that shock of heat, or also our behaviour and our lack of adaptation during those heatwave events," he says.

But even with acclimatisation, good health and hydration, researchers say there comes a point where the body simply cannot survive.

And understanding this limit is becoming more important in a warming climate with a growing and ageing population.

To describe this, researchers often use what's known as the "**wet-bulb temperature**" — the figure that would be read by a thermometer when it's covered in a water soaked cloth. This mirrors the way sweat can cool the body.

For years, a 35C wet-bulb temperature has been thought of as the theoretical upper limit, **but researchers are starting to understand that's not always the case** when you factor in more realistic human physiology.

In some scenarios — particularly **hot, dry environments** — [research has found](#) the wet-bulb temperature limit is much lower. The 35C limit is what the thermometer would read at 100 per cent humidity, but it doesn't have to be that exact combination.

For example, a higher temperature but with lower humidity, such as 43C with 60 per cent humidity, would be the equivalent.

Click [HERE](#) To Read the Full ABC Health Article By Paige Cockburn and Tyne Logan, 11/12/2023

Extracts from ABC Health Newsletter 29/01/26

Working Safely when there is Bushfire Smoke

WorkSafe WA defines 3 steps to work safely when there is bushfire smoke.

PREPARE

- talk to your workers about working safely when there is bushfire smoke
- identify sensitive workers and talk to them about their needs and how to keep them safe. Sensitive workers include old workers, workers with heart or lung conditions, workers with diabetes, pregnant workers, workers with or recovering from respiratory illness, workers with disabilities.
- check door and window seals.
- check air conditioners are working properly and that filters have been cleaned or replaced.



- make personal protective equipment (PPE) available, such as P2/N95 masks and eye protection, and provide guidance on how to use them correctly.
- communicate with workers working remotely in a bushfire-prone area.

The also recommend visiting the Safe Work Australia's webpage guidance on "[Working Near Bushfires](#)".

MONITOR

- listen to local radio for emergency updates – ABC 7.20am (*soon to be 102.5fm*)
- use the [Australian Fire Danger Rating System](#) and [Emergency WA's](#) website to monitor local conditions.
- check your [air quality index](#).
- regularly check the [Department of Fire and Emergency Services \(DFES\) website](#) for advice.

REDUCE RISK OF BUSHFIRE

If you work in a fire prone area, ensure that:

- ✓ flammable chemical and liquid carriers are properly maintained, such as fuel, to minimise the risk of unintentional leakage onto the ground
- ✓ dispose of litter correctly, particularly cigarette butts and glass
- ✓ you do not use equipment that could generate sparks or flames near combustible materials
- ✓ check the rules of total fire ban.

A trained health and safety representative (HSR) may direct a worker in their workgroup to cease work if the HSR has reasonable concern that performing the work would expose the worker to a serious risk. Before issuing the direction, the HSR must consult with the PCBU. Read the information sheet on the powers, functions and rights of and HSR.

Extract from WorkSafe WA Website

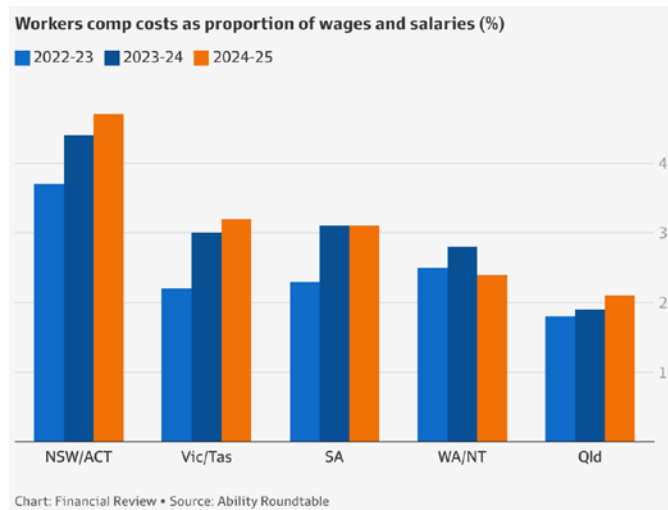
Australian Workers' Compensation Trends

RISE IN CLAIM COSTS

Most workers compensation schemes around the country are experiencing challenging circumstances due to rising claims costs. These are highlighted in a recent article by insurance brokers AON.

Australia's workers' compensation landscape is undergoing pronounced challenges—**costs are rising**,

claim durations are lengthening, and, most notably, the complexity of claims is increasing.



Particularly, psychological injury claims are driving a systemic shift, affecting not just insurers and the workforce, but directors and boardrooms across the country. They highlighted:

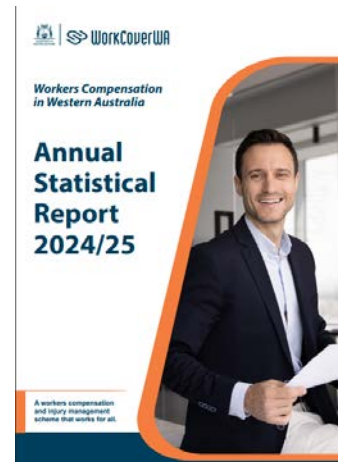
- Escalation in Large and Long-Duration Claims - *Claims exceeding \$500K have quadrupled between 2014-2023).*
- Psychological and Complex Claims: The New Frontier - *marked increase in psychological and complex claims. Whilst overall claim frequency remains stable, the average cost per claim is rising, largely due to mental health-related cases.*
- Financial Pressures and Return-to-Work Challenges – *financial effects of complex claims with an average of premium rate increase of 23% & Psychological Claims taking longer to resolve with only half of workers returning to work within a year in comparison to 95% of physical claims.*
- The Role of Psychosocial Hazards and Workplace Programs - *workplace factors that may cause psychological harm—are an increasing focus for regulators and employers.*

Click [HERE](#) to read the full article

ANNUAL WORKCOVER WA STATISTICAL REPORT

Pressures on claims costs and poorer RTW rates are seen in the most recent annual WorkCover WA statistical report as well as rising mental injury claims (100% over past 3 years to now represent 5.5% of time lost claims). These psychological claims are longer and more costly than physical claims and are typically more prevalent in the public sector.

Click on the report below to see the full report.



LEGISLATIVE CHANGES IN NSW & VICTORIA

Both Victoria and NSW of late have introduced legislative changes **to restrict psychological claims** given the significant impact they were having on scheme viability in those states. A summary of the most recent NSW changes is provided by brokers Lockton's.

NSW Parliament passed a [second workers compensation reform bill](#) on 4 February 2026, following the passage of the first reform bill in November 2025. The bill is now awaiting assent.

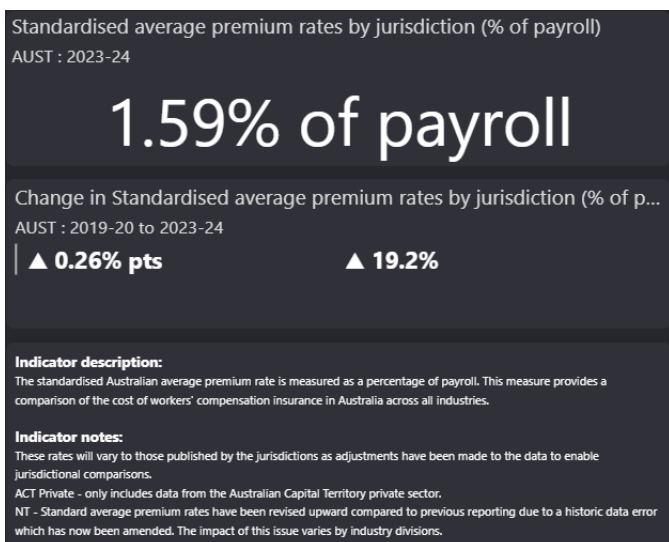
On 30 September 2025, [WorkSafe Victoria released its long-awaited Occupational Health and Safety \(Psychological Health\) Regulations 2025](#) ("the Regulations"). The new Regulations came into effect on 1 December 2025, placing ongoing obligations on Victorian employers to ensure their systems and practices meet the updated psychological health requirements.

Accompanying the new Regulations are the Compliance Code: Psychological Health ("the Compliance Code" or "the Code"), a practical guide designed to help organisations meet their obligations under both the Occupational Health and Safety Act 2004 ("the OHS Act") and the new Regulations.

WA LEADING BEST MANAGEMENT

Despite these claim cost pressures, **the WA scheme remains one of the best managed with premium rates lower than most other jurisdictions.**

Refer to the [SafeWork Australia Jurisdictional Comparison](#) for the full report



As highlighted at the OHS event in November, the [It Pays to Care Policy](#) outlines many ways schemes, insurers, employers and providers can help improve return to work and reduce claims costs.



It Pays to Care
An imperative for change and call to action



Watch out for more OHS will be doing this year with **It Pays to Care** to promote better occupational health outcomes.

Psychologists View on the Seven Types of Rest

Have you ever found yourself still exhausted and deflated after an eight-hour sleep?

It could be that sleep isn't the reset you need.

You may have heard of the "seven types of rest". It's the sort of concept that pops up on social media, podcasts or in an article from time to time. But, how useful is the idea and can it help us look after and energise ourselves?

WHAT ARE THE SEVEN TYPES OF REST?

The seven types of rest, according to internal medicine physician and author Sandra Dalton-Smith are:

1. Physical Rest Recharges our body through solid sleep and relaxation. EXAMPLES: - Sleep 7+ hours or nap for 30 mins. - Get a massage or take a hot bath. - Get involved in a yoga class.	2. Mental Rest Relieves our mind by taking short breaks during work. EXAMPLES: - Spend 5-10 minutes journaling. - Listen to relaxing music. - Practice mindfulness.
3. Emotional Rest Involves expressing feelings to reduce stress. EXAMPLES: - Speak to a therapist. - Share your feelings with others. - Identify and express your emotions safely.	4. Social Rest Detoxing from digital life and investing in relationships. EXAMPLES: - Identify your social needs. - Have lunch with a friend. - Set boundaries with draining people.
5. Creative Rest Inspires awe and stimulates inner self. EXAMPLES: - Kick open the barbecue. - Read a book or watch a movie. - Visit a museum, exhibition, theater, or concert.	6. Sensory Rest Reduces overload from noise and lights. EXAMPLES: - Go fishing. - Sit in nature for some time. - Create moments of silence and calm.
7. Spiritual Rest Connects us to values and purpose. EXAMPLES: - Meditate. - Volunteer. - Reflect on what gives you meaning.	

Image Credit: Cabl Data Sheet 02/02/25

These are the premise of Dr Dalton-Smith's book *Sacred Rest: Recover Your Life, Renew Your Energy, Restore Your Sanity*, published in 2017. Dr Dalton-Smith's Christianity is reflected throughout her book, but it's usually less dominant when the ideas are interpreted by others.

She recommends identifying the areas where you might have a "rest deficit" and prioritising activities that address it. This is how Dr Dalton-Smith describes the seven types of rest:

Physical rest includes sleeping and napping, but also "active physical rest" such as dynamic stretching and breathing exercises.

"Mental rest is your mind's comfort zone" and it might include meditating or blocking "low-yield activities" into 30-minute chunks (managing emails, menial office tasks or catching up on the news).

Emotional rest might be opening up with the people you feel most yourself around (and re-evaluating the time you spend with people who leave you anxious).

Social rest "will increase your sense of belonging and purpose" and could look like prioritising face-to-face time with someone who puts you at ease (*perhaps a partner*) or connecting with a community group or championing a meaningful cause you care about.

Sensory rest could include a set "unplugged" period of the day, balancing out a noisy period with some silence and enjoying periods of fresh air.

Creative rest could look like spending time in nature. Dr Dalton-Smith recommends building sabbaticals — as

Page 30

Divided into six segments with titles including personal, professional and physical, the wheel includes activity suggestions like "get a coffee with a friend" and "exercise" under each one.

"We might pick a category for that person to work on between sessions and then at the following session, they'll report back to me about what they might have tried."

Like the seven types of rest, Ms O'Doherty says the self-care wheel "gives us a gentle reminder to look after ourselves in different ways".

Ms Phals sometimes asks clients to block out an entire day in their month to do exactly what they want.

She says it isn't always possible, but someone might be able to take an afternoon, or enough time for an exercise class they find rewarding.

A **"more and less"** life audit is something else Ms Phals encourages clients to do towards the end of the year.

You can create your own audit categories, but they typically include mental health, physical health, finances, hobbies, social life and romantic life, she says.

She writes a category at the top of the page, splits it into two columns and writes down what went really well on one side and what you want to do less of on the other.

"Then you go through your highlights and go, 'what do I need more of for the upcoming year, and based on that, what's one small change that I could make for myself'."

"Look at what's working really well and [ask] 'how will I just continue doing that ... and then what do I need to incorporate more of.'"

Image credit: <https://healthymale.org.au/iStock-1920397932.jpg>

Taken from **ABC Lifestyle/Mental Wellbeing** 19/01/26

How does Capacity for Work Change Before and After Psychiatric Treatment?

A Norwegian study of more than 2600 patients (with everything from mild to severe mental health challenges) investigated how routine mental health treatment impacts work disability outcomes over time. They examined whether receiving usual care for mental disorders influences work status.

Norwegian University of Science and Technology (NTNU) researchers seeking to understand the role of psychiatric treatment in return to work following mental health challenges have found that it is no guarantee of success. *"For many people, the start of treatment does not mark a return to working life, but rather the beginning of*

prolonged or increasing absence," said Jakob Lundqvist, a PhD research fellow at NTNU's Department of Psychology.

With a focus on Norway, which ranks at the very top among the OECD countries when it comes to absence due to illness and disability benefit, the study — published open access in BMC Health Services Research (doi: [10.1186/s12913-025-12856-w](https://doi.org/10.1186/s12913-025-12856-w)) — found that the number of people granted sick leave increased sharply in the months before treatment began, but decreased somewhat afterwards. Notably, it was observed that the use of long-term benefits — such as, in Norway, the work assessment allowance ([AAP](#)) — also increased. What this means is that the level of absence due to illness remained relatively stable in the year following the start of treatment.

"The result was that over 30% of the respondents were on sick leave, receiving AAP, or on disability benefit one year after treatment for mental health problems had begun," Lundqvist said. Drilling down into the data, three groups were identified as at particularly high risk of ending up on a pathway towards increased incapacity for work, these were: women, elderly people, and patients receiving specialist healthcare services.

The research also **suggests that the speed with which patients receive access to treatment** has an impact, in settings where the referral process and waiting time before starting treatment were usually longer — resulting in an absence from



work for long periods of time before treatment begins — increasing the risk of patients dropping out of working life permanently. *"This may mean that it is not just about the patients' mental health problems, but also about how the health services are organised,"* Lundqvist said.

Lundqvist, a psychologist, also observes that perspectives of those providing treatment in Norway may be playing a part — the author observing that **psychological treatment often focuses on reducing symptoms, while ability to function in everyday life and capacity for work are often not prioritised**. *"Sick leave should not be seen as a form of treatment,"* Lundqvist said. *"It may be necessary, but it rarely improves the person's capacity for work. If we are to succeed, clinicians must strengthen both ability to function in everyday life and capacity for work in parallel with symptom relief. Only then can we reverse the trend."*

Image Credit: jobsandskills.wa.gov.au/-jswa-mentalhealth-intro1.jpg

Extract from **Safety Solutions** 18/12/2025

New Employer Resources from ARPA

The [Australian Rehabilitation Providers Association](#) (ARPA) has unveiled **Good to Go**, a new National toolkit of resources for employers to make return to work simpler, safer and more certain. However, this toolkit is **ONLY available to Members**.



Find practical tools like a 'Return to work readiness quiz' and email generators, Guides and cheat sheets on the Good to Go website now.

Alternatively, you can access [FREE Resources](#) from It Pays to Care.



Heart Attack Symptoms in Women are Different.

Women often experience heart attack symptoms that differ from the "classic" chest-clutching signs commonly seen in men. Instead of intense chest pain, women are more likely to have subtle or atypical symptoms such as:

- ✚ Shortness of breath
- ✚ Nausea or vomiting
- ✚ Unusual fatigue
- ✚ Jaw, back, or neck pain
- ✚ Dizziness or light-headedness

These **symptoms can easily be mistaken for stress, indigestion, or exhaustion, leading many women — and sometimes even clinicians** — to overlook the warning signs. This delay in recognition contributes to women being more likely to suffer severe outcomes or "silent" heart attacks.

Articles on this topic emphasize that women's heart attacks are frequently misdiagnosed because their symptoms don't fit the typical male-pattern presentation. Awareness is crucial: early recognition and rapid treatment dramatically improve survival.

ABC Health Reporter Declan Bowring [provides case studies](#) where symptoms were trivialised and misdiagnosed by health professionals. Cardiologist Nikki

Bart said that while women made up half of the population, they were often excluded from heart disease research. *"Even now, the population of women enrolled in studies is much lower than men,"* Dr Bart said.

"There's still a lot that we're working out in terms of heart disease and women."

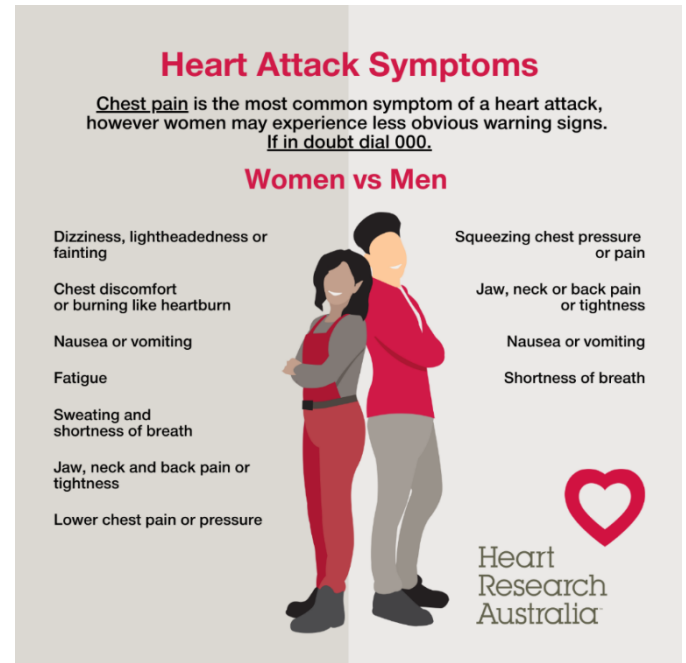


Image credit: Heart Research Australia <https://heartresearch.com.au/wp-content/uploads/2024/11/Heart-attack-symptoms-1024x1024.png>

Extract from ABC Health, 09/10/2025

Malaria Contracted During Transit Travel

Our President Lance Keys (Anglo American) shared learnings from an incident that occurred late last year when an AA Team Member contracted Malaria during a transient visit to a project in Angola.

INCIDENT

A AA team member contracted Malaria following a recent visit to an Angola project. While in the field, the individual adhered to recommended preventive measures, including wearing long-sleeved clothing, using mosquito repellent, and spraying their tent with insecticide.

However, **during transit** through local hotels, protection was significantly reduced. These accommodations had high mosquito presence and lacked basic controls such as insecticide spraying, mosquito nets, and repellents. The team member believes exposure likely occurred at one of these transit hotels.

Symptoms developed several days after leaving Angola, consistent with Malaria's incubation period. Fortunately, the team member was carrying Malaria test

kits and treatment, enabling early diagnosis and prompt self-treatment.

It is important to note that the team member was not using Malaria prophylaxis prior to contracting the illness.

PLANNING

Before traveling to new locations where health risks may differ from your base location, seek advice from a qualified Travel Doctor.



If you are visiting a Malaria-endemic area, it is strongly recommended that you:

- ✓ Use Malaria prophylaxis as prescribed by your doctor.
- ✓ Carry a Travel Medical Kit that includes Malaria self-test kits and treatment.
- ✓ Keep test kits and treatment accessible during long-haul flights (in carry-on luggage).
- ✓ Maintain access to test kits and treatment for at least eight (8) weeks after potential exposure.

Additionally, consider packing a mosquito net and repellent for use in transit hotels, where mosquito control measures may be limited.

MALARIA TREATMENT AND RESPONSE

Malaria symptoms can vary and often resemble common illnesses such as cold, flu, or even COVID in the early stages. If you have been in a Malaria-endemic area within the past two months and become unwell, test for Malaria immediately. Symptom onset can be rapid, so do not delay testing. Malaria treatments are highly effective, and improvement is typically noticeable within hours if Malaria is the cause.

Seek medical advice promptly if you feel unwell during transit or after travel and always provide your doctor with details of your recent travel history to support timely and accurate diagnosis.

AA recommended to their personnel that if they were in a remote location without access to a health professional, to utilise their EMERGENCY App installed on their phones and to inform the doctor if they had Malaria treatment available.

They also advised personnel who were on a long-haul flight and have high confidence that they had Malaria, to consider starting treatment immediately—discuss this scenario in advance with your doctor when the medication is first prescribed.

Important Notes:

- Malaria self-test kits can produce false negatives. If you have recently been in a Malaria zone, perform multiple tests and follow your doctor's initial treatment advice.
- Do not delay treatment, as deterioration can be rapid and decision-making may become impaired.
- Always inform someone of your symptoms and any self-treatment applied, this could be a Flight Attendant, in case your condition worsens.

VIGILANCE

If you are planning to visit a Malaria-endemic area, take time to **familiarise yourself with the common signs and symptoms of Malaria**. Early recognition is critical for timely treatment.

Ensure you have both **company and personal travel insurance details readily available** and stored with your travel documentation for quick access in case of an emergency.

This is what one Global Company is actively doing in response to a preventable health incident. What is the approach of yours? Complacency can emerge in large organisations where irregular field visitors do not fully understand field hazards.

Image credit: WHO. Stock image used is for illustrative purposes only.

Extract from AA DG SHEC Alert Nov 2025

EU Guide - LONG COVID: Assessing Work Ability, Adapting the Workplace & Supporting Rehabilitation

This Practical Short Guide for the workplace was recently produced by the European Agency for Safety and Health at Work 2025 – <http://ohsa.europa.eu/en>



This guidance positions long COVID as a chronic, fluctuating condition requiring individualised, multidisciplinary, and empathetic management. Employers play a central role in enabling safe, sustainable return to work through:

- ✓ Early communication
- ✓ Flexible, adaptive work design
- ✓ Collaboration with occupational health
- ✓ Awareness of symptom complexity
- ✓ Commitment to non-discrimination

IDENTIFYING LONG COVID IN THE WORKPLACE

- Diagnosis is made by a GP; occupational physicians may support evaluation.
- Workers may require sick leave, rehabilitation, and ongoing communication due to fluctuating symptoms.
- Return to work should not occur “unless an affected worker is able to handle everyday life.”

SYMPTOM DURATION AND VARIABILITY

- Symptoms may last days, months, or years, with unpredictable relapse patterns.
- Over 200 symptoms are documented, affecting multiple organ systems.
- Common symptoms include fatigue, cognitive impairment, breathlessness, joint pain, sleep disturbance, and post-exertional malaise.

REHABILITATION PRINCIPLES

Rehabilitation is defined as a set of methods to restore physical and mental function.

Key principles:

- Individualised, symptom-specific programmes
- Early involvement of occupational medicine
- Strong communication between worker, employer, and health professionals
- Gradual reintroduction of physical and cognitive tasks.

ASSESSING WORK ABILITY

Assessment includes:

- Symptom severity
- Physical and cognitive capacity
- Mood and sleepiness (especially for safety-critical roles)
- Fit-for-work determination by occupational physicians. Re-evaluation is essential due to symptom fluctuation.

WORKPLACE ADAPTATIONS BY SYMPTOM CATEGORY

The guide defines types of workplace adaptations by symptom category that provide guidance on:

- Fatigue
- Post-Exertional Malaise (PEM)
- Orthostatic Intolerance
- Breathing Impairment
- Arthralgia
- Other Symptoms – sensory and neuro-muscular
- Sleep Disturbances
- Cognitive Impairment (“Brain Fog”)

MENTAL HEALTH CONSIDERATIONS

Symptoms may include low mood, anxiety, sleep disruption, irritability, and cognitive changes.

The guide notes signs such as “persistent low mood and sadness” and “restlessness, uncontrollable... thoughts.”

Support includes:

- Early involvement of mental health professionals
- Flexible scheduling
- Reduced stress exposure
- Positive, stigma-free workplace culture.

RETURN-TO-WORK PLANNING

- Always phased, starting with light tasks
- Emphasis on pacing, energy conservation, and rest
- Collaborative planning between employer, worker, OSH, HR, and occupational physicians
- Work reorganisation may be required.

AVOIDING DISCRIMINATION

Employers must:

- ✓ Recognise long COVID as potentially disabling
- ✓ Prevent stigma, especially for cognitive and mental health symptoms
- ✓ Provide reasonable adjustments (telework, workload redistribution, schedule changes)
- ✓ Consider gendered impacts, as “a higher percentage of women of working age are affected”

USE OF SOCIAL SECURITY AND GOVERNMENT SUPPORT

Employers should understand national provisions for:

- ✓ Part-time return to work
- ✓ Financial support for workplace adaptations
- ✓ Rehabilitation programmes

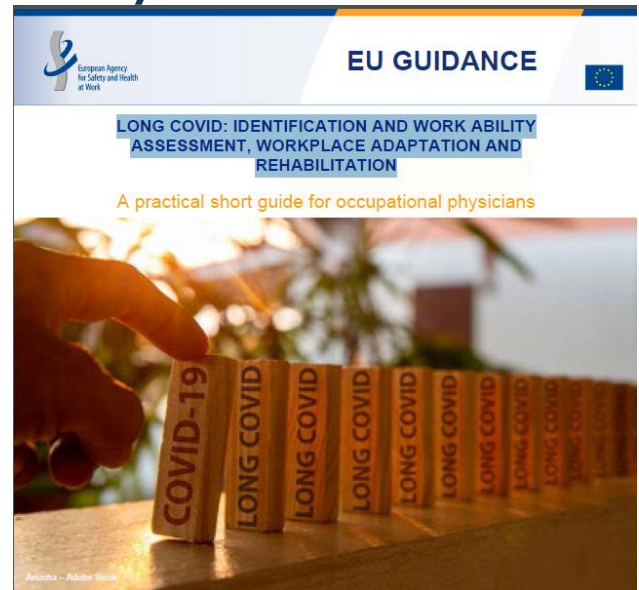
The guide directs employers to MISSOC for country-specific social protection information.

In Australia the [National Post Acute Sequelae of COVID 19 Plan](#) was produced in Feb 2024 and provides the national approach.

Image credit: EASHAW 10/04/25

Taken from European Agency for Safety & Health at Work 10/04/2025 and Australian Government Dept of Health, Disability and Aging Feb 2024

EU Guide for Occ. Physicians - LONG COVID: ID & Work Ability Assessment



Long COVID impacts workers’ physical, cognitive and mental health. ***This guide for occupational physicians*** and occupational health services offers information on long COVID symptoms and scales that can be used to assess work ability. It supports occupational physicians in helping workers with long COVID return to work safely and sustainably.

- ✚ Long COVID has 200+ symptoms; highly individual and fluctuating.
- ⚠ ***Return to work only when*** daily home activities are manageable.
- 🧠 Occupational physicians coordinate diagnosis, referrals, and workplace communication.
- ✓ Self-rehabilitation: pacing, energy management, symptom diaries, gentle exercises.
- 🚩 Red flags: worsening breathlessness, chest pain, cognitive decline, severe fatigue.
- 📋 Work ability assessment uses WAI, physical tests, cognitive and mental health scales.
- 📋 Symptoms often require tailored adjustments and phased return-to-work plans.
- ① Key issues: fatigue, PESE, orthostatic intolerance, dyspnoea, joint pain, sleep problems.
- 😞 Cognitive issues (“brain fog”) may require workload adjustments and cognitive aids.
- 🏡 Supportive, non-discriminatory workplace culture is essential.

 Rehabilitation and workplace adjustments must be reviewed regularly.

Occupational physicians and rehabilitation specialists must regularly update related practices as well as facilitate communication and workplace accommodations. Including the worker, employer, health service professionals and occupational safety experts is paramount to ensure successful rehabilitation, phased return to work and worker retention.

Image credit: EASHAW 10/04/25

Taken from European Agency for Safety & Health at Work 10/04/2025

Common Sweetener May Damage Critical Brain Barrier, Risking Stroke

A recent study from the University of Colorado suggests that **erythritol, a popular sugar alcohol sweetener** used in many "sugar-free" and "keto-friendly" products, may damage the critical blood-brain barrier and increase the risk of stroke.

KEY FINDINGS FROM THE RESEARCH:

-  **Barrier Damage:** In laboratory experiments, researchers exposed blood-brain barrier cells to typical post-consumption levels of erythritol (like those found after drinking one diet soft drink) and observed a chain reaction of cell damage.
-  **Blood Flow Disruption:** The sweetener disrupted the blood vessels' ability to regulate blood flow by reducing nitric oxide (which widens vessels) and increasing endothelin-1 (which constricts them).
-  **Blood Clot Risk:** Erythritol was found to trigger oxidative stress and hinder the body's natural "clot buster" mechanism, potentially leaving clots free to cause an ischemic stroke.

significantly higher risk of major cardiovascular events, including heart attacks and strokes.

REGULATORY STATUS AND CONSUMER CAUTION

Despite the findings, erythritol is currently classified as **"generally recognized as safe"** (GRAS) by the U.S. Food and Drug Administration (FDA), partly because it occurs naturally in small amounts in some fruits and fermented foods. However, the **quantities used in processed foods are far higher than natural levels.**

Researchers emphasize that **more studies are needed**, but they urge consumers—especially those with existing cardiovascular risks—to monitor their consumption of products containing erythritol.

To read the full article go to <https://www.sciencealert.com/common-sweetener-may-damage-critical-brain-barrier-risking-stroke>



Image Credit: WhatSugar.com

Extract from Science Alert/Health 10/02/26 By Havovi Chichger, The Conversation

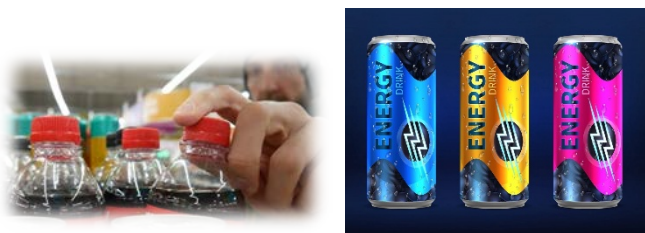


Image Credit: Stockah/Getty Images Plus & <https://www.istockphoto.com/photos/soft-drink-advertising>

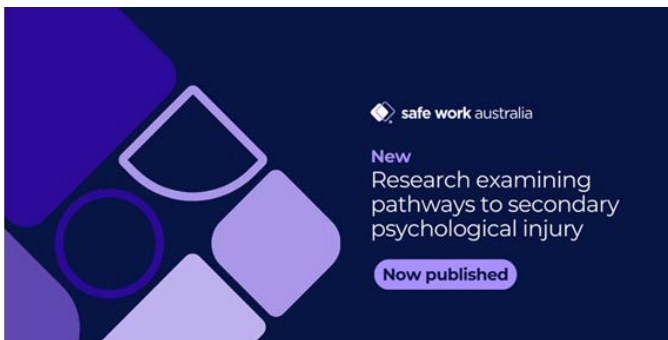
ALIGNMENT WITH PREVIOUS HUMAN STUDIES

These laboratory findings support earlier large-scale observational studies that found a strong association between high levels of erythritol in the blood and a

IN PSYCHOSOCIAL HEALTH

Research Examining Pathways to Secondary Psychological Injury

Safe Work Australia has released an independent research report conducted by Monash University, Research examining pathways to secondary psychological injury.



The report examines the key drivers that contribute to an injured worker developing a secondary psychological injury. A secondary psychological injury refers to new or worsening mental health symptoms that arise during a workers' compensation claim.

The research finds that a secondary psychological injury is more likely to occur when a worker's capacity to cope with stressors is reduced following a workplace injury or illness.

Uncertainty around claims processes, financial pressures and unclear recovery expectations were identified as major factors influencing coping and recovery.

The report also highlights the importance of interpersonal interactions. The quality of communication and support from supervisors and claims managers can significantly affect a worker's psychological wellbeing during the claims process, with unsupportive interactions increasing the risk of secondary psychological injury.

To help reduce these risks, the report recommends:

- Adopting a nationally consistent working definition of secondary psychological injury
- Developing consistent approaches for risk screening and monitoring
- Reducing uncertainty for workers across the claims journey

- Minimising repetitive or unnecessary information requests, and
- Providing additional support to workers with pre-injury mental health conditions and those with long duration claims.

The report also identifies key areas for further research, including the economic and financial impacts of secondary psychological injuries and the effectiveness of current interventions. These insights will inform further work under Safe Work Australia's National Return to Work Strategy.

Taken from Safe Work Australia Website 10/02/2026

LGBTIQ+ Workers are 1.5x More Likely to Experience Discrimination and/or Harassment

Australian data reveals that LGBTIQ+ people are 1.5 times more likely to experience discrimination and/or harassment at work, with experiences of LGBTIQ+ worker exclusion increasing.

Data from Diversity Council Australia's ([DCA](#)) 2025–2026 [Inclusion@Work Index](#) has revealed that LGBTIQ+ workers are 1.5 times more likely to experience discrimination and/or harassment at work — with 46% of LGBTIQ+ workers reporting experiencing discrimination and/or harassment at work in the past year, compared with 26% of non-LGBTIQ+ workers.



The findings also reveal that — with respect to the Inclusion@Work Index — discrimination and/or harassment against LGBTIQ+ workers has increased; when the last Inclusion@Work Index was released in 2024, 39% of LGBTIQ+ workers reported experiencing this type of exclusion.

“Our findings point to a persistent challenge within Australian workplaces. Organisations need practical, evidence-based approaches that address the systemic issues contributing to LGBTIQ+ exclusion,” Diversity Council Australia CEO Catherine Hunter said.

“Workplaces that invest in inclusive cultures, visible and supportive leadership and clear policies are better positioned to reduce discrimination and create environments where all employees feel safe and respected.”



Other key findings from DCA’s latest data include that:

- 49% reported that people had made incorrect assumptions about their abilities based on their identity, compared with 33% of non-LGBTIQ+ workers;
- 41% said they had been ignored or treated as if they didn’t exist, compared with 30% of non-LGBTIQ+ workers;
- 39% of LGBTIQ+ workers reported being left out of work social gatherings, compared with 29% of non-LGBTIQ+ workers.

In a statement, DCA said that such behaviours are often dismissed as less serious in comparison to more overt forms of discrimination or harassment, yet its research shows they have real consequences for both employees and organisations.

By way of example, DCA pointed to the fact that workers who were frequently excluded from social gatherings were more likely to report work negatively impacted their mental health, lower job satisfaction, reduced engagement, and a higher likelihood of leaving their job. Such exclusion was also shown to undermine collaboration, innovation and customer service, DCA said.

“Everyday exclusion matters. It undermines wellbeing, drives people out of organisations, and weakens team performance, all of which can negatively impact productivity,” Hunter said.

“Organisations that take a deliberate, evidence-based approach to inclusion are better placed to reduce exclusion and support LGBTIQ+ employees so they can feel safe to be themselves at work.”

If you are affected by any of the issues discussed in this article, 1800RESPECT has a 24/7 support service that can help; please call 1800 737 732.

Taken from Safety Solutions, 02/02 2026

Is Reporting Workplace Sexual Harassment 'Worth It'?

Two Australian studies — one a survey of over 200 workers — set out to understand why most people who experience sexual harassment at work still do not report it.

Despite recent legal reforms and increased emphasis on upholding workplace conduct policies, two recent Flinders University studies — supported by the 2023 SafeWork South Australia Augusta Zadow Awards — suggest that ***it is not just the fear of retaliation that stops people from speaking, but also feeling unsupported by systems that will not protect them.***

The first study, a survey of more than 200 Australian workers who had experienced or witnessed sexual harassment, sought to understand the internal psychological factors — beyond external barriers like fear of retaliation — that influenced their decision on whether to report or not. The second study, a historical review of workplace sexual harassment reporting and investigation, supported the first by suggesting that the challenges it revealed are not new.



SURVEY

Only around one in five people who experienced harassment went on to report it. In the context of the survey, Senior Lecturer in Mental Health and Wellbeing, and Director of the Flinders Workplace Wellbeing Lab, Dr Annabelle Neall, said the research identified three key psychological needs that influence reporting.

These were: autonomy (feeling in control), competence (feeling capable), and relatedness (feeling respected and supported). And when — by unclear processes, fear of backlash or a lack of trust in the system — these needs are undermined, people are far less likely to speak up.

*“The decision not to report wasn’t just about external risks like losing a job, it was also deeply tied to internal struggles,” Neall explained. **“People weigh up whether reporting will make things better or worse and they often concluded it wasn’t worth the emotional toll, the risk to their reputation or the likelihood that nothing would change.”***

Survey participants described feeling unsure whether their experience ‘counted’ as harassment, fearing career damage and doubting that reporting would lead to meaningful action. With burdensome steps and little reassurance, some said the process itself felt punishing, while many worried about being labelled as weak or troublemakers. In the words of one worker: *“It didn’t seem like it would be worth the emotional upheaval.”*

Professor Lydia Woodyatt, a co-author and Professor in Psychology, adds further insight — noting that reporting is not just a procedural step.

“Victims and witnesses feel that they’re having to choose between protecting themselves and speaking up, and that pressure makes the decision emotionally charged and very difficult,” Woodyatt said. ***“If people believe the system won’t provide them justice or protect them, they stay silent. That silence isn’t about indifference, it’s about survival.”***

REVIEW

Revealed by the historical review of workplace sexual harassment reporting and investigation was that, while laws and policies have evolved since the 1980s, reporting systems remain largely ineffective. The review highlighted persistent problems that include:

- 💡 mistrust in investigations,
- 💡 fear of retaliation, and
- 💡 organisational cultures that normalise and perpetuate this kind of harassment.

“For decades, organisations have focused on legal compliance and punitive measures, but these approaches often fail to address the cultural and psychological barriers that keep people silent,” Neall said.

The review also warns that mandatory reporting schemes that have been introduced in some sectors can backfire by eroding survivor autonomy and trust. Neall added: *“Paper compliance doesn’t create cultural change; we need systems that feel safe, supportive and genuinely transformative.”*

THE CALL

Called for in both studies is a shift towards trauma-informed and transformative justice approaches; such

approaches address the root causes of harassment and create cultures of respect, moving beyond punishment. This includes fostering a sense of belonging and trust, co-designing reporting channels with employees, and providing timely feedback.

“People told us they didn’t want revenge, but rather that they wanted assurance that it wouldn’t happen again,” Neall said. *“Reporting should feel like a step towards positive change, not a risk to your wellbeing.”*

Underscoring the studies is the suggestion that organisations need to rethink their strategies. “If reporting feels unsafe, ineffective and isolating, people won’t do it. To break that cycle, we need to design systems that restore autonomy, competence and connection for victims who are already hurting,” Neall concluded.

If you are affected by any of the issues discussed in this article, 1800RESPECT has a 24/7 support service that can help; please call 1800 737 732.

Image Credit: https://encrypted-tbn0.gstatic.com/images?q=tbn:ANd9GcQMsvMf2Nzee7T5f8JHh_SmoCW33U3fdllg0g&s

Taken from *Safety Solutions* 23/01/2026

The Crucial Role of Line Managers in Managing Psychosocial Risk

As legal duties expand and workplace expectations evolve, it’s no longer enough for organisations to rely on policy or isolated wellbeing initiatives.

They must invest in the people who influence culture most directly: their line managers.

Dr GEORGI TOMA and KIRRA SOUTHWELL from Heart and Brain Works explore why the role of line managers is more important than ever, what the law requires, and how to equip them to lead psychologically safer teams.



Image Credit: <https://odi.co.za/wp-content/uploads/2024/03/ODI-article-covers-for-website.jpg>

Line managers sit at the intersection of people and performance. Every day, they shape how work is planned, communicated and experienced — how it feels to show up, speak up and be supported. Increasingly,

they also stand on the frontline of managing psychosocial risk.

WHY LINE MANAGERS MATTER MORE THAN EVER

Work design, team dynamics, workload and recognition: these are some of the key levers that influence psychological health at work. And they sit largely in a line manager's hands.

Managers influence how work is distributed, how change is communicated and how concerns are addressed, or overlooked. Their leadership style, emotional intelligence and responsiveness to early warning signs can either reduce risk or exacerbate it.

Yet many managers are under strain themselves. Our psychosocial risk audits consistently show that line managers experience high workloads, cognitive overload and emotionally demanding roles, often without adequate training, support or clarity about how to manage psychosocial hazards effectively.

THE LEGAL AND REGULATORY SHIFT

Across Australia, psychosocial risk management has moved from a best-practice recommendation to a legally enforceable obligation. Under WHS and OHS laws, employers must now identify and manage psychosocial hazards with the same diligence as physical risks.

Recent developments include:

- The [model Code of Practice: Managing Psychosocial Hazards at Work](#), adopted or adapted across all harmonised jurisdictions.
- Victoria's [Occupational Health and Safety Amendment \(Psychological Health\)](#) that came into effect from 1 December 2025, which introduces specific duties to control psychosocial risk.

A growing body of legal cases showing that failure to act on known psychosocial hazards can result in serious financial and reputational consequences.

These frameworks place responsibility not only on the organisation as a whole but also on individuals — especially managers — who shape daily working conditions.

LEGAL LESSONS: WHAT HAPPENS WHEN WE GET IT WRONG

Several recent court cases in Australia highlight the consequences of failing to manage psychosocial hazards:

- ✦ *Mathews v Winslow Constructors* — \$1.3 million awarded due to prolonged bullying and harassment, and a failure to act.

- ✦ *Court Services Victoria* — \$379,000 awarded following exposure to traumatic content, high demands and toxic culture.

- ✦ *Elisha v Vision Australia* — nearly \$1.5 million awarded for psychiatric injury linked to poor management response and breached duty of care.

In each case, the **hazards were known but left unaddressed**. Early signs were missed or dismissed. Patterns of harmful behaviour continued unchecked. These weren't isolated failures, they were systemic issues in culture and capability.

WHAT GOOD LOOKS LIKE

Line managers aren't expected to be mental health professionals. But they are expected to:



Understand what psychosocial hazards are.

- ✓ Recognise when work is becoming harmful (eg, whether due to high workload, poor change processes or interpersonal conflict etc.).
- ✓ Regularly check in with their teams and notice early signs of stress.
- ✓ Take reasonable steps to reduce and report risks.
- ✓ Implement practical control measures as part of everyday team leadership.

When managers are trained and empowered to do this well, they become a powerful early intervention. When they're not, psychosocial risks are overlooked, leading to preventable harm, disengagement and even litigation.

What Organisations Can Do

To build confidence and capability among line managers, organisations should:

- ✔ Train managers on psychosocial hazards, legal obligations and practical controls.
- ✔ Embed capability frameworks into WHS, leadership and performance systems.
- ✔ Assess manager confidence and behaviour through surveys, 360 feedback or audit tools.
- ✔ Resource managers properly, giving them time, tools and clear escalation pathways.
- ✔ Align expectations across HR, WHS and leadership to reinforce consistency.

Line managers are not just implementers of policy. They are culture carriers, risk mitigators and frontline influencers of psychological safety. Their ability to connect with their teams and act early makes them one

of the most powerful — and often underutilised — levers for preventing harm.

Taken from HeartBrain Works, 17/06/2025 & Safety Solutions 21/-1/2026

Resources - How to Manage Workplace Discrimination & Psychosocial Issues

Business NSW (a NFP, independent Organization, previously known as the NSW Business Chamber) has developed multiple series of articles, guidance, scenarios and webinars offering **FREE Guidance** for small and medium businesses navigating Workplace Wellness:

- 1. [WHS Series](#) – explains the general WHS principals and obligations that everyone in the workplace must abide by
- 1. [Psychosocial Series](#) – offers a more in-depth explanation on how to apply those legal principles to the psychosocial hazard of workplace bullying.
- 1. Webinars - complement the legal information found in the written articles, offering practical tips & tools to easily apply to your business.
 - The [Lysander Series](#) is the first in their webinar lineup, where we explore how management theory can help a WHS duty holder better manage their workplace psychosocial risks. In each webinar, we look at:
 - The relevance of the subject matter in terms of WHS compliance.
 - The one thing we need you, the audience, to remember from this webinar.
 - What you need to do, with tips and tools on how to do it.
 - Where you can find more information on the topics discussed during the webinar.

They also have a [free Newsletter subscription](#) to receive trusted workplace wellness news for SMEs, upcoming event invites, and expert guidance – right to your inbox.

[Mental Health Business - Discrimination](#) is one part of their offerings. They espouse that running a business in NSW means understanding your obligations under NSW discrimination law.

They are providing a resource hub that brings together a series of articles that explain:

- how discrimination and disability are defined under NSW law,
- the behaviours and circumstances that may amount to unlawful discrimination, and
- the possible overlap with WHS obligations.

Built for NSW small and medium businesses, these articles cut through the legal noise to explain discrimination law, risk, and compliance – clearly and practically.

Taken from Business NSW Newsletter 27/01/2026

Worker's Death leads to First-of-its-kind Commonwealth Psychosocial Risks Penalty

The Australian Department of Defence has been convicted and fined \$188,000 in the NSW Local Court for failing to manage psychosocial risks that contributed to the **death by suicide** of a 34-year-old Royal Australian Air Force technician at RAAF Base Williamtown in July 2020.

This is the **first time a Commonwealth employer has been penalised** under federal work health and safety laws for **failing to manage psychosocial hazards and risks**.



Defence admitted it did not take “reasonably practicable” steps to eliminate or minimise known risks to the worker’s psychological health, particularly during repeated performance management processes (“Work Plans”) that caused stress and distress. Comcare investigated the matter, and the Commonwealth Director of Public Prosecutions prosecuted the case.

In addition to the fine, the court also issued an **adverse publicity order** requiring Defence to publicise details of the offence and penalty. The maximum available penalty for this offence under the Work Health and Safety Act was \$500,000.

Key Points:

- The worker took his life *while on duty* at RAAF Base Williamtown.
- Defence failed to take adequate steps to identify and control psychological health risks, despite obvious distress shown by the worker.

- ✗ The worker who was, according to Comcare CEO Colin Radford, subjected to four separate Work Plans over a six-month period. *“Comcare’s investigation found that at no point during this process did the worker’s supervisors refer him for support, place him on leave, or take any other steps to relieve the stress and pressure he clearly felt,”* Radford said.
- ✗ *“The risks were obvious and known to Defence through existing policies and guidelines. These policies can only ever mitigate risk if they are applied and followed in practice, and if they are supported by training those responsible for implementing them,”* Radford added. *“The investigation found Defence knew the worker was not coping and that he was also experiencing personal issues. The serious and foreseeable risks required a proactive approach to work health and safety that the department failed to deliver.”*
- The case sets an important **precedent for federal workplace health and safety obligations** around psychosocial risk.
- ✓ Risk controls available to Defence, Comcare stated, included training supervisors to:
 - understand how a Work Plan may be a psychosocial hazard
 - identify psychosocial risks associated with workers subject to performance management through Work Plans; and
 - eliminate or minimise psychosocial risks arising from Work Plans, including when to refer a worker for medical assessment and suspend the performance management process.

Poor support and low job control are among the hazards identified in the [Commonwealth Work Health and Safety \(Managing Psychosocial Hazards at Work\) Code of Practice 2024](#). [Amended Work Health and Safety Regulations](#) prescribing how duty holders must identify and manage hazards and risks to workers’ psychological health and safety have been in effect in the Commonwealth jurisdiction since April 2023.

Image credit: iStock.com/SCM Jeans. Stock image used is for illustrative purposes only.

Extract from Safety Solutions 19/01/2026

How to Deactivate YOUR Nervous System & Feel +ve about the World Again

If you've found yourself stuck in a state of overwhelm and despair, you may feel it's a rational response to the state of the world.

But experts say this feeling of chronic stress may actually be the result of a modern world continuously keeping our nervous systems in a state of overdrive.

They also say that by making practical changes to your daily life, you can bring that system back into balance and regain a sense of hopefulness about your life and the future. So, how do you begin?

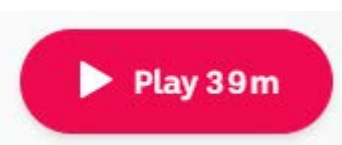
ABC Radio National interviews guests:

- Jodi Wilson, author of *A Brain that Breathes: Essential Habits for an Overwhelming World*
- Andrew Sloane, psychotherapist and author of *Why Things Feel F***ed: Your Practical Guide to Getting Unstuck*

The program explores the feeling of chronic stress and overwhelm that can seem like a rational response to the world's state. Experts suggest this is due to our nervous systems being constantly overstimulated.

The discussion with guests Jodi Wilson, author of *A Brain that Breathes*, and psychotherapist Andrew Sloane, focuses on practical changes to daily life that can help regulate this system and regain a sense of hope and positivity about the future.

Would you like to know more about the specific practical changes recommended by the experts? You can listen to the Podcasts here (39 mins).



What are the Psychological Costs when BOTH Partners Work from Home?

Australian and international researchers have considered the psychological and relational costs of partners working from home — and strategies to overcome these.

A recent study found that when both partners work from home, constant digital interruptions lead to increased after-work frustration and strained relationships, with a heavier psychological burden placed on women.



The 10-day diary study was published in the *Journal of the Association for Information Systems* and conducted by UNSW Business School's [Scientia](#)

[Professor Manju Ahuja](#) — in the School of Information Systems and Technology Management — together with [Dr Rui Sundrup](#) from University of Louisville and [Associate Professor Massimo Magni](#) from Bocconi University.

KEY FINDINGS OF THE STUDY

- **Technology Intrusion:** The use of information and communication technologies (ICT), such as email and mobile phones, pierces the boundary between work and home life (ICT permeability), which is a key source of conflict for work-from-home couples.
- **Gender Disparity:** Women experience more significant negative effects from tech intrusions than men because they continue to bear a disproportionate share of domestic chores, childcare, and emotional support (often referred to as "invisible labor").
- **Short-Term Productivity vs. Long-Term Health:** While frustration was, counterintuitively, linked to a short-term boost in job productivity (as individuals focused resources where success was more certain), this came at the cost of family relationships and could affect long-term well-being.

STRATEGIES TO MITIGATE NEGATIVE IMPACTS

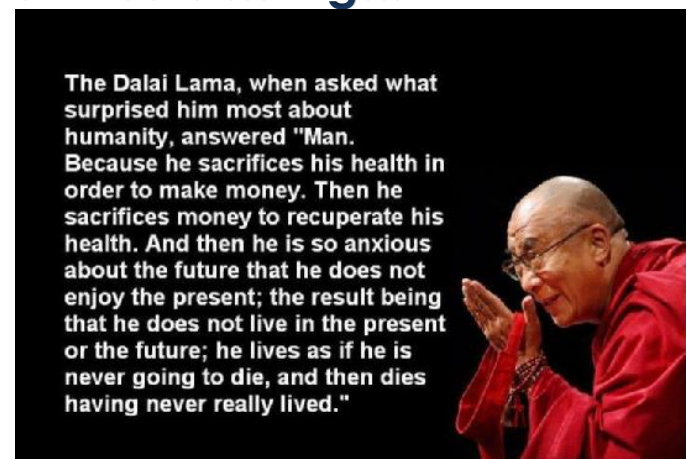
The research highlights that *simple planning strategies* can help reduce the negative impacts:

- ✓ **Joint Daily Planning:** Couples who engage in daily planning of meetings, video calls, and domestic tasks experience lower levels of internal and mutual frustration.
- ✓ **Setting Boundaries:** Establishing clear boundaries, such as scheduling technology-free times or designating quiet zones, helps separate work and family life.
- ✓ **Organizational Support:** Employers can help by training managers to supervise remote workers effectively and by implementing policies that establish clear boundaries, such as not scheduling non-urgent meetings after certain hours.

Image Credit: iStock.com/MilanMarkovic. Stock image used is for illustrative purposes only.

Extract from Safety Solutions, 23/02/26

Food for Thought



Dalai Lama (n.d.). Quote commonly attributed; original source unverified.

OHSA FUTURE EVENTS & OTHER EVENTS



Educational Presentation – Out of Africa

“Out of Africa” – The Challenges we Face in Safeguarding Health in Africa & Beyond

If you think you are too small to make a difference... Try sleeping with a mosquito

Thursday 26th March 2026 from 6.15 pm (6.30pm start)

The Occupational Health Society of Australia Inc. is proud to present our very own President Mr Lance Keys (Anglo American Discovery & Geosciences) and Ms Nandy Blay, Occupational Health Nurse Specialist & PhD student. Lance and Nandy will share their journeys and challenges applying occupational health, hygiene and safety practices in extremely remote and isolated locations with a focus on Africa

This presentation will be followed by a Networking Soiree with light refreshments, beer, wine & soft drinks where you will have opportunity to meet & chat with the speakers



Lance is a passionate Health and Safety professional with a long history in the mining and minerals exploration space. He is part of Anglo American's Discovery & Geosciences team, where he is based in Perth, but a lot of his work spans different countries and functions — from occupational health and risk management to emergency preparedness and contractor safety.

Over the past 13 years with Anglo American, he has built deep experience across global exploration drilling safety, geophysical survey safety, vehicle and driver safety, remote work safety, aviation, and workforce health. He has significant experience in applying a practical, risk-based approach to some of the company's highest risk activities in some of the most remote corners of the world. Lance will focus on Safety and Health challenges when working off-the-grid and managing stakeholder expectations (*the company, the worker and the community*).

Nandy Blay is a UK-trained and AHPRA-registered Occupational Health Nurse Specialist with over 20 years' experience across healthcare, mining, infrastructure and regulatory sectors in the UK, Australia and internationally. For the past 15 years, she has worked as an independent specialist, designing and embedding occupational health systems within complex and high-risk environments. Nandy applies her systems-thinking approach to workplace health, with expertise in health risk assessment, psychosocial hazard management, pre-employment screening and rehabilitation case management.

Raised on a mining estate in Obuasi, Ghana, Nandy's connection to Africa is both personal and professional. She later established occupational health services for a Canadian gold-mining operation in Mali, transitioning provision from outsourced delivery to a prevention-focused, in-house model. Nandy will present case studies relating to risk assessment and management of chronic health conditions (Diabetes, Asthma, HIV and Eye Disease) within a mining site context in Africa.



Cost: FREE for OHSA Inc. members who **MUST REGISTER attendance**

Non-members – we want you to join and enjoy the benefits of OHSA & the cost is

\$25 or simply become a member and it will be **FREE!** Ordinary Membership is **\$50 for 1 year or \$100 for 3 years** (refer to attached New Membership Application form - Student Discounts).

The event **WILL** be telecast online via MS Teams. **BUT** you must Register for the event prior with a summary posted on the OHSA Inc. website. This presentation is relevant to all OHS

Professionals interested in the successful application of OSH in remote and resource-constrained environments.

When: Thursday 26th March 2026

Time: Gather at 6.15 pm in Reception

Where: Westralian Apartments, Boardroom, 78 Terrace Road, East Perth WA (opposite Langley Park)

Parking: Free parking on Terrace Road FROM 6pm

RSVP: By 23rd March 2026 to the OHSA Inc. Secretary (Ali Martins) at ohswa@outlook.com.au or 0419 990 601



OHSA EVENT BOOKING FORM

“Out of Africa”

The Challenges we Face in Safeguarding Health in Africa & Beyond

Westralian Apartments, Boardroom, 78 Terrace Road, East Perth WA

Thursday 26th March, 2026

6.15pm Registration, 6.30pm start – 8.30pm Finish.

Registrants will enjoy some light refreshments with beer, wine and soft drinks being served.
So come on down and enjoy some fellowship and meet the speakers.

Please advise Secretary on 0419 990 601 of any dietary requirements.

Name:	Company:	
Option 1 I am a Financial Member of OHSA Inc. & will be attending this event on the 26/03/26 ☐ Check box for FREE.		
Option 2 I would like to become a member of OHSA Inc. & attend this event for FREE. Please complete the attached Membership Application Form & return to Secretary. Your application will be reviewed for endorsement & the Treasurer will send you a Taxed Invoice for payment. Please NOTE that we are the cheapest Professional Association in Australia!		
☐ Student Member	☐ Ordinary Member	☐ Corporate Member Entitles entry for 2 people
Option 3 I would like to attend this event as a ONE OFF, Non-Member Only & pay the FULL applicable charge as below.		☐ Check box
☐ Student Non-Member \$15	Institution: Student No:	☐ Non-Member \$25
Payment Method/s		
☐ Bank Transfer / EFT Check Box Bank – Westpac Banking Corporation Account Name: Occupational Health Society of Australia Inc. BSB: 036058 Account No: 139181 Reference: 26-E1 Your Name	☐ Credit Card – Square Payment Check Box Please return this Booking form to the Secretary Alison Martins at ohswa@outlook.com & I will generate a Square Invoice with a secure manual Payment Link. You can call me on 0419 990 601 if you require any further information. Please Note that this will attract a 2.2% bank surcharge A receipt will immediately be sent to your email address.	
PARKING & ACCESS Street Parking on Terrace Road is FREE from 6pm		
		



“It Pays to Care” ‘Community of Practice’ Event



It Pays to Care
An imperative for change
and call to action

Watch this Space!

Thursday 14th May 2026 – Time tba but looking at late arvo

The Occupational Health Society of Australia Inc. is proud to present the first Community of Practice Event for 2026 in collaboration with It Pays to Care.

Details to follow, but our Vice President, Sharon Stratford has been very busy and has arranged for Dr Mary Wyatt (IPTC Policy and Advocacy Lead), Coles, the insurer IMA

Network, APRA and Redimed to join together with OHS and present the latest developments in communications, workers compensation, psychosocial matched care and more.

This was only to alert you of the date and a more descriptive flyer will be sent to you in the next few weeks

This presentation will be followed by a Networking Soiree with light refreshments, beer, wine & soft drinks where you will have opportunity to meet & chat with the speakers

Cost: FREE for OHS Inc. members who MUST REGISTER attendance

Non-members – we want you to join and enjoy the benefits of OHS & the cost is \$25 or simply become a member and it will be FREE! Ordinary Membership is \$50 for 1 year or \$100 for 3 years (refer to attached New Membership Application form - Student Discounts).

The event WILL be **telecast online via MS Teams**, BUT you must Register for the event prior with a summary posted on the OHS Inc. website.

This presentation is relevant to all OHS Professionals (Occ Physicians, Occ Health Nurses, Safety Managers, Case Managers), Insurers, Brokers & other allied health professionals interested in successful Injury Management.

Insights and Impact -

Unpacking Workers' Compensation Research & Data



WorkCoverWA

Presenters: Professor Alex Collie

You're invited to hear from Professor Alex Collie from Monash University, who will share insights on workers compensation based on national data and research.

This session is for all service providers supporting injured workers through their workers compensation journey and return to work.

You'll gain an understanding of current issues and emerging trends facing workers compensation schemes across Australia and evidence-based strategies, processes and practices you can put in place to improve outcomes for injured workers.

You'll also hear local insights and learnings from WorkCover WA CEO Chris White and General Manager Rebecca Harris.

Date – Tuesday 3rd March 2026

Where: Black Swan Room, Optus Stadium

Session Times: 9:30 - 11:00am SOLD OUT or 1:30 - 3:00pm

Only the afternoon session is available. Registration is essential as places are limited

[Register Now](#)

Pushing Back on Push Back



Stand Your Ground, Shift the System: HR and DEI Leaders Pushing Back on the Pushback.

When you've worked hard to build gender equality and inclusive cultures, it can be dispiriting to feel the tide turning.

Targets are

questioned, budgets are cut, "DEI fatigue" is rising, and suddenly the work you thought was settled is back on the chopping block.

If you're an HR, People & Culture or DEI leader trying to hold the line while also protecting your own energy, this session is for you.

Join Menopause Friendly for a live webinar with Dr Elise Stephenson, Deputy Director of the Global Institute for Women's Leadership at the Australian National University, founded and chaired by former prime minister Julia Gillard.

Elise will unpack what's really driving the current backlash against gender equality and DEI, what the data actually says about progress, and how leaders can respond with clarity, courage and evidence instead of defensiveness or burnout.

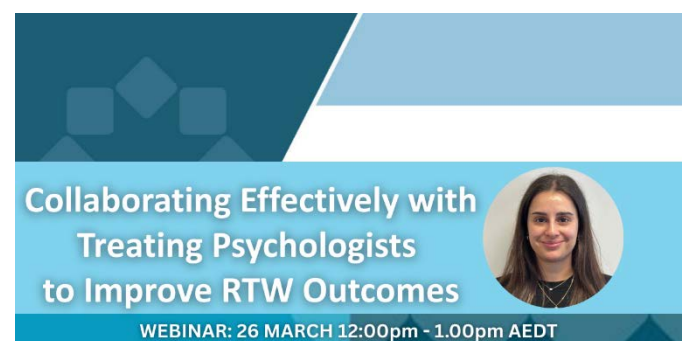
We'll explore how leaders can respond when gender equality, DEI and feminist ideas are questioned, defunded or politicised, and give you tools to hold your nerve, stay evidence based and keep moving progress forward despite resistance.

Secure your place today and join a community of leaders who know that gender equality work isn't over, it's entering a new phase, and it needs you more than ever

[Register Online](#)

If you have any suggestions, please do not hesitate to contact the secretary at ohswa@outlook.com.au

ARPA Webinar



This session is designed to strengthen collaboration between workplace stakeholders and treating psychologists to improve RTW outcomes. Led by Chryso Costa a senior mental health clinician, the session will provide insight into the clinical perspective, clarify roles and boundaries, and focus on how to have more effective, RTW-focused conversations and case conferences. Through practical examples and discussion, participants will learn how to ask better questions, improve communication, and work more productively

with clinicians to reduce delays and achieve better, more sustainable RTW outcomes

This Webinar is available to ARPA Members and Non Members.

Student Affiliate - No charge
 Member - \$40.00
 Non-member - \$100.0

Free Online Falls Basics Workshop- Vic

Although Victorian legislation is NOT aligned with WHS legislation, the basics are the same. Every fall is preventable with the right risk controls in place. WorkSafe Vic is offering Free Online (via MS Teams) workshops relevant to PCBU's, manager and supervisors.



Falls basics - free online workshops

Our [free online workshops](#) cover everything you need to know about preventing falls on site.

If you're an employer, manager, supervisor or health and safety representative, this is a great opportunity to hear from our inspectors, improve safety and reduce the risk of falls from heights on your worksite.

What you'll get

The workshop helps you:

- understand the safety basics of fall protection
- improve your knowledge about the hierarchy of controls
- choose the right level of fall protection for your workplace
- access and use free support resources and information
- understand regulations relating to falls
- keep your workers and workplace safe.

Places are limited so make sure you register to secure your spot.

[Register now](#)

Date	Time	Registration link
Wednesday 18 March 2026	10am - 12pm	Register here
Wednesday 25 March 2026	2pm - 4pm	Register here
Wednesday 22 April 2026	10am - 12pm	Register here

OHSA Application Form



Occupational Health Society of Australia Inc.

APPLICATION FOR MEMBERSHIP

MEMBER INFORMATION

Title (Dr, Ms, Mrs, Mr, etc.)	
First name	
Surname	

CONTACT DETAILS

Postal Address			
Suburb		Postcode	
Phone			
E-Mail			

Please indicate your preferred method to be contacted: ☐ Postal address ☐ Phone ☐ E-mail

Special Interests (for Society Directory)	
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EMPLOYMENT INFORMATION (Only complete if you want Company information to be recorded against your name in the Society Directory and in Society Communications)

Company / Self Employed	
Work Phone	
Work E-Mail	

APPLICATION FOR (indicate membership type / fee option):

- Full Membership (includes *Monitor* newsletter) ☐ \$50 - 1 year **or** ☐ \$100 - 3 years
- Corporate Membership (incl *Monitor*, write up, logo on web, sponsorship) ☐ \$100 - 1 year **or** ☐ \$200 - 3 years
- Student Membership (includes *Monitor* newsletter) ☐ \$20 - 1 year **or** ☐ \$ 40 - 3 years

Tertiary Institution _____ Student Number _____

An invoice for the membership type fee will be issued once the Committee has accepted this application.



The OHSA Inc. Financial Year runs from 1st November – 31st October.
Fees payable during this period will apply for that financial year only.

AGREEMENT

- ☐ I certify that the information provided in this application is correct and I agree to adhere to the Constitution and Code of Ethics of the Society.
- ☐ I also give consent to the Society to collect, use and disclose my personal information in accordance with the National Privacy Principles in matters relating to the Society.

Signature _____ Date _____

CONSENT

- ☐ I hereby consent to have my details displayed in the Society's directory.

Signature _____ Date _____

ABN: 83 170 105830 PO Box 6107 East Perth WA 6892 | Website: www.ohsociety.com.au

Please submit this completed Form to The Secretary OHSA Inc. E-mail: ohswa@outlook.com.au

The OHSA Inc. is a non-profit representative body providing expert advice to Govt at all levels and support to OHS professionals.