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Essential Competencies for HRM

Mike Fazey

About this book

Essential Competencies in HRM is intended primarily for those studying towards a Vocational Education and Training (VET) qualification in human resource management. The chapters reflect the knowledge assessment criteria for each competency, and address the issues in a succinct way with an emphasis on policy and practice.

Each chapter includes two learning activities that require students to apply the ideas outlined in the chapter to a realistic scenario where they have to deal with an issue or solve a problem – the kinds of challenges that HR professionals are asked to deal with every day.

Affordable, readable, and free from excessive jargon and too many chapters, *Essential Competencies in HRM* contains just the critical, core information that students need to read, learn, remember and then apply in their chosen fields of work.



About the Author



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CHAPTER 7

Workplace Health and Safety

Learning Objectives

After reading this chapter, you should be able to:

- ✓ Describe the legal framework surrounding workplace health and safety (WHS).
- ✓ Outline the legal responsibilities of and duties of managers, supervisors, persons conducting businesses or undertakings (PCBUs) and workers in relation to workplace health and safety risk management in the workplace.
- ✓ Explain the concept of the hierarchy of controls.
- ✓ Discuss WHS policies and procedures and their contents.
- ✓ Describe workplace health and wellbeing issues and discuss how organisations can address them.

One of the fundamental legal and moral responsibilities of employers is to provide a safe, healthy working environment. This requires them to take reasonable steps to protect employees from injury, illness or harm. Workplace health and safety is governed by very detailed legislation and regulations which run to hundreds of pages. Government agencies responsible for administering this legislation and regulatory regimes are typically empowered to impose significant financial penalties on organisations that breach them. Safety and health are also important priorities for many trade unions, and a significant potential cause of industrial disputation. So there are strong compliance and risk management aspects to safety, health and wellbeing policy.

In addition to reducing the likelihood of incurring hefty fines or loss of productivity through industrial action, a safer, healthier workplace also contributes to reductions in workers' compensation claims and, therefore, to workers' compensation premiums.

However, there is also a strategic dimension. Increasingly, organisations are connecting employee safety, health and wellbeing with increased productivity, increased employee commitment, reduced absence rates and lower turnover. Clearly, employees value policies and practices that enhance their quality of work life. Such policies and practices, therefore, contribute strongly to an organisation's reputation and competitiveness in the labour market.

The ageing workforce phenomenon is another significant strategic driver for safety, health and wellbeing. With an increasing number of older workers in the workforce and widespread encouragement to retire later rather than sooner, the need to keep people healthy and productive for as long as possible has assumed greater importance than ever before. Indeed, it could be argued that there is a growing trend towards a more holistic approach to employee safety, health and wellbeing.

A comprehensive, coherent approach to workplace health and safety is the foundation for an effective and rounded method. According to Kramar, Bartram and De Cieri (2014), such an approach would incorporate three elements:

- organisation, responsibility and accountability,
- consultative arrangements, and
- Specific program elements.

The Legal Framework

Until 2011, work health and safety was governed by legislation in each state. The various Acts were not necessarily consistent with one another, and this created issues for businesses operating in more than one state. In 2011, the federal government enacted the *Work Health and Safety Act*, which was designed to harmonise the legislative requirements across the nation. This required that each state formally adopt the legislation. At the time of writing, all states except Victoria and Western Australia had done this. Eventually, it is intended that the provisions of the *Work Health and Safety Act* apply across Australia.

The Act forms the basis of a complex framework of regulatory requirements, which is outlined in Table 7.1 below:

Table 7.1 The legal framework for WHS

Legislation	Describes the legal responsibilities of employers and employees in relation to work health and safety.
Regulations	Outline detailed safety and health requirements for different industries and types of businesses. Regulations are legally binding.
Codes of practice	Provide practical advice on how to meet legislative and regulatory requirements. These are usually issued by government agencies responsible for WHS. They are not legally binding.
Guidance notes and facts sheets	These are explanatory notes designed to help employers correctly interpret the legislation and regulations.
Australian standards	These are developed independently by Standards Australia. They are not legally binding unless they are cited in the regulations.

The Australian Industry Group (2011) has identified seven key elements of the WHS Act, which are outlined in Table 7.2:

Table 7.2 Key elements of the WHS Act

Duty of care	A business must use risk management to, so far as is reasonably practicable, ensure the health and safety of workers and other people exposed to the business's operation.
Meaning of worker	Workers include those engaged in the running of the business, whether they are employees, contractors, labour hire, franchisees or volunteers. Workers also have responsibilities to take care for their own safety and health.
Cooperation with other businesses	The business must consult, cooperate and coordinate with other businesses that have similar workers to ensure that all appropriate measures are being taken.
Consultation with workers	The business must consult with workers about decisions that could affect workers' health and safety.
Upstream responsibilities	The business must consider the health and safety impacts of the products or services it designs, makes, imports, sells or installs if they are to be used in Australian workplaces.

Union right of entry	The business must allow union officials access to the workplace in response to a suspected breach, or to consult with or advise workers, or to assist an elected health and safety representative.
Due diligence	The directors and senior managers must exercise due diligence to ensure that the business is meeting its responsibilities under the Act.

The Act also requires employers to report serious incidents to the relevant government workplace safety authority. Serious incidents are those that involve a fatality, a serious illness or injury or a dangerous incident. There is also an obligation to investigate these kinds of incidents to determine the cause and to inform strategies for ensuring that such an incident does not happen again. Where an employer is found to have been negligent, prosecution may result.

Roles and Responsibilities

Workplace health and safety is a collective responsibility. Everyone in the workplace has responsibilities for making the workplace a safe and healthy environment. According to the *WHS Act*, ultimately the person/s conducting the business or undertaking (i.e. business owners, leaders) are responsible for:

- the provision and maintenance of a work environment without risks to health and safety;
- the provision and maintenance of safe plant and structures;
- the provision and maintenance of safe systems of work;
- the safe use, handling and storage of plant, structures and substances;
- the provision of adequate facilities for the welfare of workers in carrying out work for the business or undertaking, including ensuring access to those facilities;
- the provision of any information, training, instruction or supervision that is necessary to protect all persons from risks to their health and safety arising from work carried out as part of the conduct of the business or undertaking; and
- that the health of workers and the conditions at the workplace are monitored for the purpose of preventing illness or injury to workers arising from the conduct of the business or undertaking (*WHS Act* 2011, pp 15-16).

The Act also requires that employees take reasonable care to look after their own health and safety and the health and safety of others. The same applies to contractors and workers engaged through labour hire agencies.

In order to meet these obligations, many organisations create specific roles.

WHS specialists

Functional responsibility for workplace health and safety usually resides within the human resources department. Many HR departments employ WHS specialists to manage this function. This is particularly true in industries like mining, manufacturing and construction, where safety is a high priority workforce management issue. The role of WHS specialists involves developing and managing strategies, policies and procedures that enable the organisation to meet its obligations, as well as providing advice to management on health and safety issues.

WHS representatives

WHS representatives are workers elected by their peers to act as a link between employees and management in relation to health and safety matters. According to Bahn (2014), their duties include:

- to inspect the workplace as agreed with the employer having given reasonable notice, or at any time without notice in the event of an incident;
- to investigate accidents, dangerous occurrences or risks of serious and imminent injury or harm;
- to be present at interviews concerning health and safety between a worker and an inspector or the employer as requested by the worker;
- to keep informed of WHS information;
- to report hazards identified in the workplace to the employer;
- to request the establishment of, and refer matters to, the WHS committee;
- to consult and cooperate with the employer on WHS matters; and
- to liaise with employees on WHS matters.

WHS committees

WHS committees usually consist of a cross-section of management, supervisory and operational employees, and often a trade union delegate. Its role revolves around strategic planning and facilitating consultation. Where they exist, WHS committees meet at least once every three months.

Emergency roles

Most organisations have designated roles for dealing with emergencies. These are not full-time or paid roles. They are usually undertaken on a voluntary basis by employees, who receive specific training for the role. They include emergency/fire wardens and first aid officers.

Emergency/fire wardens are responsible for evacuations. There are usually several wardens, often under the leadership of a chief warden. In multi storey buildings, there is usually at least one warden per floor. In large commercial buildings where there are multiple businesses operating, the process is generally coordinated centrally by the building management. Emergency procedures need to be rehearsed to ensure that they run smoothly. For this reason, evacuation drills should be conducted regularly.

First aid officers are trained and certified to provide immediate assistance to employees who are injured or who experience a medical emergency at work. As with wardens, these are existing employees who undertake the role voluntarily. There can be multiple first aid officers in a large organisation. First aid officers require re-certification periodically. Organisations should bear the cost of initial training/certification, as well as required refresher training.

In addition to these internal roles, there are important roles within the government agencies within each jurisdiction that are responsible for workplace health and safety.

WHS inspectors

The *WHS Act* defines the role of inspectors as including, but not restricted to the following:

- to enter, inspect and examine workplaces;
- to conduct examinations and enquiries;
- to provide information to any person that may help achieve compliance with the legislation;
- to take and remove samples of any substance or thing, take possession of plant and materials for further examination or testing or as evidence;
- to take photos and measurements, make sketches and recordings;
- to examine and take copies of any documents relating to WHS;
- to require that any part or all the workplace be left undisturbed; and
- to interview people at the workplace in private where an inspector believes it is appropriate or the person being interviewed requests this. The inspector can also interview anyone else who they have reasonable grounds for believing may be able to provide relevant information.

Hazards, Risks and Controls

Hazards

A workplace hazard can be defined as 'a condition or situation that exists within the working environment which could result in injury, harm to health and/or damage' (Bahn 2014). Identifying workplace hazards and dealing with them is fundamental to creating a safe workplace.

The table below gives examples of various categories of workplace hazards.

Table 7.3 Examples of workplace hazards by category

Category	Hazards
Physical	Poorly designed or poorly maintained machinery, excessive noise, and exposure to bright light (e.g. welding), excessive heat and cold, vibration, electricity.
Chemical	Exposure to poisonous liquids, gases, vapours, fumes, dust, asbestos.
Biological	Exposure to infectious diseases, moulds and fungi.
Ergonomic	Poorly designed control panels or work stations, lack of lifting equipment.
Psychological	Stress, long hours, time pressure, bullying.
Radiation	Exposure to radiation from radioactive materials or environments.

Source: Adapted from Bahn S 2014, *OHS at Work, Tilde Business, Prahran, p.97*

Hazards lead to risks, as illustrated in the examples in Table 7.4

Table 7.4 Examples of workplace hazards and risks

Hazard	Risk
Electric cable split and frayed	Electrocution
Boxes weighing 30kg to be moved	Lower back injury
Arc welding in process	Eye damage
Noise levels from machinery more than 120 decibels	Hearing damage
Handling of used syringes	Transmission of diseases
Working shifts of more than 12 hours with less than 8 hours break	Fatigue, stress and harm to wellbeing

Source: Bahn S 2014, *OHS at Work, Tilde Business, Prahran, p.92*

All employees have a responsibility to report hazards when they are detected, and employers have an obligation to act on these reports.

Risk management

Risk management is the process of systematically identifying and addressing business risks. Most organisations have some kind of formal risk management process, and some larger organisations employ risk management specialists to ensure that the organisation is

equipped to manage risks effectively. Business risks can include things like natural disasters, systems failures, fraud, accidents or any event that has an adverse effect on the business.

Typically, the risk management process involves three stages (Figure 7.1).

Figure 7.1 Risk management process



The usual outcome of the risk analysis stage is a matrix of risks and their risk ratings based on how likely they are to occur (shown on the vertical axis in the table below) and the potential level of impact (shown on the horizontal axis).

Table 7.5 Risk assessment matrix

	Insignificant	Minor	Moderate	Major	Catastrophic
Almost certain	M	H	H	E	E
Likely	M	M	H	H	E
Possible	L	M	M	H	E
Unlikely	L	M	M	M	H
Rare	L	L	M	M	M

Risk ratings: L = low, M = medium, H = high, E = extreme.

Risks with high or extreme ratings will obviously be priorities at the risk treatment stage.

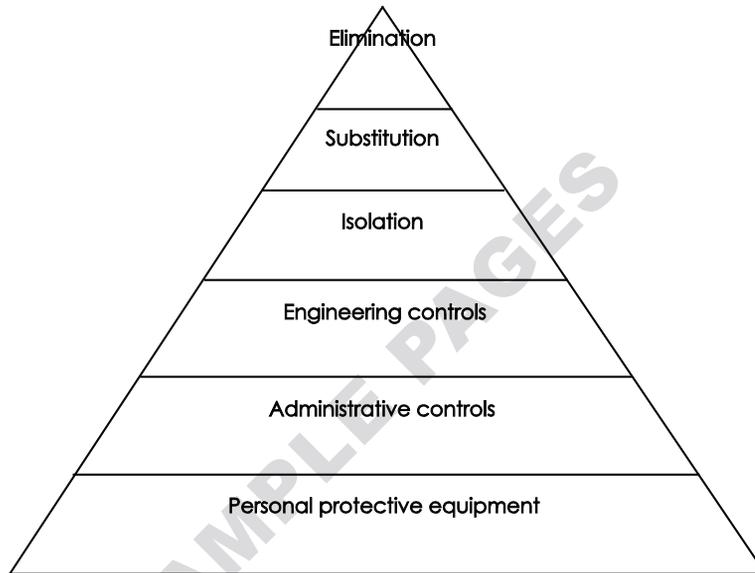
The risk management process lends itself very well to dealing with health and safety issues. Workplace inspections are an effective way of identifying risks, along with documentation from hazard reports and incident reports. Consultation is very important to the risk identification process – employees, supervisors and OHS representatives should all be involved.

Consultation is also important in the risk analysis process. A degree of judgment is needed to arrive at risk ratings, so drawing on the experience and expertise of those who understand the work and the work environment will lead to more accurate risk ratings.

Hierarchy of controls

Risk treatments should be determined according to the hierarchy of controls. This is a system for dealing with health and safety risks which expresses different control options as a hierarchy based on the level of effectiveness.

Figure 7.2 Hierarchy of controls



The highest level of the hierarchy is elimination. Clearly, eliminating a hazard or risk altogether is the most effective way of dealing with it. However, it may not be possible to totally eliminate it, especially if it is an inherent feature of a job or workplace.

If this is the case, the next hierarchical level, substitution, needs to be considered. This involves replacing something that produces a hazard with something that doesn't (e.g. replacing a toxic substance with a non-toxic one).

If this is not possible, the next category of controls focuses on isolating people from a hazard. This might mean physically relocating people away from the hazard or tagging it so as to warn people to stay clear.

If isolation is not possible, engineering controls may be considered. These involve making changes to structures and/or processes to make them safer. For example, installing exhaust fans to remove dust or fumes or using lifting equipment rather than manual handling. One disadvantage of this type of control is that it invariably involves a cost outlay; however, that

outlay could also be seen as an investment in future safety that would be offset by reductions in workers' compensation costs and/or lost time.

If engineering controls are not feasible, administrative controls may be required. These involve changes to processes and procedures, which might include providing training, developing formal safe operating procedures or the installation of signs or warning labels.

If none of the above are feasible, the final (and least effective) level of the hierarchy is to provide personal protective equipment such as safety helmets, safety glasses or goggles, earmuffs, overalls, safety harnesses, safety boots, masks or breathing apparatus.

The hierarchy should be applied regardless of the risk rating. Although it may be tempting to simply accept a low rated risk (i.e. not do anything to address it), doing this may have unpleasant consequences if it does happen. Legal obligations under the *WHS Act* really do not give organisations the option of doing nothing.

Safety Policy

Prevention

Preventive policies can cover a range of workforce management issues including:

- safety processes and procedures, including hazard identification,
- requirements for protective clothing,
- processes to maintain a clean, hygienic environment,
- requirements for machinery and equipment maintenance,
- specialist safety and injury management roles,
- drug and alcohol testing,
- ergonomic workstation design and assessment,
- protection from violence and abuse,
- requirements for a smoke-free workplace, and
- workplace bullying and harassment.

Many of these measures are self-evident, particularly in industrial environments. Legislation and regulations often prescribe certain preventive processes for particular industries, so policies need to be consistent with whatever requirements apply. Policies should also include requirements for employees at all levels to report workplace hazards and for the organisation to act on them in a timely way.

While safety is very much culturally engrained in industrial environments, it tends to be less so in commercial or white collar settings where the potential for injury is not so obvious.

In these environments, poor workstation design can lead to a range of chronic injuries and medical conditions such as tendonitis and back complaints, which can be very costly for employers. The eyes can also be affected by continual exposure to computer monitors. Indeed, during the 1980s when many organisations introduced information technology for the first time, these types of injuries reached epidemic proportions. An appropriate policy response to scenarios like this is to require workstations to be assessed regularly to ensure that they are ergonomically sound. Routine eye testing for employees doing screen-based work would also be an appropriate preventive policy measure.

The issue of protection from violence and abuse from clients and customers is becoming increasingly important, especially in organisations where employees have direct public contact. In some cases, employees have even been stalked or harassed outside the workplace by disgruntled or disturbed clients or customers. Policies such as those that protect the identity of employees have been enacted in organisations to help prevent these types of incidents occurring. Other measures include requiring employees to use only their first names when dealing with clients, and requiring that employees report incidents where they are verbally threatened or abused. It may also be appropriate to have a policy that enables the organisation to withdraw service from clients or customers who have acted in an abusive or threatening manner.

Training

Safety training is often mandatory and can include (depending on the industry):

- safety awareness training,
- first aid training,
- manual handling training,
- driver training,
- ergonomic awareness training, and
- certification for machinery operation and other potentially dangerous occupations.

Policies should specify the training that should be undertaken by employees in particular occupations and should also mandate refresher training to ensure that employee knowledge and awareness is maintained. The inclusion of safety management training in management development programs would also be an appropriate policy requirement in many industries.

Management and support

Safety management policies generally encompass emergency management, crisis management and injury management.

Emergency procedures covering fire, accidents, bomb threats or other adverse workplace events should be covered by the policy. The policy should include requirements for regular fire drills or other exercises designed to heighten awareness and ensure that emergencies are managed effectively. The policy should also define emergency management roles and responsibilities.

Crisis management generally covers extraordinary situations where employees are in potential danger. These might include extreme incidents like robberies, terrorist attacks or natural disasters. Crisis management policies should be designed to ensure that the danger to employees is minimised, that all employees are accounted for when a crisis occurs and that, where a crisis is ongoing, that there is effective communication. Post-crisis support services such as access to counselling should also be covered in the policy. Crisis management policies might also include arrangements for business continuity and media liaison. Because of the complexity and interconnectedness of crisis management issues, policy responsibility may not lie with HR. If this is the case, HR should ensure that the policy adequately covers employee safety issues and that HR has a central role in the crisis management process.

Less dramatic but equally important is the issue of injury management. This is the process of managing the rehabilitation and return to work of injured workers. Injury management policies should ensure that injured workers receive appropriate medical treatment and that they return to work as soon as is possible. This might include provisions for gradual return to work (i.e. where a recovering employee may return on a part-time basis and ease back into full-time work over time). It might also allow for recovering workers' jobs to be modified temporarily so as not to risk re-injury (e.g. excluding heavy lifting). Injury management may also encompass redeployment provisions where workers are unable to return to their original position because of the ongoing effects of their injury. Injury management policy provisions should cover those suffering from psychological ailments such as stress, as well as those with physical injuries.

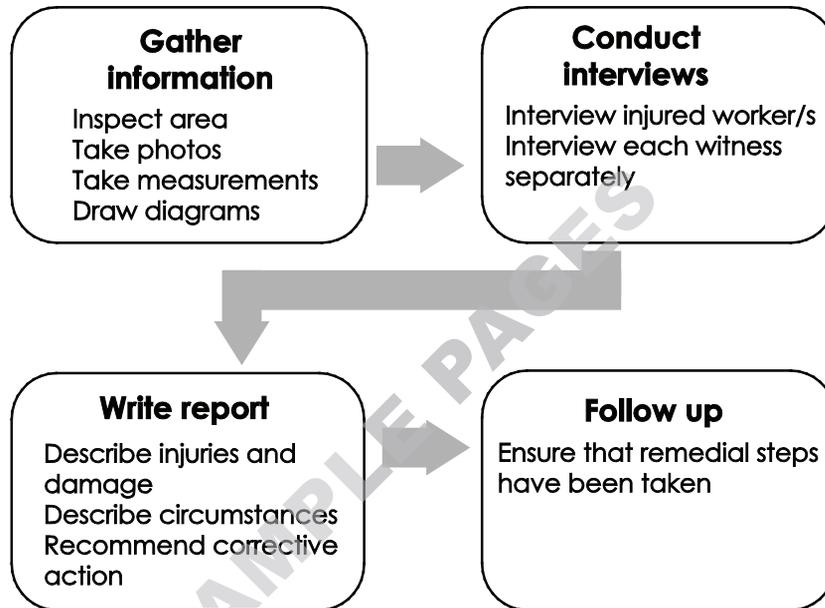
Incident/accident reporting

As we have already discussed, serious accidents or incidents that lead to fatalities or serious injuries are investigated by the relevant government authority responsible for workplace health and safety. Less serious incidents should not be ignored either. Indeed, any incident that leads to an injury or illness or is a close call should be reported and investigated internally. This should be made explicit in safety policies. Report forms should include details of the incident and the person/people involved, details of any injuries and any first aid or treatment provided. It is also important that incidents be assessed to determine whether

changes to the workplace or to work practices need to be made. Avoiding a recurrence of the incident should be a priority.

The Australian Human Resources Institute (2013) recommends a four stage investigation process:

Figure 7.3 Internal investigation process



Employee Health and Wellbeing

Workplace stress

Workplace stress has become a major issue in recent times. The frequency of stress-related absences and stress-related workers' compensation claims has increased markedly, especially among white collar workers. Different individuals have different levels of stress tolerance and some are more susceptible than others. This is not something that employers can really control or influence. However, as Holland et al (2015) have pointed out, there are several organisational factors that contribute to stress and have a negative impact on employee health and wellbeing. These are summarised in Table 7.6.

The effects of issues like these on individuals can lead to physical and psychological ill-health and ultimately to burn-out. For the organisation, they can lead to increased levels

of absenteeism, reduced productivity, increased numbers of workers' compensation claims and increased employee turnover. It is, therefore, in the best interests of organisations to monitor employee wellbeing and to enact initiatives that contribute positively to employee wellbeing, either by eliminating stressors or by helping employees to manage them more effectively.

Table 7.6 Organisational issues affecting employee health and wellbeing

Issue	Causes of stress, poor health and wellbeing
Work hours and schedules	Long hours, irregular work schedules, shift work, fly in fly out rosters
Leadership style and workplace relationships	Autocratic and authoritarian leadership styles, workplace conflict
Work demands and level of control	High job demands, low levels of control/autonomy
Role demands	Role conflict, role overload, role ambiguity
Effort vs reward	High levels of employee effort vs low levels of remuneration, recognition and career opportunities
Technology	24/7 connectivity exacerbates role and workload-related stressors and interferes with work-life balance.
Job insecurity	Downsizing, increased use of non-permanent workers, reduced career development opportunities.

Employee wellbeing initiatives

Employee health and wellbeing initiatives are concerned with facilitating the long-term health and wellbeing of employees and might include:

- quit smoking programs,
- weight loss programs,
- exercise and fitness programs,
- subsidisation or salary packaging of gym memberships,
- health checks,
- flu vaccinations, and
- work-life balance initiatives.

One of the major issues in this area is privacy. Most people would oppose the idea of compulsory health checks or requirements to undertake a weight loss program or a quit smoking program. Societal values support the idea that, ultimately, health is a personal issue and a personal responsibility. However, there is an argument that where a health issue

such as obesity is affecting an employee's work performance adversely, there is an employer right to take appropriate action. As a general rule, however, strategies in this area should emphasise voluntary rather than mandatory participation in illness prevention initiatives such as those listed above.

The capacity of the organisation to provide services like these is also an issue that should be considered. It may not be financially viable to provide a comprehensive range of initiatives. Decisions need to reflect the costs and potential benefits. An organisation may choose to provide some but not all of the services listed, or to subsidise the cost to employees rather than pay for the entire cost. When embracing preventive health and wellbeing initiatives for the first time, it might well be prudent for organisations to begin modestly, and expand the range of services over time as resources allow. Sustainability is important because employees will generally react negatively to the withdrawal of services, so the potential for enhanced attraction and retention could be damaged or lost altogether.

Health awareness training can form an important part of preventive strategies. Training such as this is generally about raising awareness of the risk factors for chronic diseases and promoting healthy lifestyles. Training initiatives are often accompanied by health checks or by employer-sponsored events like healthy lunches. As discussed in the previous section, these types of initiatives should be voluntary rather than mandatory, and should reflect the organisation's capacity to provide them.

Management training is also important. Managers need to be skilled in and knowledgeable about issues like managing chronically ill or injured workers, maintaining safety standards and managing emergencies or crises. There is a case for making this type of training mandatory for all managers. A policy that requires managers to undergo this type of training will not only enhance management practices, it will also help to demonstrate the organisation's commitment to employee safety, health and wellbeing - a useful thing to be able to do in case of litigation.

Many larger organisations have employee assistance programs which give employees access to confidential counselling and support. Programs like these can help employees to cope with work and personal problems and are generally valued highly.

Given the increasing prevalence of stress and stress-related absences in modern workplaces, the provision of stress management programs can be useful. These usually take the form of workshops or seminars that raise awareness of stressors and provide participants with skills to help them deal effectively with stressful situations.

Peer support programs can perform a similar function in organisations where employees are exposed to stressful incidents such as customer abuse or threats. Peer supporters are

employees who are trained to debrief colleagues in the immediate aftermath of an unpleasant incident. The aim is to help employees deal with the emotions that such incidents arouse so that they can return to their duties as soon as possible. Peer supporters are also trained to recognise where professional counselling or other assistance is needed.

All of these initiatives incur costs to the organisation. Although most organisations would see these costs as being necessary to help prevent the even greater costs of increased workers' compensation premiums, lost productivity, absenteeism, or litigation, there remains a danger that in periods of economic downturn they could be seen as dispensable. Providing these kinds of services as a matter of policy can give them greater legitimacy and make it more difficult for organisations to discontinue them. This is not to suggest that they should be continued indefinitely, however. They should be reviewed periodically, which means that their usefulness and value are assessed in a systematic way rather than as a knee-jerk reaction to changed economic circumstances.

Global Issues

The globalisation of business has increased the level of international mobility among the employees of organisations operating across national borders. Indeed, many companies have operations in countries and regions that potentially pose additional safety, health and wellbeing issues.

Exposure to HIV/AIDS and other contagious diseases can be a significant risk in some parts of the world. In addition, many less developed countries have only rudimentary health systems and facilities, so the risks of employees becoming ill but not receiving medical treatment in a timely way are significantly increased. Organisations that deploy staff to countries or regions where this is a risk need to develop policies that help protect employees. These might include the provision of vaccinations or other protective measures, or provision of emergency evacuation to a location where appropriate medical aid can be accessed.

Organisations deploying staff in areas that are politically volatile should recognise the risks of violence, terrorism or other issues caused by civil unrest or warfare, and develop policies that guarantee employees some level of safety. Policies covering these kinds of situations should commit the organisation to providing ongoing security arrangements and, where the situation becomes untenable, emergency evacuation.

Employees who travel overseas regularly may also be at risk of developing travel-related health problems such as deep vein thrombosis. International travel policies should require appropriate preventive measures to be taken by employees travelling by air, and should also commit the organisation to providing medical treatment if this becomes necessary.

Summary

- Workplace health and safety (WHS) is one of the most fundamental and important responsibilities of employers and employees.
- WHS is governed by a complex legislative and regulatory framework that includes federal and state legislation, detailed regulations, and codes of practice, guidelines and Australian standards.
- There are often several different roles within organisations that have direct functional responsibility. These include WHS specialists within the human resources department, WHS representatives who are elected by workers, and WHS committees which provide a consultative mechanism. In addition, there are designated emergency roles such as fire/emergency wardens and first aid officers.
- The identification and assessment of hazards and risks is fundamental to good WHS practice, and can be carried out using a formal risk management framework.
- The treatment of risks should be informed by the hierarchy of controls which categorises methods of controlling risks according to their relative effectiveness.
- Safety policies need to outline preventive measures as well as describing emergency, crisis management, injury management and incident investigation procedures.
- Employee wellbeing initiatives can be implemented to improve employee health, reduce workplace stress and/or improve employees' ability to deal with stress.
- Organisations that require employees to travel and work overseas should have policies in place that help to protect their health and safety, recognising that there are increased risks in some parts of the world.

Learning activity 7.1

Identifying occupational hazards, risks and controls

Consider the occupations in the table below. For each one, identify the hazards and risks that are inherent in the job, using your knowledge of what each job entails. Then, using the hierarchy of controls as your reference point, identify possible controls for each hazard/risk. You should also identify what type of control each one is (e.g. elimination, isolation, engineering control etc.)

Occupation	Hazards/risks	Controls	Control type
Long haul truck driver			
Child care worker			
Flight attendant			
Hairdresser			
Data entry operator			
Window cleaner			

Learning activity 7.2

An employee health program: Weighing up costs, risks and benefits

City Insurance is a general insurance company with about 300 employees. Recently, the HR manager put a proposal to the company's executive to sponsor an employee health and fitness program. The rationale for the proposal was that it would:

- improve employee commitment at a time when retention is a big issue,
- improve morale, which a recent employee survey had shown was beginning to decline,
- provide a vehicle for employees from different business units to interact, which would help to break down the 'silos' that existed in the company,
- act as an attraction factor for potential new employees,
- reduce sickness and absence rates, and
- Produce long-term productivity benefits.

The executive subsequently approved a pilot program. At its conclusion, the program was to be evaluated and a decision made about the long-term viability of adopting it as policy.

A health and fitness consultant was engaged to run the pilot program, which included an exercise program (isometric exercise, running and gym work) plus measurement and monitoring of health and fitness levels.

Twenty employees signed up for the pilot program, which ran for three months.

At the end of the pilot program, HR undertook an evaluation that included surveying participants, analysing costs and HR data for the 20 participants, and researching outcomes from similar programs elsewhere. The evaluation resulted in the following findings:

- Employee reaction to the program was outstanding. Everyone who participated loved the program, and attendance at the various exercise and assessment sessions was excellent.
- Employees reported that the program enhanced their perception of the company and was likely to be a positive factor in terms of retention.
- Employees also reported positive effects from their interaction with colleagues from other business units whom they would not otherwise have had contact with.
- There was a strong view among participants that the program should be ongoing (i.e. not just limited to three months). While some of them had continued to keep fit independently, the majority had not.
- The health and fitness levels of all participants increased significantly. Almost everyone recorded an improved body mass index, improved blood pressure and lung capacity, and better flexibility.
- During the three months of the program, sick leave for the 20 participants actually increased. This was mainly due to several people sustaining minor injuries and muscle strains that required treatment.

- Research by HR in relation to workers' compensation coverage revealed that injuries or adverse medical events that resulted from an employer-sponsored exercise program were compensable. While the existence of such a program would not in itself affect the company's workers' compensation premiums, if there were claims in future, this would result in increased premiums.
- While there was general support in the literature and some anecdotal evidence of positive effects, HR was able to find little hard data supporting a link between corporate health and fitness programs and increased productivity or long-term reductions in sickness or absence rates.
- The direct cost of the pilot program was \$30,000. There were also indirect costs resulting from the increased sick leave among participants.

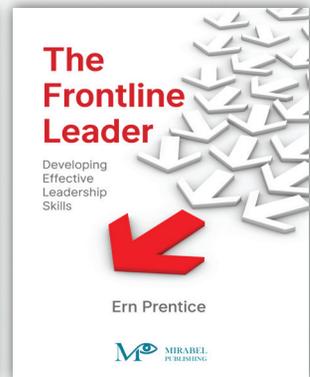
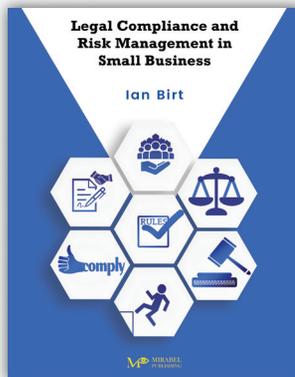
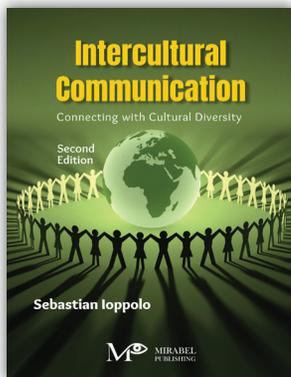
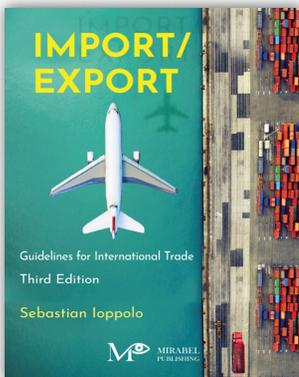
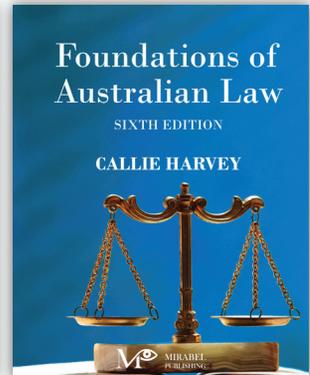
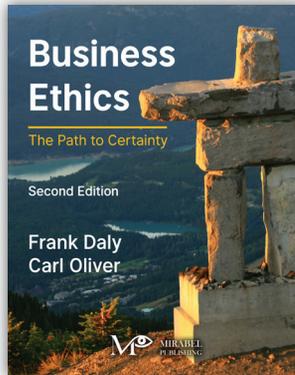
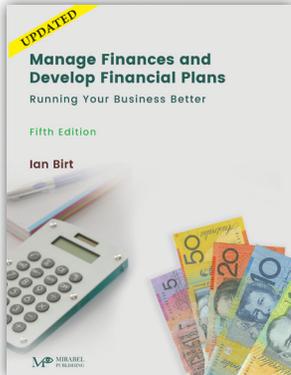
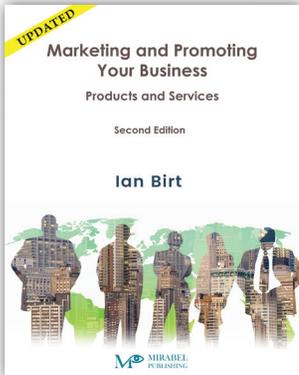
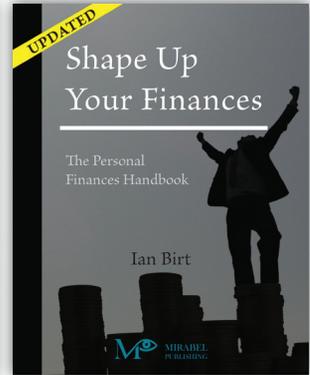
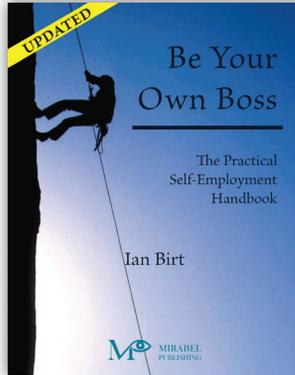
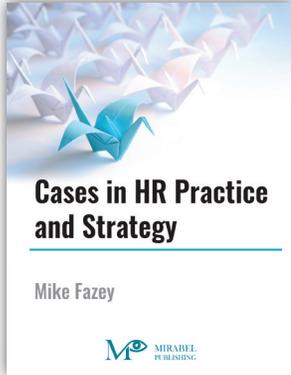
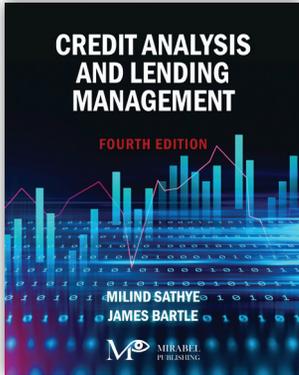
Discussion questions

1. What are the costs, benefits and risks associated with the program?
2. Should the company continue with the program? If so, why? If not, why not?
3. Are there other initiatives that might achieve similar results for the company?

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