

## University Health and Safety Policy Committee

Scheduled Dates	Q1	12 May 2025	Q2	13 August 2025	Q3	11 November 2025	Q4	10 February 2026
Meeting no.	<b>Quarter 3 – 2025</b>							
Date and time	Tuesday 11 November 2025, 1:00pm							
Venue	Mt Helen T103, Microsoft Teams							
Members		Name		Present	Apology	Name		Present
								Apology
		<b>Paul Oppenheimer</b> (Chair/CSO)						✓
		<b>Megan Tucker</b> (VCO)	✓			<b>Joanne Nemshich</b> (VCO)		✓
		<b>Tara Hanlon</b> (COO)	✓			<b>Joanne Fiorenza</b> (COO)		✓
		<b>Samantha Bartlett</b> (CLXO)	✓			<b>Talia Klein</b> (CLXO)		✓
		<b>Carolyn Chong</b> (GEQ)		X		<b>Vivek Anand</b> (GEQ)		✓
		<b>Iven Mareels</b> (R&I, IISS)		X		<b>Kathleen Keogh</b> (IISS)		✓
		<b>Andrew Lewis</b> (IHW)	✓			<b>Shirley Huang</b> (IHW)		✓
		<b>Birgit Loch</b> (L&TQ, IEAC)	✓			<b>Julie Sharp</b> (L&TQ, IEAC)		✓
		<b>Darren Gray</b> (TAFE)	✓			<b>Justin Neal</b> (TAFE)		✓
		<b>John Blair</b> (CFO)	✓			<b>Pam McKee</b> (CFO)		✓
Invited Representatives		<b>Vacant</b> (Higher Ed Students)				<b>Vacant</b> (TAFE Students)		
		<b>Leah Handford</b> (HSW)	✓			<b>Beck Lake</b> (Risk Management)		X
		<b>Anandh Ravi</b> (P&I)	✓			<b>Jenna Robertson</b> (VCO)		✓
		<b>James Sileni</b> (HSW)	✓			<b>Daniel Houlihan</b> (HSW)		✓
		<b>Melissa Cross</b> (COO)	✓					

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### 1. New Members and Delegates

New members: Vivek Anand (GEQ HSR), Kathleen Keogh (IISS HSR), Melissa Cross (COO).

Michael Langhorne attending as delegate for Carolyn Chong (GEQ)

Shyh Wei Teng attending as delegate for Iven Mareels (IISS)

### 2. Confirmation of Minutes of the Previous Meeting

The minutes of the Q2-2025 meeting held on Wednesday 13 August 2025 were confirmed.

### 3. Business Arising from Minutes of the Previous Meeting

Open UHSPC action items were reviewed from the [UHSPC Action Tracker](#).

### 3.1 Policies related to fieldwork and lab activities

A fieldwork guideline document, which includes OHS related content, has been developed and socialised.

A Critical OHS Risk Workshop on Domestic and International Travel was held in November which will inform a review of the procedure.

### 3.2 OHS roles registers

It was noted that more First Aiders are needed to ensure adequate coverage, particularly with a transient workforce. Darren reported TAFE had similar issue with a shortage of first aiders and facilitated a first aid training session internally with a staff member who is a certified First Aid Trainor.

Action – Facilitate First Aid Certification for VCST through TAFE Trainer – Darren Gray

### 3.3 Sharps Injury Review

The Sharps review was completed within IHW. A working group formulated and Action Plan which will be monitored through the IHW HSIT.

### 3.4 Psychosocial HIRACs

GEQ reported that 3 of 5 Psychosocial HIRACs are complete (Global, Engagement, Indigenous and AEC), with 1 in progress (Quality and Accreditation) and 1 TBA (Reconciliation).

IHW reported that 1 of 4 Psychosocial HIRACs are complete.

Action – Schedule a meeting with IHW staff to discuss incomplete HIRACs –  
P. Oppenheimer, A. Lewis

### 3.5 Training in dealing with difficult conversations

A number of providers were approached to submit a proposal, and a preferred provider has been engaged. Training will commence at the end of November. It was advised that should spaces be available, those spaces will be opened to other relevant teams.

### 3.6 Sharing of information on Flexible Work Procedure

People and Culture are currently working on communications, focussing on equipping people leaders to have conversations with their team to set expectations for 2026. The procedure will be reviewed before communications are released.

Action- send out comms after reviewing the Flexible Work Procedure – T Hanlon

### 3.7 Testing of eye wash and safety showers

A. Ravi confirmed that testing and maintenance of eye wash and safety showers is now occurring by P&I on a quarterly basis. Pre-use testing is being undertaken by laboratory staff.

### 3.8 International Operations review

Ben Morris has advised that legal advice will be required for the international operations review.

Action – Identify locations of operations and staff working internationally – T. Hanlon

Action – Engage legal advice for international operations – P. Oppenheimer

### 3.9 OHS Structure for IHW Clinics

It was proposed that a Designated Working Group (DWG) for IHW Clinics be established, in consultation with the relevant employees.

Action – Send DWG information to A. Lewis – L. Handford

### 3.10 Roof leaks

A. Ravi informed the committee of the process P&I undertake when roof leaks and ceiling tile hazards are identified. All committee members to continue to report PULSE requests when these issues are identified.

### 3.11 Psychosocial HIRACs – reasonably foreseeable risks

B. Loch requested an overview of lessons learned from previous Workcover Claims, so this can be taken into account when reviewing Psychosocial HIRACs.

Action – Send overview of lessons learned to B. Loch – J Fiorenza

### 3.12 Research Centres Reporting

Research Centres will report into the IISS HSIT and be encapsulated within the IISS Annual OHS Plan. Research Centre Directors will report on their OHS Activities separately each quarter.

## 4. Reports and Submissions

### 4.1 Portfolio Health and Safety Coordinating Teams

#### 4.1.1 Chief Operating Office

The Summary Table of Health and Safety Planning, Meeting and Reporting Activities for Q3, 2025 was noted.

T. Hanlon advised that there has been an increase in the number of near misses that have been reported.

#### 4.1.2 Chief Financial Office

The Summary Table of Health and Safety Planning, Meeting and Reporting Activities for Q3, 2025 was noted.

J. Blair advised that there is a current focus on strengthening the depth of Health and Safety reporting. The CFO Portfolio is in the process of appointing a new Safety Officer.

#### 4.1.3 Chief Learner Experience Office

The Summary Table of Health and Safety Planning, Meeting and Reporting Activities for Q3, 2025 was noted.

S. Bartlett advised that the CLXO Portfolio has a current focus on Workload and Psychosocial Health. There is also a noticeable increase in the number of near-misses being reported. It was also advised that the CLXO Portfolio will move from the

current structure of having one combined HSIT/HSCT meeting, to 3-4 HSITs, reporting up to a separate HSCT.

#### 4.1.4 Global and Engagement

The Summary Table of Health and Safety Planning, Meeting and Reporting Activities for Q3, 2025 was noted.

M. Langhorne advised there are up to 8 staff planned to undertake First Aid training, and 3 staff from the Engagement team undertaking Mental Health First Aid training. It was also noted that the Aboriginal Education Centre team have been pro-active in completing and updating HIRACs for campus events.

#### 4.1.5 Institute of Innovation, Science and Sustainability

The Summary Table of Health and Safety Planning, Meeting and Reporting Activities for Q3, 2025 was noted.

SW. Teng advised that there has been some discussion around the timing of HIRAC approvals in IISS, particularly around field trips, which have been addressed.

#### 4.1.6 Institute of Health and Wellbeing

The Summary Table of Health and Safety Planning, Meeting and Reporting Activities for Q3, 2025 was noted.

A. Lewis advised that discussions have been held regarding a foreseeable Psychosocial Risk emerging from the Academic Promotions process currently underway, and the leadership team has planning in place.

P. Oppenheimer mentioned there was an increase in recordable injuries for IHW, and a meeting should be held to understand what the drivers are.

Action – Schedule meeting to discuss IHW recordable injuries – A. Lewis

#### 4.1.7 Institute of Education, Arts and Community

The Summary Table of Health and Safety Planning, Meeting and Reporting Activities for Q3, 2025 was noted.

B. Loch advised that the previous incident reporting workflows for the Arts Academy at Camp Street have been resolved. It was also noted that L. Handford attended an IEAC all staff meeting to share information on the reporting of near-misses B. Loch reflected this added value to IEAC.

#### 4.1.8 TAFE

The Summary Table of Health and Safety Planning, Meeting and Reporting Activities for Q3, 2025 was noted.

D. Gray noted that there is an increase in near-miss reporting in TAFE. It was also noted that an action plan is in place for mitigating hand injuries that are currently a trend in TAFE.

It was also noted that there was positive feedback from the Vice-Chancellor's leadership walk at Gillies Street from the local staff, particularly around picking up small things that have the potential to lead to an injury.

#### 4.1.9 Vice-Chancellor's Office

The Summary Table of Health and Safety Planning, Meeting and Reporting Activities for Q3, 2025 was noted.

#### 4.2 Key Performance Indicators

L. Handford presented the UHSPC KPI dashboard, which reports on the progress of the KPI's determined earlier in the year.

An offer was extended to all members from HSW to assist in identifying areas across the university where a walk would add value and attend walks with the VCST members. It was also noted that there has been an increase in safety conversations with staff as part of the leadership walks, with a reminder that the walks are intended to drive cultural uplift through conversation as opposed to undertaking a workplace inspection.

##### Action – Reminder to review Leadership Walk Packet - HSW

The new HSI Donesafe system will address some of the current challenges relating to incident close-out rates. It was also noted by L. Handford that it is a requirement for all outstanding incident investigations to be closed out by the end of December, ready for the implementation of Donesafe in January 2026.

##### Action – Inform teams of the Incident Close-Out Rate KPI is 5 days – All members

The KPI for Near-miss to Injury Ratio has been extended to also include Hazards as per the discussion in the previous UHSPC meeting.

#### 4.3 PULSE Requests Data

A. Ravi advised that a common theme for OHS related PULSE requests is trip hazards. There is an increase in the number of pulse requests, which is encouraged by Property and Infrastructure.

#### 4.4 Incident Reporting Data

L. Handford presented the injury reporting data for Q3, noting that there is a year-on-year reduction in injury numbers. There is an increase in lower severity incidents, coupled with a decrease in higher severity incidents, Indicating a positive change in reporting culture.

L. Handford offered all members the opportunity for the HSW team to attend team meetings to discuss any OHS topic.

It was discussed that each Portfolio bring further context to the discussion of injuries where it may be relevant, for example Portfolio staff and student numbers. This needs to be expanded. Eg, this conversation needs to occur at the HSCT level so VCST members are informed at UHSPC.

##### Action – HSCTs to review context of incidents - VCST Members

#### 4.5 Workcover Claim Data

J. Fiorenza presented the Workcover claim report for Q3, noting that there has been a slight increase in Workcover claims for Q3, with a range of severity and from a range of areas. There has been an increase in claims for psychosocial injuries.

It was noted that the new Psychosocial Health Regulations take effect from 1<sup>st</sup> December 2025, which requires organisations to have a system in place for identifying and addressing psychosocial risk factors. Federation University uses the Psychosocial HIRAC for this purpose, and it is important that these HIRACs reflect the lessons learned in compensation claims and injury reports to ensure these risks are effectively managed.

L. Handford advised that the next Critical OHS Risk Workshop topic is Psychosocial on Friday 14 November, and encouraged any interested member to register for the Melbourne City Campus workshop.

J. Fiorenza advised that there has been a good uptake of the EAP, over a range of the services provided. There is also a new Neurodivergence assist service which can be utilised by staff and managers.

## 5. Other Business

### 5.1 Schedule of Business

L. Handford advised that recently, the terms of reference for UHSPC have been reviewed. As part of this review, a Schedule of Business has been developed to support the terms of reference. These will be circulated to members.

Action: Circulate updated Schedule of Business. – L. Handford

### 5.2 Health and Safety Representatives

L. Handford noted that HSRs haven't been given a formal space on the agenda and provided an opportunity for HSRs present to raise any items for discussion.

T. Klein advised that she routinely meets with new starters within the Designated Work Group (DWG) when they are onboarded, to ensure staff are aware of who their HSR is. It was also noted that it would be beneficial to get more information out to staff from the HSRs to encourage more engagement.

J. Neale requested that information be circulated regarding HSR responsibilities, and HSR training.

Action – HSR information and Training information to be circulated - HSW

K. Keogh also noted that information would be beneficial to staff to identify their HSR.

P. Oppenheimer requested that HSR reports be included as a standard agenda item for UHSPC going forward.

Action – Add HSR Reports to the UHSPC Agenda – HSW

## 6. 2026 Meeting Dates

Q1 12 May '26	Q2 11 August '26	Q3 12 November '26	Q4 TBC February '27
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