



A Health and Safety Toolbox



Community
Waikato

He piko he kaainga

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DISCLAIMER: The content of this Health and Safety resource is for information purposes only and it is presented in good faith using the information available to us at the time of preparation. We encourage users to seek advice from Health and Safety professionals/experts who are familiar with the Health and Safety at Work Act 2015, and its implementation. Also refer to advice available from WorkSafe NZ.

Health & Safety in NZ

The Health and Safety at Work Act 2015 (HSWA) introduced changes to the approach and practices around the health, safety and well-being of people in a workplace. A key objective of this change was to **shift workplace culture** so everyone involved feels they owe a duty to others involved in the business or workplace.

The 2015 Act has shifted the focus to what really matters because it:

- Focuses on **proportionality of risk and control**;
- Shifts from the old approach of **managing and taking action around critical risks** to focus on **reducing workplace harm**; and
- Introduces the reasonably practicable approach to what businesses (marae/ community organisations) need to do.

Also, the 2015 Act:

- Shifts the focus to **conduct of work** rather than the physical workplace;
- Supports more **effective engagement and participation of workers**; and
- Is **flexible** to suit the size and need of the business (marae/community organisation).

WorkSafe NZ reported that between 2008 and 2010 there have been 102 deaths and 378 work-related serious injuries, with a real cost of \$3.5 billion to the country. It is unclear if these figures include incidents involving not-for-profit organisations.

The NZ Government set a minimum target of 25% reduction in workplace serious harm and fatalities by 2020.

A Toolbox for Community Organisations and Marae

We recognise that not all community organisations and marae have the capacity or resources available to engage experts to help them think about Health and Safety. As such, the aim of this toolkit is to be an easy-to-use, accessible and useful resource to assist groups to develop a comprehensive Health and Safety Plan.

This Toolbox is intended to be used by marae and small to medium sized not-for-profit community organisations to assist in creating a Health and Safety plan that is tailored to their specific needs and interests.

Throughout the development of this toolbox we have worked with the awareness of the importance and need for whānau and hapū to fulfil their responsibilities as the hau kāinga and kaitiaki of their marae, and to uphold the tikanga they practice.

We also recognise the unique circumstances that community organisations operate in and the importance of having processes that are effective while acknowledging the limits on their capacity.

We have designed this Toolbox so that when you work through each section you are creating a plan that reflects the specific culture, characteristics and people of your marae or organisation.

**Health and Safety
in community
organisations and
marae.**

**Hauora me te
haumaruru i ngaa
whakahaerenga
hapori, i ngaa marae.**

The Health and Safety Toolbox Process

Start with this Health and Safety TOOLBOX

1. Use the Health and Safety Framework

2. Create a Health and Safety Plan

3. Apply it using a Method of Action

Once you have completed your Health and Safety Plan you can write your Health and Safety Policy. This will outline your organisations commitment and position regarding Health and Safety.

Your policy will refer to your Health and Safety plan for the details including the processes and procedures to follow. There is an example Health and Safety Policy Statement in Part B of this Toolbox.

What's inside this Health and Safety Toolbox?

There are three (3) main parts to this Health and Safety Toolbox:

PART A: A Health and Safety Framework

This framework consists of nine (9) sections that once completed provide the information you require to construct your own Health and Safety plan.

PART B: Templates and Tools

The templates and tools in this section can be photocopied and used as part of your Health and Safety planning. Electronic versions of some of the templates and tools are available on the Community Waikato website.

PART C: Supporting Information

This section includes core legislative information including definitions of PCBU and Volunteer Associations, Duty Holder Responsibilities, Offences and Penalties.

Why use this Toolbox?

By using this Toolbox you can create a comprehensive Health and Safety Plan that is tailored and appropriate to the specific needs of your organisation/marae.

You will determine:

- Your Health and Safety responsibilities and how to manage risks and harm facing your marae/organisation.
- The practical steps, training and instruction needed in your organisation/marae to ensure people are healthy and safe.
- The impact of key changes resulting from the Health and Safety at Work Act 2015.

How to use this Toolbox?

1. Set aside sufficient time to work through the nine (9) sections of the Health and Safety Framework. You will probably need to have several conversations with your team to complete the whole process.
2. Read and answer all the questions in each section. Although a few questions may feel repetitive, they are designed to check assumptions about your organisation/marae and to try and ensure nothing is missed.
3. Use a group-approach to create a Health and Safety Plan for your organisation/marae because it's not a one-person job.

You may find different people need to contribute at different times.



TIPS!

Use the framework and tools in a way that suits your organisational culture, structure and people.

Discussion

- You can work through the questions and collate your answers during regular staff or committee meetings.
- Brainstorm on a white-board or use a laptop and projector so responses can be drafted in real-time.
- Share responsibility for finding out additional information across several people and bring the information back to the next Health and Safety conversation.

Site Check

- As a group look at your marae/organisation with an objective eye. Just because something has always been done a certain way doesn't mean it is the safest way. Take a walk around, note risks and hazards, take photos, consult with regular users and use this information as the basis for your Health and Safety Plan.



PART A

A Health and Safety Framework

The Health and Safety Framework is a checklist you can use to either review your existing Health and Safety Plan or create a new one.

The Framework has nine (9) sections to work through.

After completing each section, you will have collected the information that will inform the approach, practices and overarching information, Health and Safety policy and procedures for your organisation/marae.

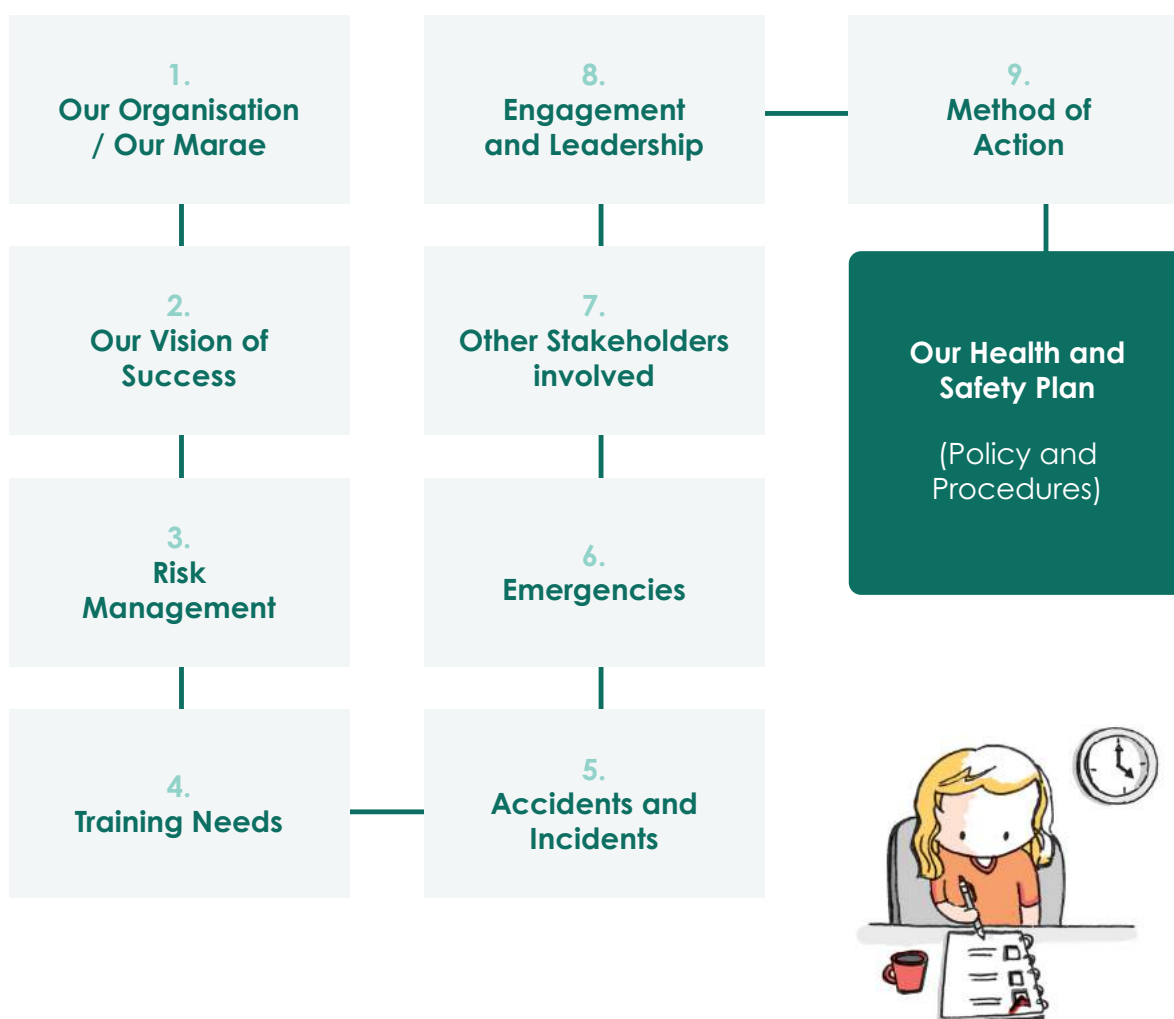


Figure 1: A Health and Safety Framework

Section 1

Our Organisation, Our Marae

This section will create the context for your Organisation or Marae. It will help determine if you are a PCBU' or a Volunteer Organisation, and the 'Duty' held by each person.

The responses in this section will also be used in later sections.

Your **founding document and strategic plan** will help with discussing this section.

When completed, you will have:

- A clear summary of the context of your organisation/marae
- A map layout (or picture diagram) of your organisation/marae

1.1 What is the legal name of your organisation/marae, and what does it do?

Note: List your legal name and 'trading name' if they are different.

1.2 What kind of organisation/marae is it?

E.g. voluntary group, charitable trust, incorporated society, club, Maaori reservation, land trust, company.

1.3 Is your organisation/marae run according to a constitution/rules, trust deed, charter, or some other founding document?

If 'Yes', does that document make any reference to Health and Safety?

1.4 What is the purpose and objectives of your organisation/marae?

1.5 What are the primary activities carried out by your organisation/marae?

1.6 Where are the activities carried out?

ACTIVITY: Draw a Map layout or picture diagram of your primary location(s) of activity.

E.g. Work building, office, marae grounds, marae buildings, worksite, yard, park, school, community hall, golf club, national park, and mention vehicle(s) & aircraft if relevant.

If practical, list all places that activities occur. At a minimum this should include all the main or common activities of your organisation/marae.

TIP!

A **'workplace'** is '... a place where a worker goes or is likely to be while at work, or where work is being, or is customarily, carried out.' (section 20 of HSWA).

1.7 What are the roles in your organisation/marae?

Make a list starting with the primary or key roles first. E.g. Team leader, tutor, co-ordinator, committee member, manager, chairperson, trustee, matua, whaea, kaumaatua, kuia, storeperson, kitchen worker, field worker, trainee, volunteers.

Identify all the people by name, role, and specify if they are paid or not. Start with a 'Staff/Volunteers List' if you already have one & create a diagram to show how the roles relate.

1.8 Who will lead Health and Safety in your organisation/marae?

Remember: it is not a one-person job (Refer to roles/persons identified in Q1.7.)

Note: If any purchasing is required for Health and Safety activities, at least one leader ought to have authority to do this.

1.9 Who else should be involved in completing the Toolbox?

Remember that the more perspectives included the more comprehensive your Health and Safety Plan will be.

1.10 Who do you serve? Who are your customers, clients, whaanau, community?

E.g. "People with disabilities in the greater Waikato", "Preschoolers in Mangakino",

1.11 Who are your other stakeholders?

E.g. Any individual or group that affects or is affected by your activities – Neighbours, clients, service users, volunteers, whaanau, kaumaatua, kuia, manuwhiri, visitors, members, funders, sponsors, government organisations, contractors, local council, key suppliers.

Refer to Section 7.1 (Other Stakeholders Involved.)

1.12 What is your responsibility as an organisation/marae?

(Go to the 'Are you a PCBU/Volunteer Association' diagram in Part C: Supporting Documents to work this out).

1.13 Based on the responsibility you have identified in the Q1.12 write your statement of commitment to Health and Safety.

"As a responsible organisation/marae we
(Choose the appropriate statement (A or B) for your marae/organisation.)

A. **(*'Volunteer Association'*)** will consider Health and Safety because we have a MORAL obligation, even if we have no legal obligation; or
B. **(*'PCBU'*)** will have a Health and Safety Plan because we have obligations under the Health and Safety at Work Act 2015 and we have a moral obligation to our volunteers and stakeholders".

Section 2

Our Vision of Success for Health and Safety

This section establishes your understanding of what success looks like for your marae/your organisation.

You'll identify key statutes, regulations and other contractual responsibilities that impact on your purpose and activities.

When completed, you will have:

- A Success Statement for Health and Safety
- A Statement of Commitment to Health and Safety
- Health and Safety Goals
- A list of relevant Statutes, Regulations and Contractual responsibilities

2.1 What is your vision or intention for keeping people healthy and safe while carrying out the activities of your marae/organisation? What would success look like? Your response will be your Success Statement for Health and Safety.

E.g.

- "Nobody gets hurt or harmed while doing work for us"
- "To protect our members from injury while on our premises"
- "To promote the health and wellbeing of our whaanau".

2.2 Do you already have a statement outlining the vision and aspirations of your marae/organisation?

E.g. A mission/purpose, vision, values, strategic plan, motto, policy.

- i) If 'yes', what is it?
- ii) Does it have any reference to wellbeing and safety?

2.3 If you answered no to Q2.2 above, write a Statement of Commitment to Health and Safety.

E.g.

- "To ensure that no gets injured on our club premises"
- "To reduce the chance of injury in our club to the lowest practical level and ensure that any injuries are dealt with as well as possible"
- "To provide our service in as safe and healthy a manner as possible".

2.4 In addition to the Statement of Commitment, determine one or more specific Health and Safety Goals. (If possible, create 'SMART' Goals, i.e. specific, measurable, achievable, realistic, timeframed.

E.g. "There are no injuries preparing hangi over the year.")

2.5 Make a List of Statutes and Regulations that govern the Health and Safety of your activities.

E.g. Vulnerable Children's Act; Building Code; Fire Safety Regulations; Health & Disability Services (Safety) Act, Food Act 2014.

2.6 Identify any agreements or contractual requirements that could impact on your Health and Safety plan.

E.g. contracts for service, funding, joint projects.

2.7 After completing all nine sections of the Framework come back and check if anything has arisen from the other sections that needs to be added to the Statement of Commitment or Health and Safety Goals.

Section 3

Risk Management for Health and Safety

This section will help your organisation/marae identify the potential Health and Safety risks and consider how to deal with them effectively.

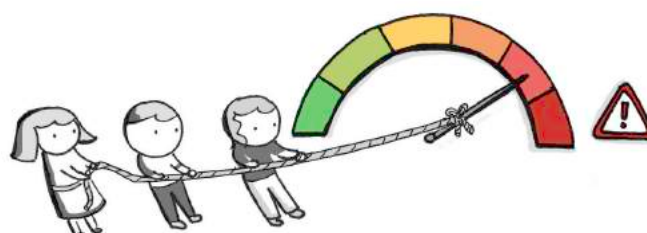
When completed, you will have:

- A benchmark statement for acceptable risk
- Determined a risk threshold for your organisation/marae
- A risk assessment tool
- A completed risk table

What is Risk?

Any situation, activity or action that involves exposure to danger, harm or loss.

The term Risk is used throughout the Toolbox to refer to a Health and Safety Risk.



A Risk Management Process

The following diagram outlines the starting point and the five (5) steps to follow to address the Health and Safety needs of your organisation/marae.



3.1 Appetite for Risk – what is it for your organisation/marae?

Not all risks are equal. Before you start identifying any risks, determine the amount of risk considered acceptable by your organisation/marae. This is known as your **Appetite for Risk** or **Risk Threshold** and is the starting point for managing risks.

3.2 Determining a Risk Threshold

The following questions will help you to identify your organisations appetite for risk.

SEVERITY OF RISK

Question 1 – At what level would a potential injury or illness be considered too high (or significant) to ignore?

This identifies the severity of risk you are willing to tolerate.

LIKELIHOOD OF RISK

Question 2 – How likely would a risk need to be before you would no longer ignore it?

This identifies the acceptable probability of a risk occurring.

Use your responses to Q1 and Q2 to write a **Benchmark Statement** about the acceptable level of risk for your organisation/marae and to determine the details of 'Severity' and 'Likelihood' of Risk'.

TIP!

Appetite for Risk – Is a standard that is set by your organisation/marae.

There are similar tools available that use different definitions or levels. Whatever tool you use it is necessary to establish a consistent way of assessing each risk that is identified.

ASSESSMENT OF RISK

Question 3 – What is the level or degree of Risk?

A **Risk Assessment** will give you a consistent way to think about each risk you identify and help you decide which risks need controls around them. The sample **Risk Assessment table** uses the definitions identified in the **Risk Threshold** example. You will use your **Risk Assessment table** in Step 4 of this Risk Management process. You will find this **Risk Assessment Tool** in Part B of this Toolkit.

The following table is an example benchmark statement with example descriptors of the scales of severity and likelihood. You will need to determine your own descriptors based on your answers to the questions above and write your own benchmark statement. You will find a blank Risk Threshold Table in Part B of this Toolbox.

Risk Threshold Table

<p>Benchmark Statement</p> <p>We will cease any activity that is identified as creating a risk that has both a likely probability and a serious consequence until appropriate measures are in place to eliminate the risk or reduce its severity or likelihood.</p> <p>Any risk identified as having at least a minor consequence and an unlikely or greater chance of occurring will have appropriate controls put in place.</p>	
<p>Severity of Risk – What severity of Harm/Consequence /Impact do we expect if this risk occurred?</p> <ul style="list-style-type: none"> Insignificant – no treatment required Minor (slightly harmful) – requires basic first aid Moderately harmful – requires medical attention and or time away from usual duties Serious – admission to hospital; potentially fatal. 	<p>Likelihood of Risk – How certain are we that this risk will occur?</p> <ul style="list-style-type: none"> Highly Unlikely – could not envisage the likelihood happening Unlikely – May have occurred before but not in several years Moderate – Has happened before but not recently Likely – Has happened recently

A Risk Assessment Tool

		Potential Severity of Harm			
		A. Insignificant	B. Minor	C. Moderately Harmful	D. Serious
Likelihood of harm occurring	1. Highly Unlikely	Below threshold	Below threshold	Below threshold	Below threshold
	2. Unlikely	Below threshold	Low 2B	Low 2C	Medium 2D
	3. Moderate	Below threshold	Low 3B	Medium 3C	High 3D
	4. Likely	Below threshold	Medium 4B	High 4C	Extreme 4D

You will find a copy of this Risk Assessment Tool in Part B: Templates and Tools

Identify Risks

Identify the risks people involved with your organisation/marae are exposed to and record these in a **Risk Table**. There is a Risk Table template in Part B of this Toolbox that you may choose to use.

You might decide to ignore the risks deemed as **below the threshold** described in your Benchmark Statement.

It is important to analyse your risks both before and after controls are in place. This will assist you to determine how effective your controls are. Identify any risks that are obvious and the ones that may be beyond your control.

Risk Table

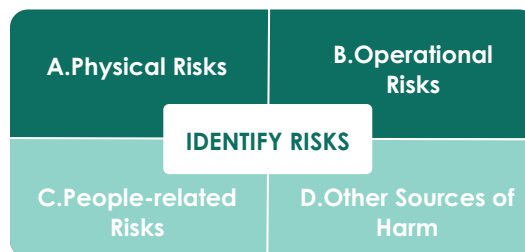
No.	1. Identify	2. Analyse	3. Treatment	4. Assess			5. Action
	Risk	Harm	Controls	Likelihood	Severity	Risk rating	Who's responsible When
				Before Control			
				After Control			

TIP!

Remember to consider harm that may occur or affect the health of people over a long period of time i.e cumulative impacts e.g. repeatedly working long hours over an extended period of time.



To make the task of identifying risks easier, use these four categories



A. PHYSICAL RISKS

What is the injury going to be? Physical damage, or an illness, or a cumulative impact?

Walk around the inside and outside of your primary place(s) of activity and document things that could cause **harm**. People in different roles will see things from another perspective so include a range of people in this activity.

1. List key physical **items** that could cause harm or injury.
2. Describe what would cause the injury (what could go wrong? how, when, why?).
3. Describe the injury or harm.

You may identify the same risk more than once.

Things to consider when looking for Physical Risks:

- Air – poor ventilation, poor temperature regulation, dust, fumes, smell.
- Light – too bright, too dull, glare, reflection, strobe.
- Unsafe arrangement – stored poorly, stacked incorrectly, clutter around work stations, areas too cramped to work in, things poorly positioned (i.e. impeding access to work spaces or walkways).
- Stairs, verandas, decks, and bannisters, lifts.
- Traffic, access ways, driveways.
- Food safety.
- Machines, buildings, sheds, out-buildings, equipment (E.g. equipment that could be dangerous, poorly designed, faulty or damaged). Consider listing all major pieces of equipment.
- Moving and/or unguarded equipment that people could put a body part in such as a hand, foot, or hair.
- Is a surface or part of equipment dangerous because it is rough, slippery, slimy, uneven surface, sharp, weak, unstable, badly made, broken or rotten?
- The physical state of objects and surfaces (E.g. weakened, damaged or rotten).

Hazardous material – Chemicals, poisonous plants, sprays, cleaner, biological agents, infectious material, asbestos, drug residue.

B. OPERATIONAL RISKS

Operational risks are **doing** risks, or the risks associated with activities. Ensure you include activities in all the places where you operate or activities happen. One way to do this is to imagine a typical day or event at your workplace, marae or area of operation.

In **Section 1 Q1.5** you identified the **Primary Activities** of your organisation/marae. For each of those activities consider the risks that may arise.

When looking for Operational Risks, consider:

- Driving and traveling.
- Sitting for long periods of time.
- Lifting and carrying (items and people), manual handling.
- Exposure to the weather (risks of getting sick, hyperthermia).
- Working in isolation, or, working in a shared environment.
- Using equipment.
- Chemicals, mixing substances.
- Working long hours.

C. PEOPLE-RELATED RISKS

When looking at People-related Risks, consider:

- Characteristics of people.
- (E.g. children, aged/old people, people with specific disabilities or challenges, mobility, people with cognitive impairment).
- People under the influence of alcohol or drugs.
- People for whom English is not a first language.
- People under stress, or distraught, or in an argumentative state, or being threatening.
- People becoming violent, who harass or bully.
- Unknown people or strangers to the workplace, members of the public.

D. SOURCES OF HARM FROM ELSEWHERE

When looking for Sources of Harm from elsewhere, consider:

- Other people working.
- Animals, dogs, pests.
- Environmental risks.

3.3 Analyse the Risks

For each of the risks that you have identified write down all the ways that people could come to harm

e.g. If the source of harm is a lawnmower, you could be cut by the blade, burnt by the engine, inhale fumes, suffer skin irritation from fuel, harm to hearing from noise exposure or a stone could flick up.

3.4 Controls for Risks

The control or treatment of a risk is the action taken to reduce the risk of illness or injury.

For each risk in the **Risk Table**, consider what controls are or should be in place.

Consider what you are already doing to control the risk. Is there more you should do?

- i) **Is excluding or removing something** from your area of operation/activity the best way to eliminate the risk? e.g. prohibit or restrict access to an area.
- ii) **Is training or experience** one of the ways that the risk is or could be controlled? e.g. only people with the relevant unit standard are allowed to use the chainsaw.
- iii) Would **protective equipment or clothing** be an effective way to control the risk? e.g. the carpark attendant will wear a hi-vis vest.
- iv) Are there any **physical barriers**, such as guards or fences that control or could control the risk? e.g. put a fence around children's playground.
- v) Consider whether signs or safety information will help control or could control the risk. e.g. Put a pictorial set of instructions by the dishwasher.

The **Hierarchy of Controls diagram**, in Part B of this Toolbox, may help you think about this.

When contractors enter your workplace or area of activity ask them for information about the risks their activities bring.

Ensure that the general public are considered and included. In many instances they may be treated in a way similar to the **people-related risks** category.

TIP!

Don't assume that common-sense alone will protect people from harm.

3.5 Assess the Risks

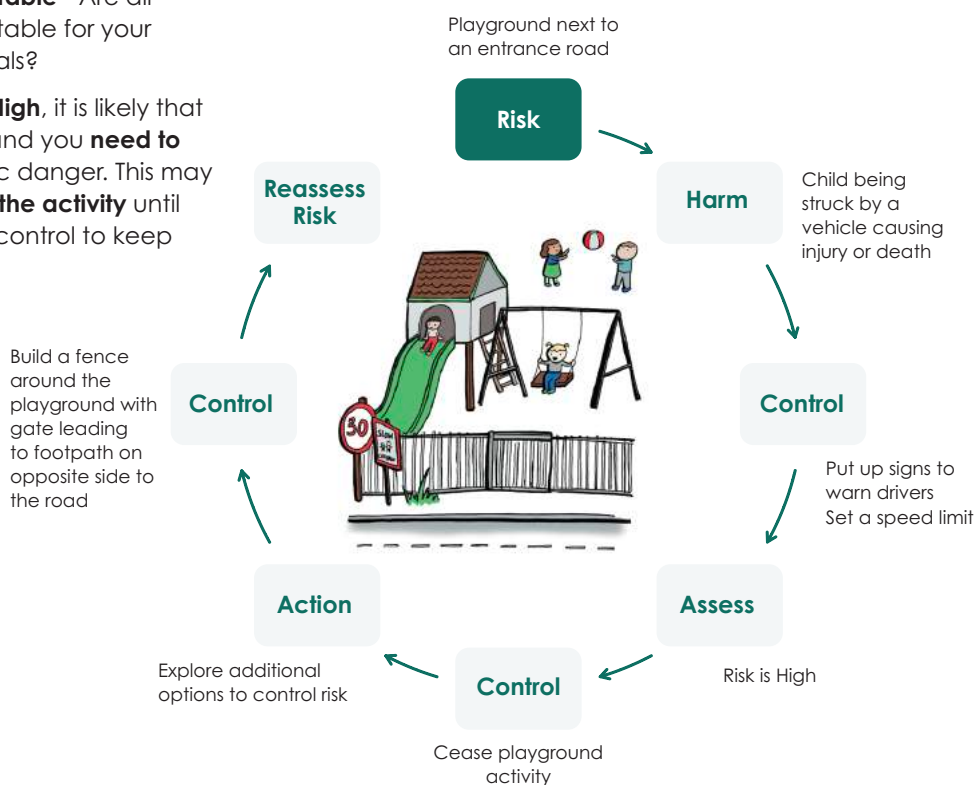
Use your Risk Assessment Tool to assign a level to each risk you have recorded on your risk table.

Risk Assessment Tool		Potential Severity of Harm			
		A. Insignificant	B. Minor	C. Moderately Harmful	D. Serious
Likelihood of harm occurring	1. Highly Unlikely	Below threshold	Below threshold	Below threshold	Below threshold
	2. Unlikely	Below threshold	Low 2B	Low 2C	Medium 2D
	3. Moderate	Below threshold	Low 3B	Medium 3C	High 3D
	4. Likely	Below threshold	Medium 4B	High 4C	Extreme 4D

Each risk should now have a value of High, Medium or Low.

Go back and review your **Risk Table** - Are all the risks acceptable or comfortable for your organisation/marae and its goals?

If any of the risks are assessed **High**, it is likely that your controls are inadequate and you **need to do more** to reduce that specific danger. This may mean that you need to **cease the activity** until you have developed a better control to keep people safe. e.g



3.6 Action

To ensure necessary actions are taken:

- i) Assign a person (or a role) responsibility to ensure the controls are in place. e.g. assign the responsibility for putting up temporary fencing around the playground to the caretaker (Record the name of the caretaker).
- ii) If this action needs to take place at or by a certain time, note those requirements. e.g. the fence around the playground needs to be in place at the beginning of the day of the Christmas party.
- iii) Review the Risk Table regularly. Be particularly careful to review it if anything changes, such as a new activity taking place, a change of venue, or change of personnel.



CHECK POINT

Go back to section 2 and consider if you want to mention the **most significant risks** identified in either your **Statement of Commitment** or in your **Health and Safety Goals**.

Section 4

Training

This section helps identify the training needs of your marae/organisation.

When completed, you will have:

- An overview of your training needs
- A completed training plan

4.1 Assess Training Needs

Refer to the activities identified in the start **Primary Activities List** on page 10 Q1.5:

Break down each activity into the **individual tasks**.

For each **individual task** identify the skills and knowledge needed to complete that task. This exercise might lead to you identifying more items to add to the **Primary Activities List**.

Record the **tasks** that would **require** some form of training or instruction to be completed in a safe and healthy way.

You may choose to use the **Health and Safety Training Needs Assessment** template in Part B of this Toolbox for assessing training needs.

4.2 Revisit the Risk Table

Add any other training identified in the control column of your completed risk table to your training needs assessment.

4.3 Decide on standard of Training or Instruction

- For each task on the **List of Tasks** consider whether there is any **standard of training** required or available. e.g. for driving a car, the standard is a NZ Driver License.
- If there is a standard, consider if it is sufficient for your specific circumstances or whether you need to provide additional training.
e.g. For driving a car with a wheelchair hoist you would expect the person to have a NZ driver's license but they would also require

additional training in-house to operate the hoist and interact with the person using the wheelchair.

- For some tasks there will be no formal standard of training available, so you will need to create your own.
e.g. For cleaning a lawnmower, there is no standard of training readily (or practically) available, so a marae/organisation would have to develop its own.

4.4 Formulate required in-house Training or Instruction

- Decide how you are going to teach each of the tasks and make sure it is documented for future reference.
- For a straightforward task, you might put a **set of instructions** with the equipment, or, use a photograph or diagram showing what to do.
- Add **Date Prepared** and **Review Date** to your instructions to keep documents up-to-date.

TIP!

Note: that this record of **Training or Instruction** is no substitute for the actual experience of undertaking the training. Don't expect that reading a training document is enough for a person to understand how to safely undertake a task.

Task Training/Instruction

Below is an example process for a trainer to carry out in-house training.



Repeat steps 3 and 4 until the trainer/instructor is satisfied that the person can carry out the task competently and confidently.

It is important that training is customised to suit your marae/organisation.

There is a **Health and Safety Task Analysis and Training Guide** template in Part B of this Toolbox that you may choose to use.

4.5 A Training Register

A Training Register is a record of all training required for people involved in your organisation or marae.

Your record should include the date each training was completed and the date that a review/ refresher is required.

When you are preparing your training register, make sure to refer back to the Health and Safety training needs assessment to ensure you have included all of the training that each person/role needs to undertake.

Your training register can also be used to record who is authorized to undertake specific tasks.

There is an example **Annual Training Register** included in Part B of this Toolbox.

TIP!

When setting a timetable to review or refresh training, consider what time of year is most appropriate for each task and how often it makes sense to revisit the topic. Once a year? At the change of every season?

TIPS!

1. Be wary of picking up 'off the shelf' task descriptions because they may be different to how your organisation/marae does things.
2. You need to keep a record of the safety training that happens at your organisation/marae.
3. New people should be trained in a consistent manner so that they know what steps to take to keep themselves and others safe!



Section 5

Accidents and Incidents

This section will help identify and prepare for accidents and incidents at your organisation/marae.

When completed, you will have:

- Information to create an Accident and Incident Management System

It is important to be clear and consistent about the way your organisation/marae will respond to an accident or incident. People need to understand and be confident with the organisations procedures and what they need to do when an event occurs.

5.1 Defining 'accidents' and 'incidents' and when you should report them

An **accident** is a circumstance where an injury or illness has been caused directly by something that has happened during your activities.

An **incident** is a circumstance where no injury or illness has occurred but the event could have caused a serious injury or illness. Previously this has been called a near miss.

If you are a PCBU you owe duties under the Health and Safety at Work Act. This means you must report any notifiable events to WorkSafe New Zealand (see section 25 of the HSWA 2015 for the definition of notifiable even

Set an expectation regarding which **accidents** will be reported. Your **Vision for Success** from Section 2 Q2.1 will assist you to do this. Also decide what kinds of **accidents** will need to be reviewed and discussed in-house. e.g.

- All accidents that require First Aid treatment or
- All accidents that resulted in an absence

from work or

- All accidents that require a doctor's visit.

Set an expectation regarding the types of incidents you want reported and reviewed.

One way you could do this would be to set your criteria in line with the way you defined your reportable accidents. e.g. any incident that in similar circumstances would have resulted in an accident of the kind you identified above.

- Any incident that in similar circumstances would require First Aid treatment or
- Any incident that in similar circumstances would result in an absence from work or
- Any incident that in similar circumstances would result in a doctor's visit.

5.2 Preparation for an accident

To determine how your organisation/marae will prepare for an accident, involve as many interested parties as possible.

Identify a typical accident scenario relevant to your organisation/marae and its activities.

Discuss what you would do, and use this scenario to formulate a procedure that can be followed for any accident.

In doing this, you will identify what you need to do ahead of time, and things you need to have on hand to be prepared.

This may mean you need to purchase some resources or equipment.

Think about your current situation: Do you have a first aider? Who is in charge? Who do you see if an accident happens?

A potential procedure may be:

In case of an accident:

- i) Make the scene safe (keep yourself safe)
- ii) Give help (First Aiders)
- iii) Call emergency services (111)
- iv) Provide this following information
 - Our address
 - Our nearest cross road
 - GPS location (or dairy number)
 - Our contact number
 - Our contact person

v) Inform others in our organisation (contact details of key person/people).

5.3 Reporting

You will need to develop a reporting process for your organisation/marae.

This process will assist to gather the information you need from any accident to adequately understand what happened and make changes to minimise or eliminate the risk of a similar event occurring in the future. It will also assist you to meet your moral and legal obligations.

In doing this, you will identify what you need to do ahead of time, and things you need to have on hand to be prepared.

Any accidents/incidents need to be reported to your organisation/marae as quickly as possible - preferably within the day or at most within the week.

The example Accident and Incident Report template in Part B of this Toolbox may assist you to think about what information you want to have reported.

Some accidents/incidents need to be reported to WorkSafe. To determine when to do so, see the WorkSafe website www.worksafe.govt.nz/notify-worksafe or phone on **0800-030-040** (24/7).

Assign a person or position to be responsible for reporting to WorkSafe and record that person/position in your Health and Safety documentation.

TIP!

Regularly refer to WorkSafe to ensure that you have the most current, up-to-date information.

5.4 Investigation

The purpose of investigating accidents/incidents is to try and prevent the same thing happening again.

In your accident/incident procedures you will need to identify who will investigate accidents/incidents. Identify **named roles** that will be responsible for this task.

Determine time-frames for accidents/incidents to be investigated. Try to ensure this is practical but not too long after an event.

Any accident/incident investigation needs to be documented and should consider:

1. What directly caused the accident/incident? (E.g. hot surface, sharp edge, fall from height).
2. Is the cause of the accident/incident on your Risk Table? (see Section 3).
3. How much worse could the accident/incident have been?
4. What could you have done differently that would have prevented the accident/incident?
5. What actions do you need to carry out to prevent this accident/incident occurring again? (This may include adding the cause to your Risk Table and providing a control).

There is an example **Accident and Incident Investigation Report** template in Part B of this Toolbox that may assist you.

At the completion of the investigation assign someone responsibility to ensure action is carried out. Set a time-frame for when this should be completed.

5.4 Review

Ensure your organisation/marae has a review process for your accidents/incidents procedures. The review process has two purposes:

- Firstly, to review events and your response to them to ensure that what you are doing is appropriate and effective.
- Secondly, to capture longitudinal data to help you to identify any trends and patterns over time.

Ensure you retain all accident/incident documentation for future reference.

Section 6

Emergencies

This section will help identify the sorts of emergencies your organisation could encounter. It will also identify the procedures needed in case emergencies occur.

When completed, you will have:

- The information needed to create an Emergency Plan

An Emergency Plan should include all potential emergencies, consequences, required actions, written procedures and the resources available.

6.1 Identify Emergencies

Identify what kinds of emergencies your marae/ organisation could face. Some potential emergencies to consider:

- Serious vehicle accident
- Armed attack or robbery
- Other incidents of violence
- Health or medical emergency
- Infectious disease outbreak
- Fire
- Flood
- Earthquake
- Tsunami
- Volcanic eruption
- Destructive storm
- Avalanche/mudslide
- Hazardous substance spill

Only consider the emergencies that are likely to happen e.g. you might operate in an area that has no volcanic activity and is far from the coast so there is no need to consider volcanic eruptions or tsunamis.

When identifying emergencies make note of potential consequences.

6.2 Emergency Procedures

Document the steps you would take to safely deal with each circumstance.

For some emergencies you may want to adopt the recommended civil defence procedures or use them as the starting point for developing your own. Refer to **www.civildefence.govt.nz**.

For emergencies that are entirely in-house or specific to your situation (e.g. hazardous substance spill) you will need to document your own procedures. You might use a procedure similar to one for an accident.

For online resources to assist you in emergency planning, please see;

**www.hazardoussubstances.govt.nz,
www.poisons.co.nz, and
www.aedlocations.co.nz.**

You will need a procedure for each emergency that your organisation or marae could expect. This should include the resources required.

TIP!

Refer to inside covers of White/Yellow Pages phone book for Emergency Procedures.

6.3 Practice Drills

Carry out regular practice for the emergencies that are most likely to occur. Practice drills help ensure everyone is confident and competent and can also expose any shortcomings in your procedures. When practicing procedures, be sure to consider emergencies that are related to the behaviour of people as well as environmental situations.

Keep a record of all drills and who was involved. This will also form part of your training record. (Refer to section 4).

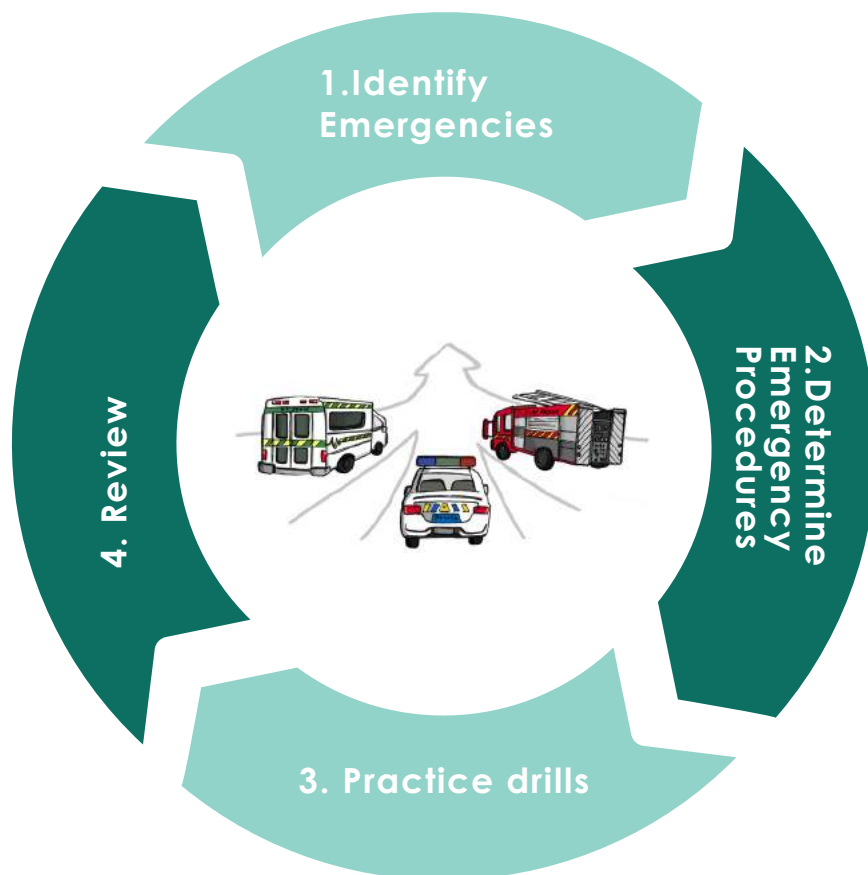
Make sure that your procedures are available to anyone who may use your facilities or areas of activity.

6.4 Review

Regularly review your Emergency Plan. If an emergency situation has occurred you may need to review it more immediately than planned.

- Review your emergency procedures to ensure they are still appropriate and amend as necessary.
- Review procedures individually to ensure that the safety actions are still appropriate, people are still capable and training is up-to-date.

A review will indicate whether what you're doing is working or highlight issues that require your attention.



Section 7

Other Stakeholders Involved

This section will help identify the Health and Safety considerations related to other people or stakeholders in your area of activity.

When completed you will have:

- A list of other stakeholders in your area of activity
- Information to provide to other stakeholders in your area of activity relating to their Health and Safety

7.1 Other Stakeholders Involved

CHECK POINT

Refer to your answers in **section 1 Q1.11** regarding the people from outside your organisation/marae that operate in your area of activity or workplace, to compile your **List of Other Stakeholders**.

The list could include:

- Visitors
- Tradespeople
- Volunteers or paid people from other organisations
- Your clients support people
- Contractors
- Your clients/service users/customers
- Members of the public

Divide the **List of Other Stakeholders** into two groups:

1. People you **would expect** would have their own Health and Safety Plan.
2. People you **would not expect** to have their own Health and Safety Plan.

If you have an arrangement with any organisations where you are paying them to provide a service, you would be considered a PCBU under the Act and therefore your marae/organisation will have added responsibilities and duties.

7.2 Information for other Stakeholders

Your organisation/marae will need to supply information to anyone that operates in your workplace/area of activity.

This includes:

- Who they should report to (including reporting accidents and risks/hazards)
- Information about hazards and risks arising from your activities (Refer to Risk Table and map)
- Information about facilities available (toilet, exits)
- Information about safety equipment (First Aid kit, fire extinguisher)
- Your Emergency and Evacuation procedure.

This information needs to be supplied to everyone that operates in your area of activity.

7.3 Information from other Stakeholders

Individuals and groups that should have their own Health and Safety Plan will need to supply you with the relevant details, including:

- Contact details
- Information about hazards and risks arising from their activities
- Information about their safety equipment
- Their Emergency and Evacuation procedures
- Their Health and Safety policy
- Details of their Health and Safety programme.

Retain a copy of the Health and Safety documentation provided to you by other stakeholders for at least the duration of their presence on your site.

At a minimum collect the contact details for all stakeholders who enter your premises.

7.4 Review the List of Other Stakeholders

After you have had contractors on your premises or other parties such as independent groups using your facilities, it can be helpful to review how well Health and Safety considerations were managed.

Also complete a regular Health and Safety performance review for all stakeholders who should have their own Health and Safety programme. If you are acting as the PCBU for any of the organisations or individuals on your list it is advisable to do this.

This will show whether the way you manage other individuals or groups on site is working and may highlight any larger issues requiring your attention.

See Part B of this Toolbox for an example of an **Other Stakeholders Health and Safety Review form**.

CHECK POINT

Refer back to **Section 1**



Section 8

Engagement and Leadership

This section is focused on helping you identify the leaders of Health and Safety in your organisation /marae. You will also consider how you will engage others in the Health and Safety process.

When completed, you will have:

- Identified your leaders
- A plan to engage other people in the Health and Safety process

The Health and Safety process is continuous. In order to maintain the engagement of people you will need to identify leaders of the Health and Safety process for the future. Ideally this is a group responsibility rather than a one person role.

When identifying your group of leaders consider;

- Looking beyond the management team and consider others in your team and people from your identified stakeholders list (Section 1) to identify who might be most suitable.
- The practicalities of bringing individuals together, e.g. time, cost, travel and other commitments.
- The collective skills, knowledge and experience in the group.
- Reflecting the various interests, perspectives and activities of your marae/organisation.

Once you have established your group identify the best person or position to lead this group. Make sure that you document the name and position of the leader(s).

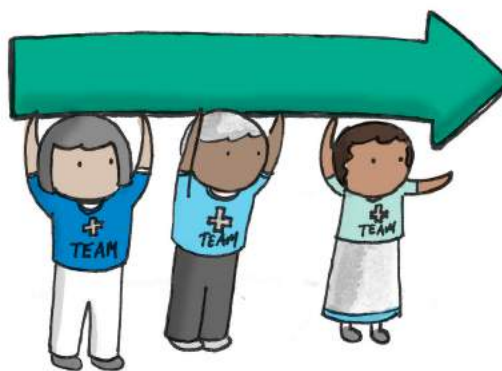
The role of the group (your Health and Safety Team) is to review and update the Health and Safety system on an ongoing basis.

A process should be developed to ensure that the Health and Safety leadership team are connecting with other people in your organisation/marae.

The purpose of this connection is to keep everyone informed and up-to-date with the Health and Safety system. This also creates an opportunity for others in the organisation/marae to contribute to its on-going development.

Some of the ways this could happen include:

- Health and Safety conversations as part of regular team meetings.
- Discussing various Health and Safety scenarios.
- Building in a debrief/discussion component to emergency practices.



Section 9

A Method of Action

This section will assist you to create a method of action to ensure the Health and Safety Plan and its system are implemented and reviewed regularly.

When completed, you will have:

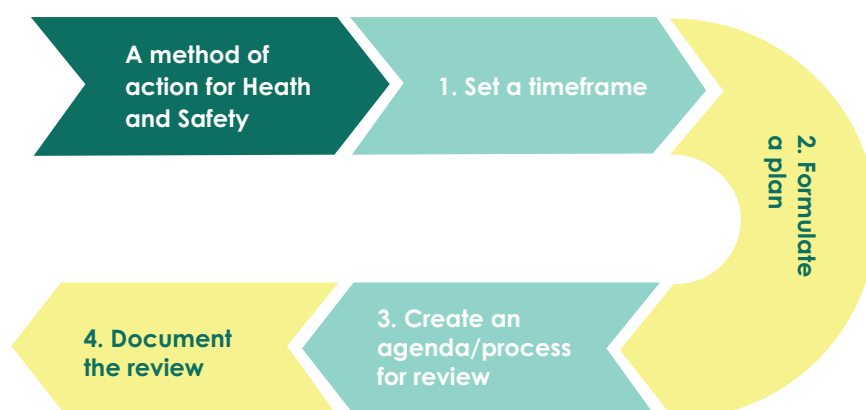
- A method of action for your Health and Safety Plan

Health and Safety is an ongoing concern, your organisation or marae needs a way to ensure that everything is working and up-to-date. We have called this a method of action.

It is important to review your Health and Safety Plan regularly:

- To ensure that it is working properly
- To ensure it meets current standards and expectations
- To change it if the organisation/marae purpose, structure or activity have changed
- Because a good Health and Safety Plan works towards continual improvement
- To take lessons from what has gone wrong to improve future practices.

The following is an example method of action.



9.1 Set a timeframe

Determine a practical time-frame for reviewing the Health and Safety Plan. When doing this, remember:

- To refer to your Health and Safety statement of commitment (in section 2).
- The importance of making improvements quickly.
- Unaddressed issues also need to be addressed quickly.

9.2 Formulate a Plan

Decide a format for reviewing the Health and Safety Plan that works for your organisation/ marae.

It could be:

- A meeting
- A workshop
- A series of questionnaires or a survey, or
- Engaging an external person to facilitate.

It may be more practical to do this as part of an existing meeting or other process.

9.3 Agenda or Process for the Review

The agenda or process for reviewing your Health and Safety Plan should include all the elements discussed in this Toolbox. You can use the framework like a checklist for your review.

1. Use the information you generated when last working through the tool box.
2. Identify the people you expect to participate in the review.
3. Revisit the answers in your completed Toolbox.
 - Is the answer still appropriate?
 - Does it still suit your marae/ organisation?
 - Have your processes been effective?
4. Review your Health and Safety goals (section 2).
 - Have these goals been achieved? If not, why not?
 - Set goals for the next period.
5. Ensure that a detailed review of your risk register is carried out (section 3).
 - Add any new/ additional risks to the register.
 - Remove any risks that no longer apply.
 - Ensure that the controls still apply and are effective.
 - Review the risk assessment and rating.

6. Review accident and incident information and ensure that actions have been carried out as described (section 5).
 - Review actions to determine appropriateness and effectiveness.
 - Make any changes needed including training.

Make sure that all actions identified have a time frame and are assigned to a specific role.

9.4 Document the Review

Keep detailed records of your review outlining the process and all decisions made.

Also record when actions have been completed.

CHECK POINT

You may want to include any major observations or changes you have made as a result of the review in your **Statement of Commitment** or your **Health and Safety Goals** (section 2).

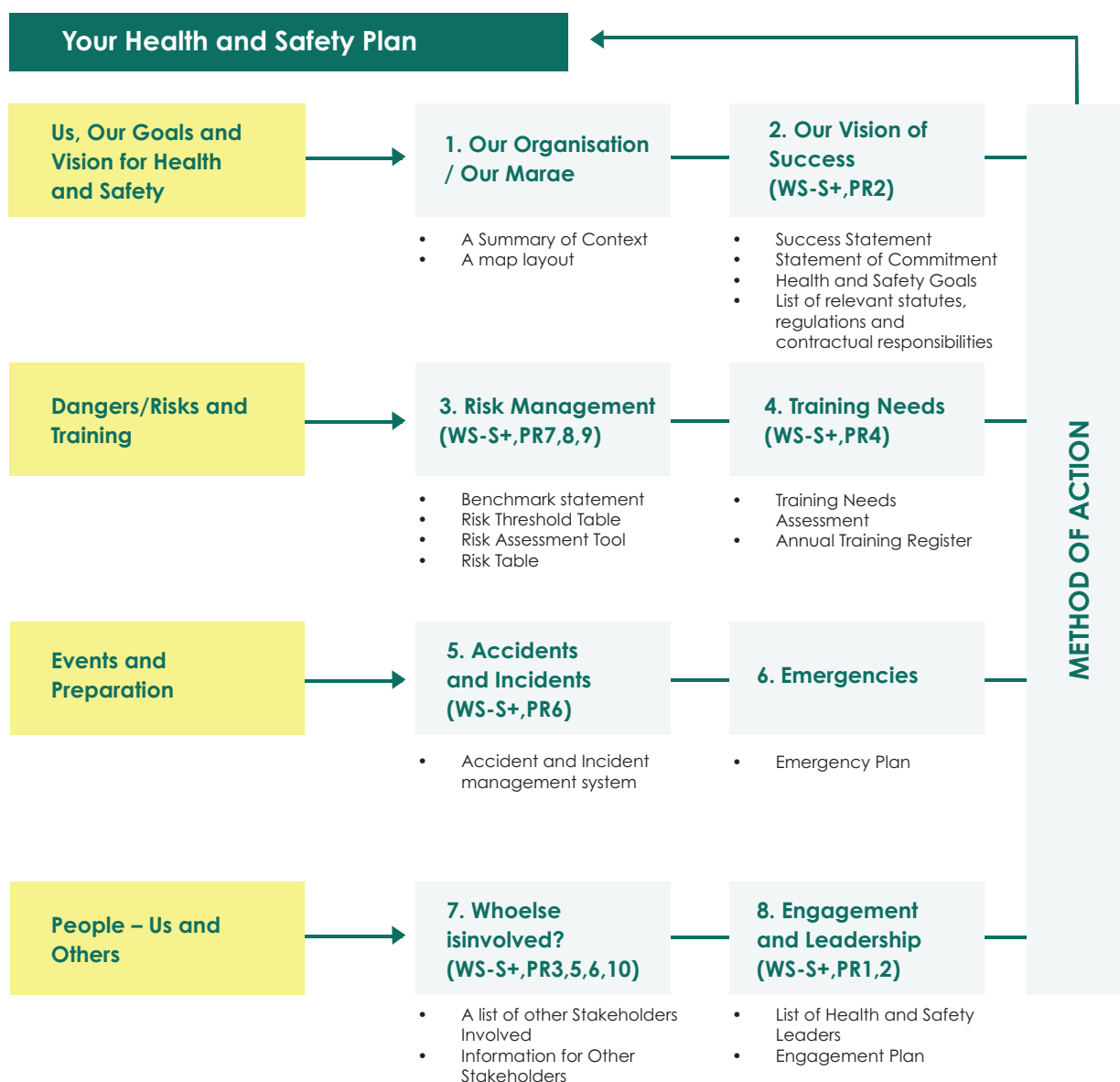


Plan

Your Health & Safety Plan

When you have collated the information from all nine sections of the Toolbox you will be ready to create your Health and Safety Plan.

You have reached the end of the Toolbox and now have necessary information to create a Health and Safety Plan for your organisation/marae. The diagram below outlines the structure and content of your Health and Safety Plan. It includes (in brackets) the Performance Requirements identified by WorkSafe NZ Safe Plus that are being met in each section of your Health and Safety Plan.



SafePlus is a new, voluntary, Health and Safety performance improvement toolkit for businesses. It defines what good Health and Safety looks like above minimum legal compliance. Reference to the performance indicators outlined in this programme have been included in the above diagram.

WorkSafeNZ SafePlus Performance Requirement = WS-S+, PR 3



PART B

Templates and Tools

The templates and tools in this section are included as examples to assist your organisation/marae to move through the Health and Safety process. You may want to use them as a starting point to develop templates or tools that are more specific to your organisation. Electronic versions of some of these templates and tools are available on the Community Waikato website.

The Health and Safety Toolbox Process

Sample Health and Safety Policy

(The Organisation/Marae) believes that people are our priority and all employees, volunteers and visitors should be safeguarded in respect to their health, safety and welfare while in our place of (work/activity). We believe we all share in the responsibility to maintain a healthy and safe environment. Our commitment is to ensure that all people are informed and equipped to be safe and healthy in our environment.

(The Organisation/Marae) has developed a Health and Safety Plan to meet our legal responsibilities (under the Health and Safety at Work Act 2015), to honour our moral commitment to our stakeholders and to create a culture of safety beyond our legal duties. Our Health and Safety Plan provides a guide to our practices to ensure the health, safety and wellbeing of everyone who is present in our places of (work/activity).

The key components of our Health and Safety Plan are:

- A summary of the context of our organisation including all the environments we operate in and the activities that take place there
- A vision for success and statement of commitment to Health and Safety including our (Organisations'/Marae's) Health and Safety goals
- A list of the relevant statutes and regulations affecting our organisation
- A process for identifying our Health and Safety risks and determining how to manage these effectively
- Identification of the training required for staff and stakeholders and how this is managed
- Our Accident and Incident management system
- Our Emergency Plan
- A process for the identification of Health and Safety considerations related to other stakeholders
- A plan for the engagement of people in our Health and Safety process
- A method of action to ensure that our Health and Safety system is a living and evolving process

All aspects of our Health and Safety system will be reviewed annually and/or updated as required.

Ratified date:

Signed:

Review Date:



Section 3: Risk Management for Health and Safety

Risk Threshold Table

Benchmark Statement

Severity of Risk

Insignificant

Minor

Moderately harmful

Serious

Likelihood of Risk

Highly unlikely

Unlikely

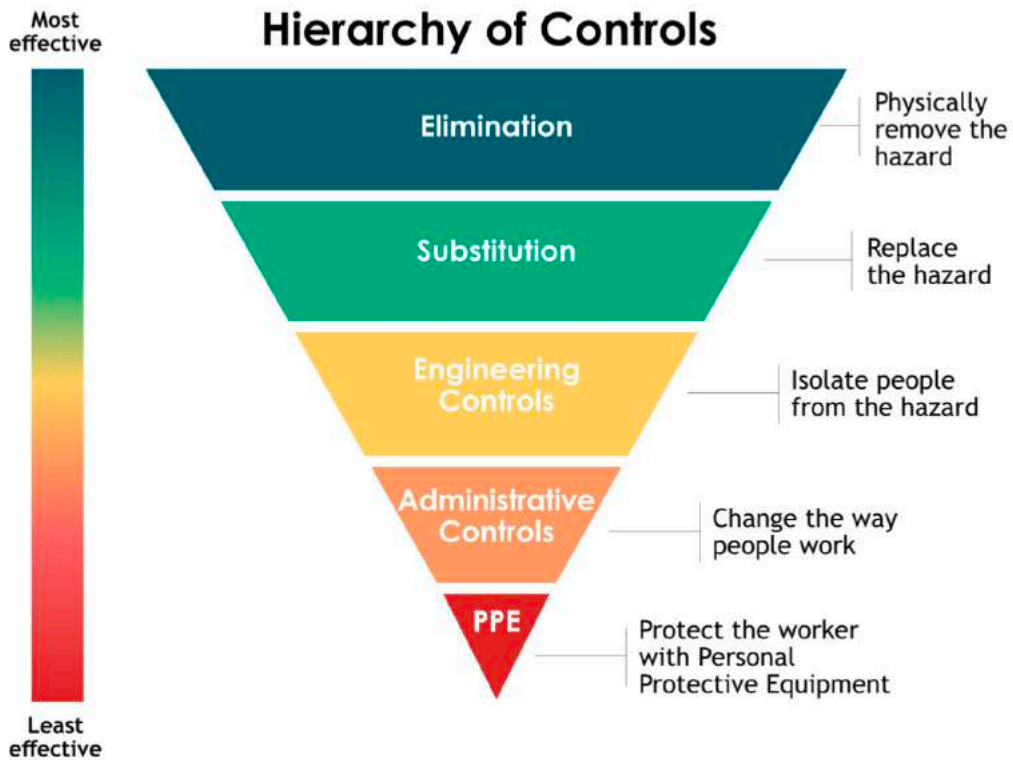
Moderate

Likely

Risk Assessment Tool

		Potential Severity of Harm			
		A. Insignificant	B. Minor	C. Moderately Harmful	D. Serious
Likelihood of harm occurring	1. Highly Unlikely	Below threshold	Below threshold	Below threshold	Below threshold
	2. Unlikely	Below threshold	Low 2B	Low 2C	Medium 2D
	3. Moderate	Below threshold	Low 3B	Medium 3C	High 3D
	4. Likely	Below threshold	Medium 4B	High 4C	Extreme 4D

Hierarchy of Controls





Name of Organisation/Marae:

Date:

Risk Table

No.	1. Identify		2. Analyse		3. Treatment	4. Assess				5. Action		
	Risk	Harm			Controls		Likelihood	Severity	Risk rating	Who's responsible	When	
						Before Control						
						After Control						
						Before Control						
						After Control						
						Before Control						
						After Control						

Review Date:

Section 4: Training

Name of Organisation/Marae:

Date:

Health and Safety Training Needs Assessment					
Primary Activities	Individual Tasks	Required Skills and Knowledge	Training or Instruction	Who needs to complete this Training (Roles/Names)	Review frequency/Date

Review Date:

Name of Organisation/Marae:

Date:

Health and Safety Task Analysis and Training Guide (For In-house Training)

Task Description:
(What is the task?)

Preparation:
(What needs to happen before the task is completed?)

- **Equipment:** (What equipment and safety gear do you need?)
- **People:** (Who needs to be there? Who needs to not be there?)
- **Environment?** (What needs to happen in the environment before the task is completed?)

Task Steps:

- 1.
- 2.
- 3.
- 4.
- 5.
- 6.

(continue to add steps until completed task is outlined)

Task Completion:

1 Explain Task

2 Demonstrate Task

3 Do Task together

Date: _____

Date: _____

Date: _____

4 Learner does Task on their own

5 Learner is confident to do Task alone

Date: _____

Date: _____

Trainer Name:

Signature:

Date:

Learner Name:

Signature:

Date:

Review Date:

Section 5: Accidents and Incidents

Name of Organisation/Marae:

Date:

Accident and Incident Report

Incident or Accident

Date:

(of the incident or accident)

Time:

(of the incident or accident)

Location:

(of the incident or accident)

Details:

(What happened?)

Include all relevant information – what was happening prior, the cause of the accident/incident and all other details of the event

Who was involved?

What injuries occurred and to whom?

What first aid or other medical attention was required?

Who was this reported to?

When was it reported?

(Date and time)

Name:

Signature:

Date:

Review Date:

Name of Organisation/Marae:

Date:

Accident and Incident Investigation Report

Who is investigating?

Date and time of investigation:

Date and time of event:

(incident or Accident)

Was the event reported within the required timeframe?

 Yes No

If not, why not?

What directly caused the accident/incident?

Is the cause of the accident or incident identified on our risk table?

 Yes No

How much worse could the incident or accident have been?

What could have been done differently to potentially prevent the accident/incident?

What preventative actions should be taken to minimise the risk of reoccurrence?

By whom?

When?

Risk documentation reviewed and updated?

 Yes No

By whom?

When?

Name:

Position:

Signature:

Date:

Review Date:

Section 7: Other Stakeholders Involved

Name of Organisation/Marae:

Date:

**Other Stakeholders
Health and Safety Review**

Name of Party:

Nature of Engagement:

Did the stakeholder;

- 1. Have their own Health and Safety Plan and supply it to you? Yes No NA
Notes if applicable

- 2. Comply with any industry standards? Yes No NA
Notes if applicable

- 3. Have appropriately skilled and behaved staff/people? Yes No NA
Notes if applicable

- 4. Take practical steps to make the workplace safe? Yes No NA
Notes if applicable

- 5. Use appropriate protection/equipment? Yes No NA
Notes if applicable

- 6. Advise you immediately of any accident or safety incident? Yes No NA
Notes if applicable

- 7. Do a good high quality job? Yes No NA
Notes if applicable

- 8. Would you engage with them again? Yes No NA
Notes if applicable

Any remedial actions?

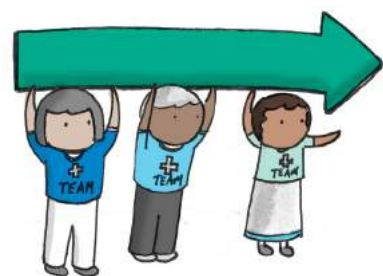
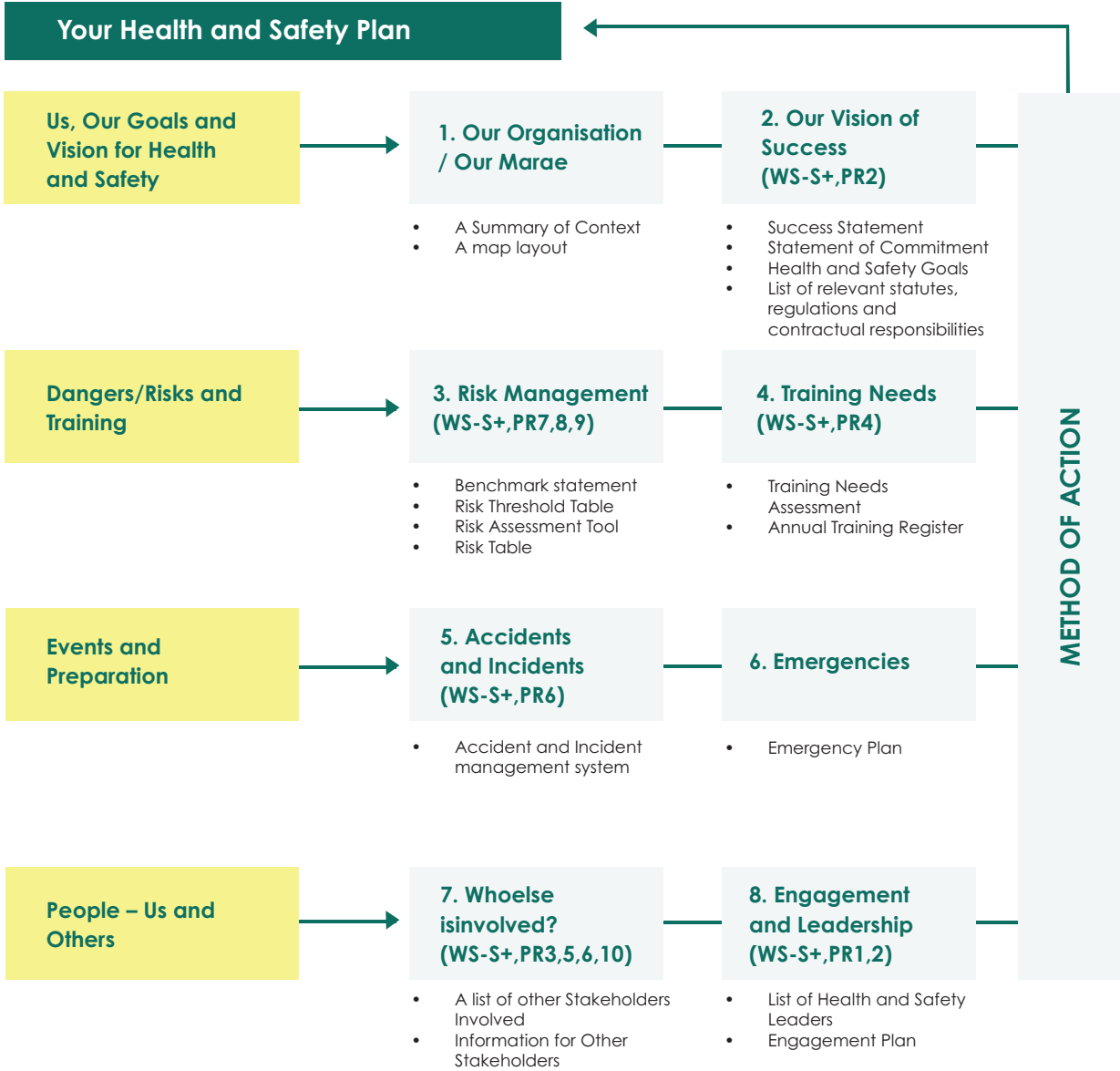
Name:

Signed:

Date:

Review Date:

Your Health and Safety Plan





 PART C

Supporting Information

Are you a PCBU or a Volunteer Association?¹

From answering Q1.2 to Q1.6 use the following diagram to determine whether your organisation/marae is a 'PCBU' or a 'Volunteer Association'. Your response here will also influence your response to Q1.12 above.



Who is a Duty Holder? Which one are you?

From answering questions 1.7 to 1.11 above, you can use the following table to determine the type of 'duty holder' that each role/person is at your organisation/marae.

¹ Based on McCaw Lewis lawyers information.

Four Types of 'Duty Holders' under HSWA and regulations ²	
Role & Description	Level of Duty
<p>PCBU – Person Conducting a Business or Undertaking</p> <p>Who is a PCBU?</p> <ul style="list-style-type: none"> Individuals or organisations Includes: employers, contractors, companies, schools government departments, not for profit organisation that employs staff, 'Upstream' PCBUs (architects, engineers, etc.) <u>Does not</u> have to be for profit or gain <u>Does not include</u> volunteer associations or home occupiers. 	<p>PCBUs have primary duty of care and are responsible, so far as is reasonably practicable, for:</p> <ul style="list-style-type: none"> The Health and Safety of workers, or those workers who are influenced or directed by the PCBU (E.g. workers and contractors); and Ensuring the Health and Safety of other people is not put at risk from work carried out as part of the conduct of the business or undertaking (E.g. visitors & customers). <p>How to Meet the Duty</p> <p>PCBUs have duties to workers affected by their work, <u>not</u> just to those they directly employ or engage.</p> <p>Upstream PCBUs have a duty to ensure, so far as reasonably practicable, that the work they do or the things they provide to the workplace do not create Health and Safety risks.</p>
<p>Officers</p> <p>Who is an Officer?</p> <ul style="list-style-type: none"> Directors of a company, partners of a partnership and comparable positions, Trustees. <p>But <u>no liability</u> for: Volunteers, Community/Elected Board Members (Local Electoral Act 2001), School Boards of Trustees.</p>	<p>Officers' duties <u>are not the same</u> as the PCBU's duty.</p> <p>Officers do not have to ensure the Health and Safety of the PCBU's workers, rather, the officer must exercise due diligence to ensure that the PCBU is meeting its Health and Safety obligations.</p> <p>The due diligence complements & supports the primary duty of care of the PCBU – it <u>does not</u> replace it.</p> <p>How to Meet the Duty – Officers must:</p> <ul style="list-style-type: none"> Know about work Health and Safety matters and keep up-to-date Gain an understanding of the operations of the organisation and the hazards and risks generally associated with those operations; Ensure the PCBU has appropriate resources and processes to eliminate or minimise those risks; Ensure has appropriate processes for receiving information about incidents, hazards and risks, and for responding to that information; Ensure there are processes for complying with any duty, and that these are implemented; and Verify that these resources and processes are in place & being used.
<p>Workers</p> <p>Who is a worker?</p> <ul style="list-style-type: none"> Any person who carries out work for a PCBU (paid or unpaid) Includes: Employees, volunteers, contractors, labour hire workers, people gaining work experience. 	<p>Workers duties emphasise the idea that Health and Safety at work is the responsibility of everyone who 'works' as part of the business or undertaking.</p> <p>How to Meet the Duty – Workers must:</p> <ul style="list-style-type: none"> Take reasonable care for their own Health and Safety; Take reasonable care that their acts or omissions do not adversely affect the Health and Safety of other persons; Comply so far as reasonably able, with any reasonable instructions that is given to them by the PCBU to allow the PCBU to comply with the law; Cooperate with any reasonable policy or procedure of the PCBU relating to the workplace that has been notified to workers.
<p>Others</p> <p>Who is an Other?</p> <ul style="list-style-type: none"> Other persons at workplaces. Includes: visitors, customers, clients 	<p>The duties on others entering or using a workplace emphasise the idea that H&S at work is the responsibility of everyone who utilises the business or undertaking.</p> <p>How to Meet the Duty</p> <p>Others entering the workplace must:</p> <ul style="list-style-type: none"> Take reasonable care for their own Health and Safety; Take reasonable care that their acts or omissions do not adversely affect the Health and Safety of other persons; and Comply so far as reasonably able, with any reasonable instructions that is given to them by the PCBU to allow the PCBU to comply with the law.

² Health and Safety at Work Act 2015, McCaw Lewis lawyers, Information Sheet, 2016 – a general summary.

Offences and Penalties under HSWA

There are a range of offences and penalties under HSWA and regulations. Imprisonment is reserved for the most serious offences.

Penalties depend on the offence and what type of duty holder the offender is:³

- An individual who is not a PCBU (e.g., a worker or 'other' person)
- An individual who is a PCBU (e.g., self-employed) or an officer of PCBU
- Any other person, such as an organisation that is a PCBU (e.g., a company, government department or non-profit organisation).

The most serious offences under HSWA are for failures to comply with Health and Safety duties under sections 36 to 46 of HSWA. These cover the duties of PCBUs,

officers, workers and other persons at workplaces.

WorkSafe, as the prosecutor, must prove the offence beyond reasonable doubt.

Who can be liable for offences?

The four duty holders can be convicted for failing to meet Health and Safety duties. An officer of a PCBU can be convicted for failing to meet the due diligence obligation, whether or not the PCBU has been convicted of an offence (section 50 of HSWA).

There are exceptions in HSWA that mean some people will not be prosecuted for Health and Safety offences:

Volunteers and [volunteer boards] cannot be prosecuted for failing to comply, unless it is a duty under:	Some officers cannot be prosecuted for failing to meet their due diligence obligations (section 52 of HSWA):
<ul style="list-style-type: none"> • Section 45 (duties of workers) or • Section 46 (duties of other persons at workplaces). 	<ul style="list-style-type: none"> • An elected member of governing body of a territorial authority or regional council • Member of local board (elected or appointed) • Member of community board (elected or appointed) • Trustee of a board of a school (appointed or elected)

Maximum penalties for Health and Safety duty offences are:			
Offence	Individual who is not a PCBU or Officer (e.g., a worker or other person at a workplace)	Officer of a PCBU or an individual who is a PCBU (e.g., self-employed)	Anyone else (e.g., an organisation that is a PCBU)
Section 47 (reckless conduct in respect of duty that exposes an individual to a risk of serious injury, serious illness or death)	Five years in prison or \$300,000 fine, or both	Five years in prison or \$600,000 fine, or both	\$3 million fine
Section 48 (failure to comply with a duty that exposes an individual to a risk of serious injury, serious illness or death)	\$150,000 fine	\$300,000 fine	\$1.5 million fine
Section 49 (failure to comply with a duty)	\$50,000 fine	\$100,000 fine	\$500,000 fine

3 Section 10, HSWA.



■ Notes

Key Health and Safety related laws and regulations

Refer to the WorkSafe website for further up-to-date information of key Health and Safety related laws and regulations: [worksafe.govt.nz/laws-and-regulations](https://www.worksafe.govt.nz/laws-and-regulations)

Key Contacts

Key contacts include (Note: this is not an exhaustive list):

WorkSafe NZ www.worksafe.govt.nz

Civil Defence www.getthru.govt.nz (Also refer to 'Yellow Pages' inside cover.)

Fire Emergency NZ www.fireandemergency.nz



Glossary

Refer to the WorkSafe website for 'Definitions and acronyms' concerning Health & Safety in New Zealand: [worksafe.govt.nz/the-toolshed/definitions-and-acronyms](https://www.worksafe.govt.nz/the-toolshed/definitions-and-acronyms)

General Enquiries

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**Community
Waikato**

He piko he kainga