

Scheduled Dates	Q1	13 May 2025	Q2	13 August 20	25	Q3	11 November 2025 <b>Q4</b> 10 Febru		10 February	ary 2026	
Meeting no.	Quarter 2 – 2025										
Date and time	Wednesday 13 August 2025, 9:00am										
Venue	Mou	Mount Helen T103, Microsoft Teams									
Members	Name				Present	Apology	Name			Present	Apology
	Paul Oppenheimer (Chair/CSO)								Х		
	Megan Tucker (VCO)			Х		Joanne Nemshich (VCO)			Х		
	Tara Hanlon (COO)				Х		Joanne Fiorenza (CO		Х		
	Samantha Bartlett (CLXO)					Х	Talia Klein (CLXO)			Х	
	Carolyn Chong (G&E)				Х		Vacant (G&E)				
	Iven Mareels (R&I, IISS)				Х		Yutang Wang (IISS)				Х
	Andrew Lewis (IHW)				Х		Shirley Huang (IHW)				Х
	Birgit Loch (L&TQ, IEAC)				Х		Julie Sharp (L&TQ, IEAC)			Х	
	Darren Gray (TAFE)				Х		Justin Neal (TAFE)			Х	
	John Blair (CFO)				Х		Pam McKee (CFO)			Х	
Invited Representatives	Vacant (Higher Ed Students)						Vacant (TAFE Students)				
	Leah Handford (HSW)				Х		Beck Lake (Risk Management)			Х	
	Anandh Ravi (P&I)					Х	Jenna Robertson (VCO)			Х	
	James Sileni (HSW)				Х		Daniel Houlihan (HSW)				Х

Federation University Australia acknowledges the Traditional Owners of the land on which University Committee meetings occur and pays respect to Indigenous Elders, past and present.

## 1. New Members and Apologies

New member Andrew Lewis.

Cindy Cash as CLXO nominee.

Ben Jenkins as P&I nominee.

Apurv Kumar as IISS nominee.

## 2. Confirmation of Minutes of the Previous Meeting

The minutes of the Q1-2025 meeting held on Tuesday 13 May 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 OHS roles registers

Leah Handford advised that the Safety Officer register, and the Health and Safety Representative register updates are progressing. There needs to be greater focus on the First Aider register to ensure it is current.

Paul highlighted that it would be beneficial for a campaign, focussing on what to do in the event a First Aider is either not present, or not readily available. Leah reminded the committee that this information can be found on the Local Emergency Instructions.

Action – Review currency of First Aider Register– UHSPC Members

### 3.2 Sharps Injuries

Leah advised that there is a downward trend of sharps injuries in IHW as a result of the work that has been undertaken to date. The review into medical sharps injuries has taken place and an action plan for implementing the recommendations will be created.

Action – Sharps Action Plan based on review – A. Lewis, L. Handford

### 3.3 Psychosocial HIRACs

IISS Psychosocial HIRAC has been completed and submitted. Andrew Lewis advised IHW has been completed but not submitted. G&E is not yet complete.

Action - Complete psychosocial HIRACs - C. Chong, A. Lewis

### 3.4 Training in dealing with difficult conversations

Cindy Cash advised CLXO have selected a provider to deliver the training.

Action – Develop training schedule – S. Bartlett

## 3.5 Policies related to fieldwork and lab activities

IISS requested that a review of procedures for fieldwork and laboratory activities.

The need for enforcement of safety in classrooms and teaching spaces was identified.

Action – Coordinate Review Fieldwork and Laboratory Procedures – P. Oppenheimer

### 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 Q2, 2025 was noted.

Tara Hanlon advised that the fortnightly COO connect meeting's health and safety discussions have been positive to talk through priorities and follow through on actions and trends.

#### 4.1.2 Chief Financial Office



The Summary Table of Health and Safety Planning, Meeting and Reporting Activities for Q2, 2025 was noted.

John Blair advised that discussions continue through the CFO Leadership meetings, which has been helpful with re-prioritising work within the CFO team. Good Health and Safety practices identified from safety walks will also be brought back to the CFO team to share learnings.

### 4.1.3 Chief Learner Experience Office

The Summary Table of Health and Safety Planning, Meeting and Reporting Activities for Q2, 2025 was noted.

Cindy Cash advised that there have been active conversations happening across the teams to promote the importance of near-miss reporting and how to report near-misses.

Paul Oppenheimer asked if there were any issues that need to be raised in regards to upcoming open days. Cindy advised the team were confident with the planning and HIRACs that have been put into place.

### 4.1.4 Global and Engagement

The Summary Table of Health and Safety Planning, Meeting and Reporting Activities for Q2, 2025 was noted.

Carolyn Chong advised that a report will be provided for Quality and Accreditation shortly. It was also noted that the G&E Leadership team have begun having regular Health and Safety discussions in their team meetings.

The committee discussed staff located or traveling overseas; further review of Health and Safety for these employees is planned.

Action – International Operations review - P. Oppenheimer, C. Chong, L. Handford.

### 4.1.5 Institute of Innovation, Science and Sustainability

The Summary Table of Health and Safety Planning, Meeting and Reporting Activities for Q2, 2025 was noted.

Iven Mareels raised a recent incident where an eyewash station hose connection failed and flooded a large area of Mt Helen Building Y. The same potential points of failure were also identified in Berwick. Eyewash stations are now being activated at the beginning of each lab session by the Technical staff, and testing is being coordinated by P&I every 6 months.

Action – Testing of eye wash and safety showers – I. Mareels, A. Ravi

### 4.1.6 Institute of Health and Wellbeing

The Summary Table of Health and Safety Planning, Meeting and Reporting Activities for Q2, 2025 was noted.

Andrew Lewis advised the outstanding report from Q3, 2024 has been submitted.

The positive downward trend in medical sharps related injuries from IHW was noted.

Andrew advised that there will be a community facing clinic set up at Gippsland Regional Aquatic Centre (GRAC) in Traralgon, offering Physiotherapy and Occupational Therapy. The management of OHS at the centre needs to be reviewed.



Action - Define OHS structure for GRAC - A. Lewis

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

The Summary Table of Health and Safety Planning, Meeting and Reporting Activities for Q2, 2025 was noted.

Brigit Loch advised that the IEAC HSIT structure has been updated to a combined HSIT / HSCT. Birgit addressed the Warden structure at Churchill, considering flexible working arrangements and the campus's emergency response procedures. Ben Jenkins stated that the P&I team, and security staff are fulfilling these responsibilities as needed.

Birgit noted that IEAC do not have visibility over student incidents logged by the Technical Services team. Leah advised that both data sets can be requested by the Institute for visibility.

Action – Share information on WFH Policy – T. Hanlon

#### 4.1.8 TAFE

The Summary Table of Health and Safety Planning, Meeting and Reporting Activities for Q2, 2025 was noted.

Darren Gray advised that there has been an increase in reportable hand injuries in Q2. A project underway to address this injury trend.

Darren raised that the TAFE team will review risks related to long-distance driving. Leah advised that the HSW team are currently planning a series of critical risk workshops, with one of the topics covering domestic travel.

Darren requested that the online Leadership Walk form is revised for ease of use when undertaking a walk.

Action – Review procedures for domestic travel – D. Gray

### 4.1.9 Vice-Chancellor's Office

The Summary Table of Health and Safety Planning, Meeting and Reporting Activities for Q2, 2025 was noted.

Megan Tucker advised that the VCO team have been focussing on wellbeing and sharing of wellbeing initiative information.

Megan also advised that the team had identified a water leaking through ceiling panels onto electrical equipment which has been reported to P&I, but has not been completely resolved to date.

Action – Investigate response to reported hazard – A. Ravi

### **4.2** Key Performance Indicators

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

Megan raised that there is an opportunity to put together an OHS communications campaign, working with the Head of Corporate Communications, as part of the wider uplift in internal communications at the University.

## 4.3 PULSE Requests Data



Ben Jenkins, advised the common themes for OHS related pulse requests included foot paths, slip and trip hazards, stair treads and heating.

Ben also advised that P&I have increased the frequency of arborist assessment of trees across the campuses from three yearly to two yearly, with the potential to increase to yearly for high-risk areas close to buildings and where there is a lot of foot traffic.

Ben reported that the Pulse system now allows for P&I to leave a comment on a request when it is closed, to provide feedback to the requestor.

### 4.4 Incident Reporting Data

Leah presented the injury reporting data for Q2, noting that there is a continued positive downward trajectory which commenced in 2024. Leah noted an increase in staff injuries, particularly around slips trips and falls. Leah also noted a shift in student injuries, with a reduction in sharps injuries in IHW and an increase in hand injuries in TAFE.

Leah also noted an increase in hazard reporting from 40 this time last year, to 81. This is a positive trend, and in order to support teams with hazard reporting, the HSW team offered to attend team meetings to help reinforce the importance of reporting.

#### 4.5 Workcover Claim Data

Jo Fiorenza presented the Workcover claim report, noting that there has been an increase in Workcover claims from Q1. Jo also noted there has been an increase in Employee Assistance Program usage from Q1.

Jo noted the importance of the psychosocial HIRACs being completed and implemented in each team, ensuring identification of psychosocial hazards that are reasonably foreseeable, not just those already identified.

Jo provided an update on the current and upcoming wellbeing promotions, with SiSU self-service health stations located across the university this month.

### 5. Other Business

### 5.1 Emergency response equipment maintenance

This agenda item was held over until the next meeting.

## 5.2 Eye Wash compliance issues – Mt Helen

This item was discussed as part of the IISS update, see minutes in section 4.1.5.

### 5.3 Research Centre reporting

Discussion was held regarding the HSIT and reporting structure for the Research Centres, following the recent change of Iven Mareels moving into the role of Pro-Vice Chancellor Research and Innovation. Further discussion will take place and agreed outside of the Committee, to ensure that the Health and Safety activities and reporting from the Research Centres.

 ${\it Action-Confirm\ HSIT\ structure\ for\ Research\ Centres-I.\ Mare els}$ 

### 5.4 Dashboards



Leah advised that the HSW team have created dashboards for the HSCTs to utilise. The intent is for HSCTs to populate their dashboard, which will be displayed at the UHSPC meeting for each representative to speak to, replacing the current process of noting the receipt of reports and speaking to the quarterly summary table.

### 5.5 Schedule of Business

Leah advised that a schedule of business has been created, which allows all members to the purpose of the UHSPC and the cadence of activities.

### 5.6 Donesafe – Student reporting

Leah provided an update on the current project for the new incident management system implementation. Work is currently underway to design the workflows for injuries relating to students and where these reports are routed to for investigation. Leah will reach out to the Executive Deans to discuss the best solution.