Policy No.: D0355

Remote or Isolated Work Safety (WHS) Policy Directive

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SA Health

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1. Policy Statement

The Department of Health and Wellbeing (DHW), as a Responsible Agency for the Crown, must take reasonably practicable steps to ensure that Local Health Networks (LHN)/SA Ambulance Service (SAAS)/Health Services (HS)/Business Units (BU)/Attached Offices (AO) have mechanisms and processes in place to ensure the safety of all persons in the workplace.

SA Health workplaces will use the hazard identification and risk management process to establish effective risk control mechanisms related to remote or isolated work.

A risk management approach is an integral process in the identification of hazards and risks associated with remote or isolated work. Risk assessments and effective communication mechanisms are a work health and safety (WHS) legislative requirement for workers who are required to work alone or remotely and are to be embedded in safe systems of work.

This policy directive supports DHW's commitment to a safe working environment, including implementing the *Health Practitioner Regulation National Law (SA) Act 2010 (Remote Area Attendance) Amendment Act 2017* (more commonly known as Gayle's Law) and its regulations, and ensuring that a comprehensive, robust and co-ordinated communication system for remote or isolated work is implemented and maintained as per other hazards identified through this approach.

This policy directive also supports the health and wellbeing of Aboriginal people by providing a more culturally responsive, accountable and safe service and workplace in alignment with the <u>Aboriginal Workforce Framework 2017-2022</u> and the <u>Aboriginal Cultural Learning Framework</u>.

This policy directive is to be read in conjunction with **Policy Guideline - Remote or Isolated Work Health and Safety (WHS)** which outlines the minimum risk control measures for the remote or isolated work situation.

2. Roles and Responsibilities

This policy directive applies to all SA Health entities and workers, including employees, volunteers, contractors, labour hire workers, agency workers, students, carers and other persons conducting business or undertakings (PCBU) registered under the *Health Practitioner Regulation National Law* or providing a health service on behalf of SA Health.

This policy directive does not provide direction or information on insurance for volunteers. Enquiries on this matter should be directed to SAicorp.

The following roles and responsibilities are specific to this policy directive and should be read in conjunction with **SA Health Policy Directive - Roles, Responsibilities and Governance (WHS)**:

2.1 Chief Executive, DHW

Will take reasonably practicable steps to:

 Develop and issue system-wide policies applying to Local Health Networks, SA Ambulance Service and the Department for Health and Wellbeing.

2.2 LHN Governing Boards

Will take reasonably practicable steps to:

- Exercise due diligence to ensure compliance with the intent of this policy directive
- Ensure effective clinical and corporate governance frameworks (where relevant) are in place to ensure the LHNs are compliant with this policy directive.

2.3 Deputy Chief Executives (DHW), Chief Executive Officers/ Commissioners/ (LHN/SAAS/HS/BU/AO)

Will take reasonably practicable steps to:

- Exercise due diligence to ensure compliance with the intent of this policy directive
- Provide financial and physical resources needed for the implementation and support of this policy directive
- Demonstrate an understanding of, and commitment to, systematic hazard and risk management processes for remote or isolated work
- Evaluate the effectiveness of existing remote or isolated work risk controls, strategies and treatments
- Ensure that facilities under their management have appropriate security measures in place to ensure the safety of staff, particularly after-hours, and that staff are aware of how to use these measures.

2.4 Executive Directors/Directors/Chief Operating Officers

Will take reasonably practicable steps to:

- Exercise due diligence to ensure compliance with the intent of this policy directive
- Demonstrate an understanding of and a commitment to the systematic hazard identification and risk management process for remote or isolated work
- Ensure the effective implementation of the operational aspects for remote or isolated work including the requirements of Gayle's Law
- Ensure the allocation and use of human and financial resources to effectively manage safety aspects related to remote or isolated work
- Ensure a pool of suitable second responders is available for workers providing health services in remote areas of South Australia to contact as required for out of hours or unscheduled callouts
- Evaluate the effectiveness of existing risk controls, strategies and treatments
- Ensure that workplace managers (or equivalents) have the knowledge, skills and ability to identify and manage remote or isolated work hazards and risks in workplace.

2.5 Directors of Workforce/People and Culture (LHN/SAAS/HS/BU/AO)

Will take reasonable practicable steps to:

- Exercise due diligence to ensure compliance with the intent of this policy directive
- Facilitate and support the implementation of this policy directive throughout their delegated LHN/SAAS/HS/BU/AO
- Monitor compliance with this policy directive and report on implementation outcomes.

2.6 Managers (or equivalents)

Will take reasonable care to:

- Ensure a safe work environment for all workers
- Identify workers who work in remote or isolated environments, such as:
 - Working alone in isolation or remotely on site (e.g. consults after hours or on-call, maintenance work, cleaning)
 - Working alone in isolation or remotely off site (e.g. out of hours callout or unscheduled callout, home visits, community work, cleaning)
 - Working from a vehicle (e.g. paramedics, nursing staff, personal carers, field workers)
 - Working alone after hours/out of hours callout or unscheduled call out.
- Ensure remote or isolated risk management processes are implemented
- Not direct workers to perform a service where a risk assessment determines it to be unsafe or unacceptable to perform the service
- Not direct health practitioners in remote areas to respond to an after hours callout or unscheduled callout without a second responder present, as per the requirements of Gayle's Law;
- Report identified hazards and implement risk control measures determined from the risk assessment process in accordance with the hierarchy of risk controls and legislation.

- Ensure safe working procedures are developed and maintained for identified areas of risk
- Ensure the induction program includes specific training about the risks of working alone, in isolation or remotely and relevant procedures
- Ensure effective communication systems are implemented so workers are safe and accounted for at all times
- Ensure a pool of suitable second responders is available for workers providing health services in remote areas of South Australia to contact as required for out of hours or unscheduled callouts
- Regularly review remote or isolated risk management processes and communication systems to ensure their effectiveness
- Investigate all reported incidents involving workers ensuring appropriate corrective actions have been taken to prevent further incident and to control identified hazards and risks arising from the workplace
- Support workers to utilise Employee Assistance Programs to manage any experiences that may adversely impact on their physical and psychological health
- Consult, cooperate and coordinate with all duty holders so far as is reasonably practicable where workers may have a shared duty over the same work health and safety matter.

2.7 LHN/HS WHSIM Teams

Will take reasonable care to:

- Facilitate the implementation of this policy directive throughout their delegated LHN/SAAS/HS/BU/AO
- Contribute to education and training on the implementation of this policy directive
- Provide information about hazard identification, risk management, and outcomes relative to remote or isolated work to executives, managers, workers and key interested parties.

2.8 Workers

Will take reasonable care to:

- Ensure their own health, safety and wellbeing in the workplace
- Ensure their conduct does not adversely affect the health, safety and welfare of other persons in the workplace
- Take an active role in the hazard management process, including performing risk assessments prior to performing remote or isolated work
- Ensure that any after hours or unscheduled callouts to provide a health service in a remote area of the State are provided in compliance with the requirements of Gayle's Law
- Report immediately any incidents, unsafe acts or serious safety risks to their line manager and on the Safety Learning System (SLS)
- Eliminate or control any immediate hazards if practicable to do so
- Follow safe work procedures, including security and communication processes related to remote or isolated work e.g. contacting second responders.

3. Policy Requirements

Remote or isolated work is defined as work that is isolated from the assistance of other persons because of the location, time or nature of the work. This includes but is not limited to home and community visits, after hours or unscheduled callouts for health services in remote areas of the State, country travel, attending conferences, working from home, field trips, working alone on and off site, working after hours or out of hours, working from a vehicle (field officers), emergency responders working alone (paramedic/emergency management), driving long distances, working in isolation and working remotely.

The requirements of Gayle's Law only apply to health practitioners.

3.1 Requirements

LHN/SAAS/HS/BU/AO will take reasonable steps to:

- Identify hazards and assess the risk to the health and safety of workers associated with remote or isolated work where the following circumstances may arise:
 - Working alone on site, in isolation or remotely
 - Working alone off site, in isolation or remotely
 - Working from a vehicle
 - Working alone after hours/out of hours callout or unscheduled callout.
- Provide risk management initiatives to ensure that identified hazards and risks associated with remote or isolated work are minimised and managed effectively through:
 - the provision of appropriate communication systems
 - the implementation and monitoring of communication systems for workers
 - the provision of a second responder when attending an out of hours or unscheduled callout in remote areas of South Australia, as prescribed by Gayle's Law
 - the development of safe work procedures
 - the provision of ancillary equipment required for:
 - effective communication
 - rescue
 - medical and first aid
 - emergency situations.
- Implement safety treatment and controls for remote or isolated work into operational and decision making processes for situations such as:
 - Working alone on site, in isolation or remotely
 - Working alone off site, in isolation or remotely
 - Working from a vehicle
 - Working alone after hours/out of hours callout or unscheduled callout
- Implement specific requirements under Gayle's Law to mitigate the risk to persons
 providing services in remote areas of South Australia that are out of hours or
 unscheduled by requiring them to be accompanied by a second responder.

3.2 Risk Management

DHW will take reasonable steps to implement a systematic risk management model to successfully manage hazards and risk associated with working alone, in isolation or remotely.

LHN/SAAS/HS/BU/AO must work towards an organisational approach to the prevention of workplace hazards and risks, and commit to continuous improvement, the ongoing review and revision of control measures associated with working alone, in isolation or remotely.

LHNs whose coverage includes a remote area defined by Gayle's Law must put in place policies and procedures to manage risks to the safety and security of health practitioners identified as being specific to the provision of health services at or from a specific location, or by a specific health service provider.

3.3 Risk Assessment

A risk assessment involves an identification of potential or known hazards and the implementation of risk control measures to address these risks.

A risk assessment must be undertaken by all workers prior to working alone, in isolation or remotely.

In preparation for working alone, in isolation or remotely, workers must first assess and establish the need to perform the work and the provision of the required service, including consulting with the relevant parties.

When the risk assessment process determines it to be unsafe to perform the service, or the worker considers the risk posed to be unacceptable, the service must not proceed and other options for service delivery should be explored (e.g. providing a health service centre based appointment).

When the risk assessment determines it is safe to work, consideration must still be given, but not limited to, the following risk control measures to achieve the required level of safety:

- communications (e.g. access to a SA Health mobile, which is fully charged and with emergency numbers programmed in; a personal duress alarm if available and coverage is present)
- communication strategy (e.g. communication contact buddy system) to ensure that communication is maintained prior to and immediately after the work alone, in isolation and /or remotely
- communications with the client contact to offer/arrange the offsite/home visit, using department/service guidelines
- possibility of referral to the health clinic during business hours instead of an out-of-hours visit
- maintained clinical and safety equipment required for the assigned work
- consideration if two workers are required to undertake the work
- health practitioners in remote areas of South Australia, as prescribed by Gayle's Law, must be accompanied by a second responder when attending an out of hours or unscheduled callout
 - health practitioners in remote areas must not attend a callout without a second responder except under the circumstances prescribed by Gayle's Law (refer to 3.6.2 of the Policy Guideline and SA Health's Gayle's Law FAQs)
- SA Police escort and protection for the duration of service/high risk mandatory visits.

Refer to Policy Guideline - Remote or Isolated Work Health and Safety (WHS) for information to facilitate the safety of all persons working remotely or in isolation, which includes hazard identification and risk assessment templates which may be adapted to assist workers in assessing and the mitigation of identified risk.

3.4 Communication Systems

- LHN/SAAS/HS/BU/AO must ensure communication systems are robust and effective in maintaining contact and accountability for all remote or isolated workers when normal telecommunication systems need to be enhanced i.e. due to telephone systems being limited by access or coverage is not available
- Communication systems must allow a worker when working alone, in isolation or remotely to call for assistance at any time during the service
- Communication equipment must be provided and maintained.

3.5 Onsite Management

- LHN/SAAS/HS/BU/AO remote or isolation work procedures and communication/emergency response processes must be implemented and regularly reviewed with security polices for consistency, and are integrated
- Workers who work alone, in isolation or remotely must be regularly consulted in the development and review of related policies and procedures
- Local inductions must include specific training about the risks of working alone, in isolation or remotely, including the requirements of Gayle's Law, using risk assessment

tools, security monitoring and communication procedures, and safe and effective use of transport

• LHN/SAAS/HS/AO must ensure that health service providers in remote areas of South Australia, as prescribed by Gayle's Law, actively record information that is likely to assist in the review of Gayle's Law (see 4.3).

3.6 Hazard/Incident Reporting

- All workplace incidents, hazards, near miss, unsafe acts or serious safety risks involving workers must be reported immediately to the relevant line manager/state duty manager (SAAS) and recorded on the Safety Learning System (SLS)/IRQA (SAAS).
- All reported incidents involving workers must be immediately investigated ensuring appropriate corrective actions have been taken to prevent further incident and to control identified hazards and risks arising from the workplace.
- Where an injury has been sustained by a worker, the injury must also be reported to the SA Health Notification of Work Injury number – 1800 702 264 on the same day, same shift or where reasonably practicable. All SAAS workers must report the injury to the SAAS State Duty Manager on 1300 886 268 within 4 hours of the occurrence / onset (refer to Management of Work-Related Injury/Illness (WHSIM) Policy Directive).
- The Regulator (SafeWork SA) must be notified for all notifiable incidents involving all workers
- LHN/SAAS/Health Services must build trust by communicating actions taken as a result of workplace incidents reported
- Workers must be supported and encouraged to utilise the range of counselling and debriefing options available, including the Employee Assistance Program (EAP) with regard to managing any experiences that may adversely impact on their physical and psychological health.

4. Implementation & Monitoring

4.1 SA Health WHSIM Corporate Documentation – Key Performance Indicators (KPIs)

This policy directive may be subject to KPI reporting.

4.2 Evaluation

In accordance with the <u>SA Health Policy Directive – Performance Review and Continuous Improvement</u>, implementation of this policy directive will be monitored via the DHW/LHN/SAAS WHS Internal Audit Program against the following criteria:

- LHN/SAAS/HS/BU/AO have identified and integrated safety considerations for remote or isolated work into operational and decision making processes for situations such as:
 - Working alone on site in isolation or remotely
 - Working alone off site in isolation or remotely
 - Working from a vehicle
 - Working alone after hours/out of hours callout or unscheduled callout.
- LHN/SAAS/HS/BU/AO have developed and implemented processes for maintaining and monitoring of effective communications with workers who work remotely or are isolated from the assistance of other persons because of the location, time or nature of the work

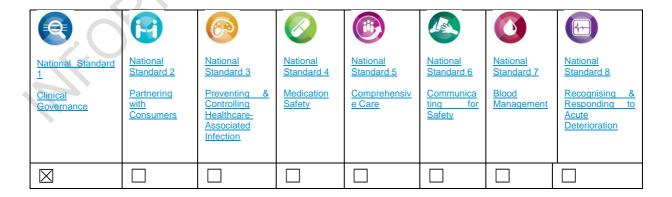
- Evidence of Risk Assessments that are performed prior to workers intending to work alone, in isolation or remotely performing the service
- Workers providing health services in the remote area of South Australia are aware of the requirements of Gayle's Law on induction
- LHN/SAAS/HS/BU/AO has a scheduled audit plan to test transport and communication equipment, including maintenance, repair, safety and survival equipment.

4.3 Gayle's Law Review

As requested by the Minister for Health, LHNs must ensure that the following information is recorded by each health service provider operating in a remote area:

- The number of second responders the provider has access to or employs
- The proportion of shifts, if any, where it has not been possible to roster a second responder
- In relation to each incident where a health service has not been provided due to the unavailability of a second responder:
 - Why a second responder was unavailable
 - The patient outcome
- In relation to each instance where a health practitioner has responded to an out-of-hours or unscheduled callout without a second responder, in contravention of Gayle's Law:
 - The profession of the health practitioner
 - o Date, time and location of the incident
 - Nature of the incident
 - The reason a second responder was not engaged (i.e. not available, urgency of the situation)
 - Any impact on the health and safety of the employee

5. National Safety and Quality Health Service Standards



6. Definitions

Reference may be made to the <u>SA Health Work Health Safety Injury Management System – Glossary and Terms</u> for clarification of any general terms used throughout this policy directive.

health practitioner means:

- a) any person registered under the *Health Practitioner Regulation National Law 2010* (i.e. a practitioner in the following health professions: Aboriginal and Torres Strait Islander health practice; Chinese medicine; chiropractic; dental; medical; medical radiation practice; nursing; midwifery; occupational therapy; optometry; osteopathy; paramedicine; pharmacy; physiotherapy; podiatry and psychology), and
- b) any other person providing a *health service* within the meaning of the *Health Practitioner Regulation National Law 2010* (i.e. hospital services, mental health services, pharmaceutical services, ambulance services, community health services, health education services, welfare services to implement any of the above services, pathology services and services provided by dietitians, masseurs, naturopaths, social workers, speech pathologists, audiologists and audiometrists).

isolated work means: work that is undertaken without the possibility of assistance of other persons because of the time or nature of the work. This includes but is not limited to home and community visits, working after hours and working alone on or off-site.

out of hours callout means: request for attendance of a health practitioner between 5:00pm and 8:00am, or anytime on a Saturday, Sunday or public holiday.

reasonably practicable means: in relation to a duty to ensure health and safety, 'reasonably practicable' means that which is, or was at a particular time, reasonably able to be done in relation to health and safety, taking into account and weighing up all relevant matters including the likelihood of the risk occurring and the degree of harm that might result.

remote area means: Gayle's Law will apply to any out of hours callout or unscheduled callout if it is within the part of South Australia that covers:

- a) an area not covered by a local council under the Local Government Act 1999
- b) the lands within the meaning of the *Anangu Pitjantjatjara Yankunytjatjara Land Rights Act* 1981
- c) the lands within the meaning of the Maralinga Tjarutja Land Rights Act 1984
- d) the District Council of Coober Pedy
- e) the Municipal Council of Roxby Downs.

second responder means: a trusted community member who will accompany a health practitioner who is providing an out of hours or unscheduled callout. A *second responder* must hold a current driver's licence and been the subject of a working with children check within the preceding 5 years and not have been prohibited from working with children.

N.B. a second responder is not required for a callout when the callout is to a police station, or an emergency where at least one other emergency services worker is present, in accordance with Gayle's Law Regulations.

unscheduled callout means: request for the attendance of a health practitioner within 24 hours of the request and the place for attendance is in a remote area.

7. Associated Policy Directives/Policy Guidelines and Resources

Work Health and Safety Act 2012 (SA)

Work Health and Safety Regulations 2012 (SA)

Return to Work Act 2014 (SA)

<u>Health Practitioner Regulation National Law (SA) 2010 (Remote Area Attendance) Amendment Act</u> 2017 ('Gayle's Law')

<u>Health Practitioner Regulation National Law (SA) (Remote Area Attendance) (No 2) Variation Regulations 2019</u>

Policy Directive - Hazard Identification and Risk Management (WHS)

Policy Directive – Management of Work Related Injury/Illness (WHSIM)

Policy Directive – Performance Review and Continuous Improvement

Policy Directive - Roles, Responsibilities and Governance (WHS)

Policy Directive – Work Health, Safety and Injury Management (WHSIM)

Policy Directive – Work Health and Safety Reporting and Investigation

Policy Guideline - Remote or Isolated Work Health and Safety (WHS)

Fact Sheet – Communication Systems for Remote or Isolated Work (WHS)

SA Health – Gayle's Law FAQs

CRANAplus, 2017, Safety and Security Guidelines for Remote and Isolated Health

8. Document Ownership & History

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If so, which Policy Directive (title)? N/A

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26/09/2014	V1.0	Portfolio Executive, SA Health	Original PE approved version.