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INSPECTOR REPORT

PSYCHOSOCIAL PROACTIVE INSPECTION PROGRAM

AUSTRALIAN FEDERAL POLICE

31 August 2023

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EXECUTIVE SUMMARY

Comcare engaged with the Australian Federal Police (AFP) as part of a Psychosocial Proactive Inspection Program. The inspection involved visits by Comcare inspectors to meet with senior leaders, health and safety representatives and workers to the following AFP operational areas/commands:

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In addition to the abovementioned meetings, Comcare inspected documents provided by AFP and information/documents on the AFP intranet.

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Comcare will undertake a verification inspection after six-months from the date of this report. Comcare will liaise with AFP when Comcare commences planning of the verification inspection.

Comcare thanks AFP for their professionalism and willingness to engage openly and constructively throughout the course of this inspection.

The inspection is now closed.

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INSPECTOR REPORT

COMCARE REFERENCE NUMBER	MC00029980
PCBU DETAILS	Name: Commonwealth of Australia in the right of the Australian Federal Police ABN: 17864931143
REPORT ISSUED TO	Name: s 47F Position: Performing the role of Manager SHIELD Strategy and Capability
BACKGROUND	

1. Comcare is undertaking a Psychosocial Proactive Inspection Program ('**Program**') in accordance with its regulatory functions to provide advice and information on work health and safety ('**WHS**') to duty holders, and to monitor and enforce compliance with the *Work Health and Safety Act 2011 (Cth)* ('**WHS Act**').

2. As of 1 April 2023, work-related psychosocial hazards and risks are regulated by Comcare pursuant to s55A-55D of the *Work Health and Safety Regulations 2011 (Cth)* ('**WHS Regulations**') and under the WHS Act.[1]

3. The scope of the Program is to assess compliance with the WHS Act and WHS Regulations pertaining to the identification and management of work-related psychosocial hazards, and to facilitate compliance (where non-compliance is identified) through the provision of information and advice.

4. On 15 March 2023, Comcare met with representatives from Australian Federal Police ('**AFP**') SHIELD to discuss the participation of AFP in the Program. Following the meeting and in further consultation with AFP representatives, it was agreed that Comcare would undertake workplace inspections at the areas/commands listed in Table 2.

5. Comcare subsequently undertook workplace visits, which comprised engagement with senior AFP leaders (tier 1), work health and safety personnel and health and safety representatives (tier 2) and employees and other workers (tier 3), conducted at the dates, times and locations listed in Table 2.

6. The workplace visits were conducted in accordance with the principles set out in Comcare's *PCBU Guide to the Psychosocial Proactive Inspection Program Pilot*. This document was provided to the AFP prior to the initial visit.

7. In addition to workplace visits, Comcare exercised its powers under s 155(2) of the WHS Act on two occasions to obtain information and documents from AFP, which Comcare subsequently inspected.[2]

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[1] See especially s 19.
[2] MC00029980 -NT01 (issued 12/05/2023), MC00029980 -NT02 (issued 11/07/2023).

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8. Comcare thanks AFP for participation in this Program. Comcare wishes to acknowledge the professional, constructive and candid manner in which AFP representatives (worker and senior leaders) assisted Comcare inspectors throughout the course of the visits.

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COMPLIANCE ASSESSMENT
PART I – RISK MANAGEMENT SYSTEMS

Note. Refer to the Comcare *Guide to the Psychosocial Proactive Inspection Program* (Appendix D) for further information about each subheading in this part.

17. WHS MANAGEMENT SYSTEM AND PSYCHOSOCIAL RISKS

17.1.   The *Work Health and Safety Act 2011* (Cth) (**WHS Act**)[3] provides that a Person Conducting a Business or Undertaking ('**PCBU'**) has a primary duty of care and must ensure the health and safety of:

(a) workers engaged, or caused to be engaged by the person; and

(b) workers whose activities in carrying out work are influenced or directed by the person;

while the workers are at work in the business or undertaking.

17.2.   In exercising its primary duty of care, a PCBU is required to ensure, so far as reasonably practicable, the provision and maintenance of safe systems of work.[4]

17.3.   When implementing controls to manage work health and safety risks from psychosocial hazards, the WHS Regulations require that a PCBU must have regard to all relevant matters[5] including the systems of work and how work is managed, organised and supported.[6]

17.4.   The *Model Code of Practice for Managing Psychosocial Hazards at Work[7]* explains that:

Systems of work are organisational rules, policies, procedures and work practices used to organise, manage and carry out work. These systems can introduce psychosocial hazards, but if carefully considered can also help control them.

For example, a system of work that does not allow workers to seek assistance from supervisors, or that allocates tasks without regard for other work demands may introduce hazards. A system of work which provides for support and manages job demands may assist to control risks. [8]

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[3] *Work Health and Safety Act 2011* (Cth) (WHS Act) s 19(1).
[4] Ibid s 19(3)(c).
[5] *Work Health and Safety Regulations 2011 (Cth)* (WHS Regulations) cl 55D.
[6] Ibid s 5D(2)(d).
[7] Safe Work Australia (2022)
[8] Ibid 13

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17.11.   It is an offence under the WHS Act to engage in discriminatory conduct against a person for raising or proposing to raise a work health and safety issue or concern.[12] It is also an offence to request, instruct, induce, encourage, authorise or assist such discriminatory conduct.[13]

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[12] WHS Act (n 3) s 107; WHS Regulations (n 5) ss 104-106
[13] See also: interpretative_guideline_-_discriminatory_conduct.pdf (safeworkaustralia.gov.au)

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19. WHS DUTIES

19.1.   The WHS Act imparts non-transferrable[15] duties on PCBUs,[16] officers of a PCBU,[17] workers,[18] and other persons in the workplace. Advice on how to exercise those duties is provided in s 1.2 of the *Model Code of Practice Managing Psychosocial Hazards at Work.*[19]

19.2.   Officers of a PCBU have a duty to exercise due diligence, as set out in s 27 of the WHS Act. This includes, among other things:

o   taking reasonable steps to acquire and keep up-to-date knowledge of work health and safety matters (including psychosocial risks),

o   ensuring the PCBU has appropriate processes for receiving and considering information regarding incidents, hazards and risks and responding in a timely manner,

o   ensuring appropriate resources and processes are available to eliminate or minimise health and safety risks (including psychosocial risks).[20]

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[15] WHS Act (n 3) s 14
[16] e.g. WHS Act (n 3) s 19
[17] e.g. WHS Act (n 3) s 27
[18] e.g. WHS Act (n 3)s 28
[19] Safe Work Australia (2022).
[20] WHS Act (n 3) s 27, see especially s 27(5).

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23. TRAINING, INSTRUCTION, AND SUPERVISION

23.1.   s 19(3)(f) of the WHS Act provides that a PCBU must ensure, so far as reasonably practicable:

> (f) 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…

23.2.   cl 39 of the WHS Regulations provides that a PCBU must ensure that information provided for the purpose of s 19(3)(f) is suitable and adequate, having regard to:

> (a) the nature of the work carried out by the worker; and
>
> (b) the nature of the risks associated with the work at the time the information, training or instruction is provided; and
>
> (c) the control measures implemented.

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24. CONSULTATION, COMMUNICATION AND COORDINATION

24.1. The WHS Act provides that a PCBU must, so far as reasonably practicable, consult with workers working for the PCBU or who are likely to be directly affected by a matter relating to health and safety.[27] If workers are represented by a Health and Safety Representative (HSR), consultation must include the HSR.[28]

24.2. Consultation is required in relation to matters enumerated in s 49 of the WHS Act, including:

(a) when identifying hazards and assessing risks to health and safety arising from the work carried out or to be carried out by the business or undertaking;

(b) when making decisions about ways to eliminate or minimise those risks[29]

24.3. The statutory mechanisms for consultation include Health and Safety Representatives (ss 50-74) and/or Health and Safety Committees (ss 75-9) depending on negotiations between workers and the PCBU. Other consultation mechanisms are described in the *Work Health and Safety Consultation, Co-operation and Co-ordination Code of Practice 2015*.[30]

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[27] WHS Act (n 3) s 47
[28] Ibid s 48(2)
[29] Ibid s 49
[30] Work Health and Safety (Work Health and Safety Consultation, Co-operation and Co-ordination) Code of Practice 2015 (legislation.gov.au)

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PART II – OTHER MATTERS ENQUIRED INTO

Note. This Part provides an assessment of Comcare's enquiries into specific issues that became evident throughout the course of Comcare's inspection at AFP.

26. JOB DEMANDS

26.1.   The psychosocial hazards of high or low job demands can give rise to foreseeable risks to health and safety. The *Managing Psychosocial Hazards at Work Model Code of Practice*[34] describes the hazards of high or low job demands in the following terms:

> Sustained or intense high levels of physical, mental or emotional effort which are unreasonable or chronically exceed workers' skills, or sustained low levels of physical, mental or emotional effort. A job can include periods of high and low job demands. A job can also involve a combination of low or high mental, emotional and physical demands.

26.2.   A PCBU must manage risks associated with psychosocial hazards, including high or low job demands by eliminating the risk or, if not reasonably practicable to eliminate the risk, minimising the risk so far as reasonably practicable.[35] When implementing controls to minimise a psychosocial risk, a PCBU must have regard to all relevant matters, including, inter alia.

> (a) the duration, frequency and severity of the exposure of workers and other persons to the psychosocial hazards; and
>
> (b) how the psychosocial hazards may interact or combine
>
> …[36]

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[34] Safe Work Australia, July 2022 pp 33-4
[35] WHS Regulations (n 5) cll 33, 35, 55D(1)
[36] Ibid s 55D(2)

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30. CONCLUSION

30.1.   Based on this assessment, the inspection is now closed.

30.2.   Comcare will undertake a verification inspection after six-months from the date of this report. Comcare will liaise with AFP when Comcare commences planning of the verification inspection.

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DISCLAIMER

This report contains information that may assist you to take steps regarding your obligations under the WHS Act. You must refer to the Commonwealth *Work Health and Safety Act 2011* (WHS Act) and the *Work Health and Safety Regulations 2011* (WHS Regulations) to understand your duties and obligations. Comcare's external website contains links to WHS legislation.

Comcare does not accept liability for any errors or omissions or for any loss or damage suffered by you or any person which arises from your reliance on this report or for any breach by you of your obligations under the WHS Act. Where a Comcare inspector has inspected a particular workplace, it is not a representation by Comcare that the particular workplace is in any way free of hazards.

IF YOU DO NOT AGREE WITH A DECISION

If you disagree with the outcome of this inspection, you may seek an internal reconsideration of the inspector's decision. A request for a review should be sent to statutory.oversight@comcare.gov.au including any additional information or evidence you have to support your request. Comcare will review your request and advise of the outcome in writing within 20 business days. If you would like to clarify any aspect of this report, you can contact the inspector directly.

Comcare has a range of publications and fact sheets to help explain your responsibilities and provide guidance to make your workplace safer. The Compliance and Enforcement Policy provides guidance as to how Comcare approaches regulation. To access these, visit our website.

PRIVACY STATEMENT

Your privacy is important to us. Comcare will only collect, use or disclose personal information in accordance with the Commonwealth Privacy Act 1988 and if it is reasonably necessary for, or directly related to, one or more of our functions, powers and/or activities. These include functions and activities under the following Commonwealth legislation: Safety, Rehabilitation and Compensation Act 1988, the WHS Act, the Seafarer's Rehabilitation and Compensation Act 1992, and the Asbestos related Claims (Management of Commonwealth Liabilities) Act 2005. If Comcare is unable to collect, use and disclose your personal information for our WHS regulatory requirements, we may not be able to provide these services and respond appropriately.

Comcare may also need, in accordance with the Privacy Act 1988, and subject to confidentiality of information provisions under the WHS Act, to collect your personal information from, and disclose your personal information to, a number of parties, including but not limited to:

- Comcare's internal and external legal advisers
- the Safety, Rehabilitation and Compensation Commission
- a court or tribunal
- state or territory work health and safety regulatory agencies
- personnel engaged by Comcare to conduct research related activities
- enforcement agencies or bodies
- state and territory Coroners
- Commonwealth, state or territory industry regulators
- any other person assisting Comcare in the performance of its functions or exercise of its powers, including contractors and consultants
- any other person where there is an obligation under law to do so (for example but not limited to, responding to the direction of a court to produce documentation).

It is unlikely Comcare will provide personal information to anyone in an external territory or outside Australia, unless the information relates to an incident, investigation, injury or illness sustained while overseas, or treatment provided by an overseas practitioner. If disclosure of personal information is

made to someone overseas, Comcare will follow the Australian Privacy Principles that relate to disclosure to overseas entities.

Accuracy of personal information. Comcare wants to ensure personal information is up to date and complete. Our Privacy Policy explains how to access personal information held about you and how to go about making any corrections.

Complaints. If you think Comcare has interfered with or breached your privacy (relevant to the Privacy Act 1988), our Privacy Policy contains information about what you should do and how we will respond.

For a copy of our Privacy Policy, to request a change of your personal information or to make a privacy complaint please refer to www.comcare.gov.au/privacy. You can also contact us on 1300 366 979 or email us at privacy@comcare.gov.au.

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APPENDIX B – Recommended Resources

Resource (hyperlinked)	Remarks	Topic
Safe Work Australia – Model Code of Practice - Managing Psychosocial Hazards at work	Safe Work Australia's Model Code of Practice – Managing Psychosocial Hazards at Work provides guidance to duty holders on how to identify and manage psychosocial hazards. In the absence of an approved Code of Practice in the Commonwealth jurisdiction, the Model Code of Practice provides guidance that is consistent with the Model WHS Act and Regulations.	Psychosocial Risk Management (primary guidance)
Comcare - Reducing the Psychosocial Risk of Workplace Change	Comcare's Reducing the Psychosocial Risk of Workplace Change self-assessment tool can support work health and safety risk management during organisational change	Change management
Comcare - Change management checklist	Comcare's change management checklist is a self-assessment tool for work health and safety risk management during organisational change	Change management
Comcare - better practice EAP resources	Comcare's better practice EAP resources and guidance support employers with the procurement and monitoring of EAP services to improve organisational outcomes and workers' health and wellbeing. Resources include: (1) Principles for Better Practice EAPs, (2) Monitoring and Evaluation Framework for EAP Counselling Services, and (3) Sample EAP Evaluation dashboard.	Employee Assistance Programs (EAP)
Respect@Work website	The Respect@Work website by the Australian Human Rights Commission, brings together a comprehensive set of resources to support individuals and organisations to better understand, prevent and address workplace sexual harassment.	Harassment including sexual harassment
Safe Work Australia - Preventing workplace sexual harassment guide	SafeWork Australia's Preventing workplace sexual harassment guide supports PCBUs to meet their duties under WHS laws to eliminate and minimise risks to health and safety so far as is reasonably practicable. This includes considering the physical work environment, work systems and workplace policies	Harassment including sexual harassment
AHRC - Toolkits	The AHRC's Toolkits and guidance material are designed to help promote diversity and prevent discrimination in the workplace. They provide practical support to develop effective policies and practices in areas including gender equality, sexual harassment, recruitment and retention of older workers, managing employees with family and	Harassment including sexual harassment

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	carer responsibilities, workplace cultural diversity and employment of people with disabilities.	
Comcare - Work Demands Guidance	Practical guidance to understand and identify work-related stress, then proactively eliminate, reduce, and manage the risks to prevent harm to workers.	**Job Demands**
SafeWork NSW - Lack of role clarity	SafeWork NSW have published a 'tip sheet' on role clarity, role conflict and work-related stress.	**Lack of role clarity**
Comcare - Lead Indicators Mentoring Program	Comcare's Lead Indicators Mentoring Program trialled the use of a lead indicator tool; the Psychosocial Safety Climate (PSC) was chosen. Given the complexities and misunderstanding surrounding the effective use of lead indicators, the Program was designed to include an employer mentoring component, to build and develop the capability of employers and leaders to reduce the risk of WHS harm, through the implementation of the PSC Framework. PSC refers to the corporate climate for psychological health, and concerns the priorities, policies, practices and procedures an organisation has to prevent stress and psychological harm.	**Lead indicators**
SafeWork NSW - Levels of control and work-related stress	SafeWork NSW have published a 'tip sheet' on Levels of control and work-related stress.	**Low job control**
National Mental Health Commission - Mentally Healthy Workplaces beta site	The Mentally Healthy Workplaces beta site (open for feedback) by the National Mental Health Commission provides a nationally consistent approach to workplace mental health and a one-stop shop of curated high-quality resources, advice and tools from a range of organisations. The platform contains a collection of learning modules on the core elements of a Mentally Healthy Workplace and allows users to track their progress.	**Mental health**
SafeWork NSW - Organisational justice and work-related stress	SafeWork NSW have published a 'tip sheet' on organisational justice and work-related stress.	**Organisational Justice**
People at Work	People at Work is a free and validated Australian psychosocial risk assessment survey, that assesses a number of the most common psychosocial hazards and factors. The survey forms part of a five-step process to identify, assess and control risks to psychosocial health at work. It is a collaboration between and jointly funded by Australian work health and safety regulators.	**Psychosocial Risk Assessment**

SafeWork NSW - Recognition and Reward	SafeWork NSW have published a 'tip sheet' on recognition and reward and minimising work-related stress.	**Reward and recognition**
Respect@Work - Celebrating positive behaviours in organisations	Respect@Work has a page with practice examples of how to recognise and reward positive behaviours in the workplace.	**Reward and recognition**
Comcare – Mental Health Stigma	Comcare website has a page detailing mental health stigma in the workplace and how employers and managers can reduce it. Beyond this, there is some new guidance on the way	**Stigma**
APSC - Compassionate Foundations – Suicide Prevention Capability Suite	Compassionate Foundations – Suicide Prevention Capability Suite by the Australian Public Service Commission, is a foundational, virtual and self-directed (approximately 4 hours) suite designed to support positive human-to-human interactions that promote connection and understanding. The purpose of the suite is to help participants respond early and before a person's experience leads them to become distressed and/or suicidal. These skills include being compassionate, being aware of the needs of people in vulnerable situations, understanding why people may become distressed and knowing how to have a helpful and safe conversation with someone who may be showing early signs of distress.	**Suicide Prevention**
Comcare - Good Work Design	Comcare's Good Work Design videos and resources help to build manager capability for designing good work for participation and productivity, via a suite of ten micro learning videos and written resources. The resources translate the evidence of good work design into practice and complement the Safe Work Australia Good Work Design Principles. The theme of the resources is 'What great managers do'.	**Work design**
Training list by topic | Comcare	Comcare has eLearning modules and other resources available for training on psychosocial hazard, psychosocial risk management, and other WHS issues. Training products have been specifically tailored for different audiences and roles, such as workers, middle managers and supervisors, senior and executive managers and health and safety representatives.	**Training**

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APPENDIX D - PCBU Guide to the Psychosocial Proactive Inspection Program (Pilot)

GUIDE TO THE PSYCHOSOCIAL PROACTIVE INSPECTION PROGRAM

PILOT

This guide is in three sections:

The *Introduction* provides background, context and an overview of the (pilot) program methodology as well as Comcare's regulatory approach.

The *Systems Compliance Assessment* and *Worker Engagement* sections provide details about those components of the program.

As of 01 April 2023 Commonwealth WHS regulations relating to psychosocial hazards will be in force. A Commonwealth Code of Practice is forthcoming.

Until a Commonwealth code is approved references in this document will be made to the *Model Code: Managing Psychosocial Hazards at Work* developed by Safe Work Australia (SWA) as a useful resource. The 14 psychosocial hazards identified here are drawn from the model code.

Model regulations are also available from Safe Work Australia.

However, at the Commonwealth level *the hierarchy of controls as a method to control risks is a legislated requirement for psychosocial hazard management under part 3.1*.

In the model regulations the hierarchy of controls is specifically excluded as a requirement.

CONTENTS

Introduction

Background

In November 2021, Comcare committed to the development of a Psychosocial Proactive Inspection Program (the Program), to regulate psychosocial hazard and risk management in the Commonwealth work health and safety (WHS) jurisdiction.

This followed a number of key events:

- The 2018 Productivity Commission inquiry into mental health[1], which found that the risks of psychosocial injury are not being adequately prevented or managed in workplaces.
- The 2018 review of Australia's model WHS laws by independent reviewer, Ms Marie Boland (the Boland Review)[2], which comprised recommendations about updating the model laws to better address psychosocial hazards and risks.
- Acceptance by WHS Ministers in May 2021 of all Boland Review recommendations, and a decision by WHS Ministers to develop new regulations[3] and a *Model Code of Practice: Managing psychosocial hazards at work*, (the Model Code)[4].
- The 2019 *National Inquiry into Sexual Harassment in Australian Workplaces* (*Respect@Work report*)[5].
- A measure announced by Government as part of the 2020-21 Mid-Year Economic and Fiscal Outlook for Comcare to establish a new psychosocial inspectorate to support mentally healthy and safe workplaces within our jurisdiction[6].

Comcare's *2022-2025 Prevention Strategy*[7] identified priority concerns as *Bullying and Harassment* and *Work Demands*. Comcare's own deidentified claims data indicates that psychosocial injury claims are increasing. On average psychological claims result in longer time off work, have poorer return to work outcomes, and are more costly when compared to other injury and disease claims.

Comcare is committed to mental health and suicide prevention and acknowledges that workplaces need collaborative regulation and more support to address these issues, through management of psychosocial risks and hazards.

Comcare's understanding of Commonwealth PCBUs'[8] maturity to manage psychosocial risks and hazards requires enhancement. We also know that our guidance to the Commonwealth jurisdiction regarding evidence-based best practice management of psychosocial risks and hazards needs to be updated to align with upcoming reform of the WHS legislative framework.

Program objectives

To this end, Comcare has designed the Program to do the following, in accordance with our organisational purpose: *promote and enable safe and healthy work*.

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[1] Productivity Commission (2020), *Mental Health, Report no. 95* (available at https://www.pc.gov.au/inquiries/completed/mental-health/report)

[2] Boland, Marie (2018) *Review of the model Work Health and Safety laws Final report* (available at https://www.safeworkaustralia.gov.au/law-and-regulation/model-whs-laws/review-model-whs-laws)

[3] Commonwealth of Australia (2023) *Work Health and Safety Amendment (Managing Psychosocial Risk and Other Measures) Regulations 2022 (Div 11)* (available at: https://www.legislation.gov.au/Details/F2023L00012)

[4] Safe Work Australia (2022) *Model Code of Practice: Managing psychosocial hazards at work* (available at https://www.safeworkaustralia.gov.au/doc/model-code-practice-managing-psychosocial-hazards-work)

[5] Human Rights Commission (2020) *Respect@Work: National Inquiry into Sexual Harassment in Australian Workplaces* (available at https://humanrights.gov.au/our-work/sex-discrimination/publications)

[6] Commonwealth of Australia (2021) *Mid-Year Economic and Fiscal Outlook 2021-22* (available at https://archive.budget.gov.au/2021-22/myefo/download/myefo-2021-22.pdf)

[7] Comcare (2022) *Prevention Strategy 2022-2025* (available at https://www.comcare.gov.au/about/forms-publications/documents/publications/corporate-publications/Comcare-Prevention-Strategy-2022-2025.pdf)

[8] **Person Conducting a Business or Undertaking**, as defined in the *Work Health and Safety Act 2011 (Cth)*.

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The Program's objectives are as follows:

- Enhance regulatory approach to psychosocial risks through prevention and regulatory response.
- Review Comcare's inspector processes to ensure alignment to contemporary mental health regulatory approaches and the new *Code of Practice: Managing Psychosocial Hazards at Work*.
- Establish a Psychosocial Risk Inspectorate capability.
- Deliver proactive regulatory activities to verify increased compliance for psychosocial health risks for priority PCBUs.
- Psychosocial risk inspection guidance is reviewed and updated and aligned to contemporary approaches to psychosocial health regulation.

In focusing on the above, the Program reflects Comcare's strategic objectives, regulatory priorities and *Compliance and Enforcement Policy*, which is aligned to SWA's *National Compliance and Enforcement Policy*.

Program methodology
In executing the Program, Comcare plans to use a proactive inspection methodology.

<u>What is a proactive inspection?</u>
A proactive inspection is an intelligence and data led inspectorate activity that promotes health and safety. This inspection is not undertaken in response to a reactive trigger such as an incident notification. Proactive inspections as part of the Pilot are intended to identify, assess and verify the existence and effectiveness of PCBU systems in managing psychological hazards in the absence of an incident or injury.

<u>What does it entail?</u>
The Pilot involves Comcare's Inspectors and key stakeholders from other areas of Comcare undertaking the following:

- Examining the system management of common psychosocial hazards
- Assessing compliance relating to the systems management of psychosocial risks against existing legislative requirements and
- Issuing an inspector report detailing the outcomes of the proactive inspection activity. Information and advice relating to non-compliance will be provided in the form of recommendations in the report, to assist PCBUs to move towards compliance and prepare them for the adoption of the Model Work Health and Safety Regulations for psychosocial risks and the model Code.
- If non-compliance is identified within the inspector report, a verification inspection will be undertaken at a reasonable time negotiated with the PCBU and follow existing Regulatory Operations Group procedures.

<u>How will it be deployed?</u>
Comcare has communicated to its jurisdiction at a high level about the Pilot and Psychosocial Proactive Inspection Program proper. Comcare's future approach to communications about the Program will be informed and developed throughout conduct of the Pilot.

Proactive engagements will be undertaken through the inspector making inquiries at the workplace in accordance with Section 165 of the *Work Health and Safety Act 2011* (Cth) (WHS Act). This will occur across three tiers:

1. Senior management engagement to understand and assess executive commitment to achieving a mentally healthier and legislatively compliant workplace. This engagement will be undertaken with Comcare's Strategic Partnership & Engagements team in attendance as observers and to provide an opportunity for a collaborative and educative process.

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2. Standard WHS Inspection approach engaging at WHS team & middle management level to review the WHS management system and particularly to identify and understand the systems presently in place to manage the risks relevant to psychosocial hazards.

3. Worker level engagement, including HSR engagement where relevant, to assess the extent of consultation, representation and participation and the provision of training, instruction and supervision.

Compliance will be assessed against existing legislative requirements with specific reference to the approved Work Health and Safety (How to Manage Work Health and Safety Risks) Code of Practice 2015. Foreseeable hazards and risks assessed against include the 14 "Common Psychosocial Hazards" as detailed in the *Model Code of Practice Managing Psychosocial Hazards at Work*.

The preferred regulatory tool to be employed through the Pilot is the provision of targeted information and advice regarding compliance with WHS duties. Provision of information and advice is a function of an Inspector under Section 160 of the WHS Act. Where non-compliance is identified and the risk of injury or illness to workers is high and imminent, the matter will be escalated to the Inspectorate as a WHS Concern.

Program Pilot objectives
In accordance with our strategic priority of insight driven and risk and evidence-based practice, and to ensure the integrity and efficiency of the Program, Comcare will test the proposed program objectives, methodology and tools through the execution of a Program Pilot.

Specifically, the Program Pilot will examine Comcare's abovementioned three-tiered engagement approach to assess PCBUs' system existence and effectiveness managing psychosocial hazards; and whether Comcare's proposed proactive inspection approach and supporting tools enable Comcare to meet the Program's objectives.

Following completion of the Program Pilot, Comcare will have a clear picture of whether the Program objectives are appropriate and attainable. Any gaps in our methodology and tools will be assessed along with any barriers that may prevent us from achieving (potentially revised) Program objectives.

Privacy
Comcare will conduct the Program Pilot in accordance with Comcare's CEO Direction on Privacy, the Privacy Act 1988 (Cth), section 271 of the WHS Act and the Australian Privacy Principles.[9]

Where individual workers are engaged throughout the Program Pilot, Comcare will follow privacy considerations outlined in the Program *Worker Engagement Tool*, which details that worker engagement is voluntary and anonymous.

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[9] https://www.comcare.gov.au/site-information/privacy

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Systems Compliance Assessment

The Psychosocial Proactive Inspection Program will include a systems compliance assessment. In conducting the assessment, Comcare inspectors will be seeking information and documentation relating to systems in place to manage psychosocial hazards at work, both in terms of the overarching health and safety system as well as considering particular (and/or combinations of) psychosocial hazards.

This section is intended to provide an understanding of the types of questions Comcare inspectors will be asking, as well as to point to resources available for further information and assistance in understanding and managing psychosocial hazards.

The criterion related to risk management processes and psychosocial hazards in this guide are from:

Model Code of Practice: Managing psychosocial hazards at work | Safe Work Australia (July 2022)

Note that the list of psychosocial hazards contained in the Code of Practice is not a definitive or prescriptive list. Organisations may identify and assess risk from hazards particular to their organisation, or may identify that not every hazard on the list is relevant to their workplace.

Reference also made to:

- Workplace health and safety management system | Comcare
- Work Health and Safety Act (2011)(cth) and regulations
- (Approved) Code of Practice: How to manage work health and safety risks | Safe Work Australia
- (Approved) Code of Practice: Work health and safety consultation, cooperation, and coordination | Safe Work Australia
- Work Health and Safety Amendment (Managing Psychosocial Risk and Other Measures) Regulations 2022 (legislation.gov.au) (Div 11, WHS Regulations (Cth))
- (Approved) Code of Practice: Managing the work environment and facilities | Safe Work Australia
- (Approved) Code of Practice: Safe design of structures | Safe Work Australia
- Workplace sexual harassment | Comcare
- Your mental health responsibilities at work | Comcare
- Psychosocial hazards | Comcare
- PCBU Duties | Safe Work Australia
- WHS duties | Safe Work Australia
- Good work design | Comcare
- Principles of Good Work Design | Safe Work Australia
- Guide for preventing and responding to workplace bullying | Safe Work Australia
- People at Work
- ISO 45003:2021, Occupational health and safety management — Psychological health and safety at work — Guidelines for managing psychosocial risks
- O'Neill, S & Wolfe, K, Measuring and reporting on work health & safety, Canberra, Safe Work Australia, 2017
- Good Practice Indicators Framework for Preventing and Responding to Sexual Harassment (2022, Respect at Work Council)

WHS Management System Criteria

1. WHS Management System and Psychosocial Risk

The management of psychosocial hazards and risks is embedded in the PCBU's overarching WHS Management System. The WHS Management system demonstrates the PCBU's ability to consider and manage psychosocial risk in the workplace.

The organization should ensure that its WHS Management System remains appropriate, effective, and relevant to its operations and activities with respect to its management of psychosocial risk.

Comcare inspectors will be seeking to understand how psychosocial hazards are captured within the WHS Management System. As well as assessing the system, consideration will be given to the safety culture and PCBU commitment to managing psychosocial hazards, which is important to determining the maturity of PCBUs in managing psychosocial hazards.

For further guidance, refer to: [Model Code of Practice: Managing psychosocial hazards at work | Safe Work Australia](#) and [ISO 45003:2021, Occupational health and safety management — Psychological health and safety at work — Guidelines for managing psychosocial risks](#).

2. Objectives and Targets

It is important that all measurable health and safety objectives and targets relating to psychosocial risks are documented and senior management have appropriate processes for receiving, considering, and responding to these objectives and targets.

Comcare inspectors will be asking questions about whether clear objectives and targets around managing psychosocial hazards exist as this is important to determining the maturity of PCBUs in managing psychosocial hazards.

Refer to: [O'Neill, S & Wolfe, K, Measuring and reporting on work health & safety, Canberra, Safe Work Australia, 2017](#).

3. WHS Duties

It is crucial that senior management and others are aware of their legal obligations for health and safety in the relevant jurisdiction and understand how to go about meeting those obligations to manage psychosocial hazards and risk.

Ensuring that all organisational stakeholders understand their duties under the WHS laws, the risk management process these require, the business case for effectively managing psychosocial hazards, and the roles of various organisational leaders (e.g., senior leaders, line managers, human resources and WHS managers) is part of this process.

Leaders, through their governance arrangements and resourcing decisions, actively shape the organisation and the way work is undertaken. The decisions made, directly and indirectly, impact on organisation's ability to effectively control psychosocial risks.

Comcare inspectors will be asking how the PCBU demonstrates that WHS duties, including of officers, have been met in relation to management of psychosocial hazards.

For further guidance, refer to [PCBU Duties | Safe Work Australia](#).

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4. Risk Management

To meet their duties in ensuring health and safety, PCBUs must eliminate or minimise psychosocial risks as far as is reasonably practicable.

Risk management requires planning and is an ongoing process. However, considering risks early can prevent costly changes later and will allow for more effective control measures to be used, resulting in less harm to workers.

Comcare inspectors will be looking for documented methodologies used to eliminate or reduce psychosocial risks, through hazard identification, risk assessment and development of risk control measures in accordance with the legislative requirements including through consultation; and how controls are determined, implemented, maintained and reviewed. Examples of questions that will be asked are:

➢ *Is hazard identification/risk assessment conducted using validated tools such as People at Work?*
➢ *Does the process identify groups or types of work that place workers at higher risk?*
➢ *Does the risk assessment process consider duration, frequency and severity of exposure and the cumulative effects of exposure; and does it consider how hazards may interact and combine?*
➢ *Are controls matched to risk assessment findings and considered in terms of job/work design, the physical work environment, safe work systems and procedures, and the worker?*
➢ *Does the process include reasonably practicable avenues to accommodate individual worker needs to prevent psychological harm, (where the worker has disclosed those needs, or the PCBU is aware)?*
➢ *Where mental health promotion or support programs are included have they been considered in terms of their relative contribution to the risk control strategy (i.e., are they included in addition to, and not as an alternative to, work design and systems of work controls).*

(and see criteria 6-9 below and specific psychosocial criteria below for further information)

See WHS Act/Regulations*:*
WHS Act section 19 - Primary duty of care
WHS Regulations Division 11 – Managing psychosocial risks
WHS Regulations Part 3.1 - Managing risks to health and safety

For further guidance, refer to [Work Health and Safety Amendment (Managing Psychosocial Risk and Other Measures) Regulations 2022 (legislation.gov.au)](#) (Div 11, WHS Regulations (Cth)); [Model Code of Practice: How to manage work health and safety risks | Safe Work Australia;](#) and [People at Work](#)

5. Consultation, Communication and Coordination

At each step of the risk management process PCBUs should consult workers who are, or are likely to be, directly affected by a work health and safety matter and any HSR(s). Consultation on changes that may affect work health and safety should occur as early as possible.

For example, on proposed changes affecting psychosocial hazards and risk such as:

➢ new policies, procedures, and systems of work
➢ organisational restructures, changes to staffing levels, new reporting arrangements and work locations
➢ changes to tasks, workload, duties and working arrangements, including rosters
➢ innovative technology, plant, equipment, substances, structures, and production processes
➢ the redesign of existing workplaces, or
➢ changes to the way information, training, instruction, and supervision are provided.

It is also important that these consultations, communication, and coordination processes are documented to demonstrate how they are being implemented.

Comcare inspectors will be seeking documented consultative, communication and coordination processes in relation to management of psychosocial hazards.

See WHS Act:

WHS Act section 47 - Duty to consult workers
WHS Act section 48 - Nature of consultation
WHS Act section 49 - When consultation is required
WHS Act section 16 - More than one person can have a duty
WHS Act section 46 - Duty to consult with other duty holders

For further guidance, refer to [Model Code of Practice: Work health and safety consultation, cooperation and coordination | Safe Work Australia](#).

6. (Risk Management) Good Work Design

Good work design, or safety in design, considers hazards and risks as early as possible in the planning and design process. It aims to eliminate or minimise the possibility of workplace injury or illness throughout the life of the product or process. There are 10 principles of good work design that can be applied to support better work health and safety outcomes as well as business productivity. Making sure that work, work processes and systems are designed to reduce the risk to workers is an important part of a [work health and safety management system](#).

Comcare inspectors will be seeking to understand how good work design is part of the psychosocial safety management system.

For further guidance, refer to [Good work design | Comcare](#) and [Principles of Good Work Design | Safe Work Australia](#).

7. (Risk Management) Mental Health Wellness Support and Promotional Programs

Mental health support and promotional programs that are aligned to identified hazards and risks are more likely to be effective and of value. It is important to have a culture where workers feel psychologically safe and are not stigmatised for speaking up about psychosocial concerns or mental health issues.

Comcare inspectors will be asking questions about mental health support, prevention and promotional programs, and how these are linked to identified psychosocial risks as these are important indicators of organisational maturity and a healthy workplace culture.

For further guidance, visit the pages at [People at Work](#) and [Your mental health responsibilities at work | Comcare](#).

8. (Risk Management) Early Intervention and Return to Work

While prevention is most effective in managing risk, early intervention, and RTW programs are an important part of a systematic approach to managing psychosocial hazards and risk. These programs are more effective when they are aligned to identified hazards and risks that are unique in each workplace, and where workers are protected from risks (e.g. of secondary psychological harm) in a supportive RTW program.

It is important to have a culture where workers feel psychologically safe and are not stigmatised for speaking up about psychosocial concerns or mental health issues.

Comcare inspectors will be asking questions about early intervention and supportive return to work practices; and how these are linked to identified psychosocial risks as these are important indicators of organisational maturity and a healthy workplace culture.

For further guidance, visit the pages at People at Work *and* Your mental health responsibilities at work | Comcare.

9. (Risk Management) Training, instruction, and supervision

The WHS Act and regulations impose a duty on PCBUs to implement training, instruction, and supervision. To fulfil that obligation, PCBUs should focus on identifying psychosocial hazards and risks, training and instruction for managers and workers on their roles when exposed to psychosocial risk (e.g., risk management and reporting processes) and supervision practices that allow for same.

Comcare inspectors will be seeking documented policies and procedures concerning training, instruction, and supervision to assist in managing psychosocial risks in the workplace.

For further guidance, refer to WHS duties | Safe Work Australia.

10. Investigations

Psychosocial risk related incidents including those which are notified to authorities should be investigated. This is to determine the contributing factors so that similar occurrences can be prevented. Incident investigations should focus on corrective actions, not the allocation of blame. The nature of the investigation should be proportionate to the risk. A formal investigation may not always be the most effective option.

Investigators should be impartial and have the requisite skills.

Comcare inspectors will be looking for policies, procedures (incorporating appropriate methodologies and necessary resources0, for determining the appropriate nature of investigation, and then investigating and implementing corrective action for incidents that relate to psychosocial matters.

For further guidance, refer to: Model Code of Practice: Managing psychosocial hazards at work | Safe Work Australia (p31-32).

Specific Psychosocial Risk Criteria

The type and nature of psychosocial hazards present in each agency will be considered by Inspectors when assessing each of the criteria above. The Psychosocial hazards present in each agency may be considered in isolation and/or combination by Inspectors when determining how psychosocial risk is being managed.

11. Job Demands

The PCBU considers and demonstrates how they manage any psychosocial risk from job demands.

High job demands can include time pressure, role overload or sustained or intense levels of physical, cognitive, or emotional effort which are unreasonable or chronically exceed workers' skills, or sustained low levels of physical, mental, or emotional effort. A job can include periods of high and low job demands.

Comcare inspectors will be asking:

➢ *How does the PCBU manage role overload?*
➢ *What is the process for managing work hours (e.g., shift work, extended hours, irregular hours)?*

   As well as other questions about controlling psychosocial risks associated with job demands.

For further guidance, refer to: Model Code of Practice: Managing psychosocial hazards at work | Safe Work Australia (p33 - 35), Model Code of Practice: Managing the work environment and facilities | Safe Work Australia and Model Code of Practice: Safe design of structures | Safe Work Australia.

12. Job Control

The PCBU considers and demonstrates how they manage the impacts of job control on psychosocial wellbeing.

Low job control can include having little control or say over the work or aspects of the work including how or when the job is done.

Comcare inspectors will be asking:

➢ *How does the PCBU ensure staff are able to adapt and influence how they do their work?*
➢ *How does the PCBU ensure workers have the appropriate level of autonomy to complete tasks required of their role?*

   As well as other questions about controlling psychosocial risks associated with job control.

For further guidance, refer to Model Code of Practice: Managing psychosocial hazards at work | Safe Work Australia (p35 - 37).

13. Support

The PCBU can demonstrate how their organisation supports staff in completing their work.

Poor support can include tasks or jobs where workers have inadequate practical assistance and emotional support from managers and colleagues, or inadequate training, tools, and resources for a task.

Comcare inspectors will be asking:

➢ *How does the PCBU ensure staff have the necessary tools, systems, equipment, and resources to effectively do their job?*

> ➢ *How does the PCBU ensure that staff have access to supervisors/leaders to assist with decision making or for providing support?*
> ➢ *How does the PCBU consider and manage the impacts of psychosocial risks during staff performance appraisals or providing feedback?*

As well as other questions about controlling psychosocial risks associated with support.

For further guidance, refer to Model Code of Practice: Managing psychosocial hazards at work | Safe Work Australia (p37 - 39).

14. Role Clarity

The PCBU considers the adverse impacts of role clarity on psychosocial wellbeing and ensures that staff have clarity of their role, responsibilities, and work priorities.

Poor role clarity can include unclear, inconsistent, or frequently changing roles, responsibilities, or expectations; and/or a lack of important job-related information.

Comcare inspectors will be asking:

> ➢ *How does the PCBU ensure staff have clarity of their role, responsibilities, and work priorities?*

As well as other questions about controlling psychosocial risks associated with role clarity.

For further guidance, refer to Model Code of Practice: Managing psychosocial hazards at work | Safe Work Australia (p39 - 40).

15. Change Management

The PCBU considers and can demonstrate how it manages the impacts of organisational change on psychological wellbeing.

Organisational change that is poorly planned, communicated, supported, or managed can result in psychological harm.

Comcare inspectors will be asking:

> ➢ *How does the PCBU manage psychosocial risks during periods of change in the workplace?*
> ➢ *Can the PCBU describe their process for end-to-end change management?*
> ➢ *How does the PCBU ensure effective consultation with staff on changes in the workplace?*
> ➢ *How does the PCBU support staff through the change process and transition period?*

As well as other questions about controlling psychosocial risks associated with change management.

For further guidance, refer to Model Code of Practice: Managing psychosocial hazards at work | Safe Work Australia July 2022 (p40 – 42)

For Comcare resources on organisational change management, including a self-assessment tool, see Psychosocial hazards | Comcare.

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16. Reward and Recognition

The PCBU considers and demonstrates how they manage the reward and recognition processes in their organisation.

Poor reward and recognition can include jobs where there is an imbalance between workers' effort and recognition or rewards, both formally and informally; or an elevated level of unconstructive negative feedback from managers or customers; low skills development opportunities or underused skills.

Comcare inspectors will be asking:

➢ *How does the PCBU ensure there is an adequate, valued and effective staff reward and recognition program (including both formal and informal recognition)?*

➢ *How does the PCBU provide feedback, acknowledgment, or recognition to staff (teams and individuals) for their valued contributions and outstanding achievements?*

As well as other questions about controlling psychosocial risks associated with reward and recognition.

For further guidance, refer to [Model Code of Practice: Managing psychosocial hazards at work | Safe Work Australia](#) (p42 - 43).

17. Organisational Justice

The PCBU considers and demonstrates that decision-making policies and procedures are fair, unbiased, and applied consistently.

Poor organisational justice involves a lack of procedural justice (fair processes to reach decisions), informational fairness (keeping people informed), or interpersonal fairness (treating people with dignity and respect).

Comcare inspectors will be asking:

➢ *How does the PCBU ensure decision-making policies and procedures, including for grievance matters, disciplinary actions and career development/promotion are fair, unbiased, and applied consistently?*

➢ *How does the PCBU manage and maintain workers' privacy and keep confidential information secure?*

➢ *How does the organisation (PCBU) ensure that workers are protected from discrimination based on their age, gender, race, cultural background, religious beliefs, and sexuality?*

➢ *How does the PCBU ensure the reasonable needs of staff are recognised, and accommodated?*

As well as other questions about controlling psychosocial risks associated with organisational justice.

For further guidance, refer to [Model Code of Practice: Managing psychosocial hazards at work | Safe Work Australia](#) (p43 - 44).

18. Traumatic Events or Material

The PCBU considers and manages the psychosocial risks to staff who are exposed to, witness or investigate abuse, neglect, serious incidents, serious injuries, or fatalities.

This hazard includes vicarious exposure and cumulative trauma and can be present in roles that involve witnessing, investigating, or being exposed to potentially traumatic events or material.

Comcare inspectors will be asking:

➢ *How does the PCBU manage the psychosocial risks to staff who are exposed, witness, or investigate abuse, neglect, serious incidents, serious injuries, or fatalities?*

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> ➢ *How does the PCBU manage the psychosocial risks to staff who support victims of traumatic events?*

> ➢ *How does the PCBU manage the psychosocial risks to staff exposed to objectionable material?*

> *As well as other questions about controlling psychosocial risks associated with traumatic events or material.*

For further guidance, refer to [Model Code of Practice: Managing psychosocial hazards at work | Safe Work Australia](#) (p44 - 46).

19. Remote or isolated work

The PCBU demonstrates the ability to manage the impacts of remote or isolated work on staff psychological wellbeing.

Remote or isolated work is work that is isolated from the assistance of other persons because of the location, time or nature of the work or working in environments where there are long travel times, poor access to resources, or communications are limited and difficult.

Comcare inspectors will be asking:

> ➢ *How does the organisation (PCBU) manage the psychosocial risks to staff working in remote areas or in isolation?*

> ➢ *How does the PCBU manage the psychosocial risks to staff working where there is limited access to reliable communication and technology?*

> ➢ *How does the PCBU manage the psychosocial risks to staff working where there are difficulties, or lengthy delays accessing help in an emergency?*

> *As well as other questions about controlling psychosocial risks associated with remote or isolated work.*

For more information on how the risks associated with remote or isolated work can be controlled, refer to [Model Code of Practice: Managing the work environment and facilities | Safe Work Australia](#).

20. Physical Environments

The PCBU considers and demonstrates the ability to manage any psychosocial risk associated with the physical environment.

The exposure to unpleasant, or hazardous working environments and conditions can result in psychological harm.

Comcare inspectors will be asking:

> ➢ *How does the PCBU manage the risk of psychological harm associated with hazardous equipment and extreme/dangerous tasks?*

> ➢ *How does the PCBU manage psychosocial risks for excessive noise levels, extreme temperatures and climates??*

> *As well as other questions about controlling psychosocial risks associated with physical environments.*

For further guidance refer to [Model Code of Practice: Managing psychosocial hazards at work | Safe Work Australia](#) (p47).

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21. Violence and Aggression

The PCBU considers, documents, and implements controls to mitigate the impacts of violence and aggression in the workplace.

Workers can be exposed to aggressive behaviour such as yelling and intimidation, as well as physical violence or threats of violence from other workers (including workers of other businesses), customers, patients, or clients.

Comcare inspectors will be asking:

- ➢ *How does the PCBU manage psychosocial risks for violence and aggression in the workplace?*
- ➢ *How does the PCBU provide care and support for staff who have been exposed to violence and aggression?*

  As well as other questions about controlling psychosocial risks associated with violence and aggression.

To learn more about harmful behaviours, see [Model Code of Practice: Managing psychosocial hazards at work | Safe Work Australia](#) July 2022 (p48 – 54).

22. Bullying

The PCBU considers and manages psychosocial risks associated with bullying in the workplace.

Bullying is defined as repeated unreasonable behaviour directed towards a worker or group of workers that creates a risk to health and safety. This includes bullying by workers, clients, patients, visitors, or others.

Things that can increase the likelihood of bullying include the presence of other psychosocial hazards, leadership and management styles, and systems of work.

Comcare inspectors will be asking:

- ➢ *How does the PCBU manage psychosocial risks for bullying and victimisation in the workplace?*
- ➢ *How are bullying risks integrated in the PCBU's WHSMS and systems of work?*
- ➢ *How does the PCBU ensure managers and staff are suitably trained on the psychosocial risks related to bullying, their responsibilities and their role in eliminating bullying in the workplace?*

  As well as other questions about controlling psychosocial risks associated with bullying.

For further guidance, refer to [Model Code of Practice: Managing psychosocial hazards at work | Safe Work Australia](#) (p48 - 54) and [Guide for preventing and responding to workplace bullying | Safe Work Australia](#).

23. Harassment including Sexual Harassment

The PCBU considers, documents, and implements controls to mitigate the impacts of harassment in the workplace.

While anyone can experience harassment there are certain groups who are more likely to experience it. Individual workers may be at greater risk because of their age, gender, sexuality, migration status, disability, and literacy.

The things that can increase the likelihood of harassment include, but are not limited to, acceptance of inappropriate behaviour, power imbalances along gender lines, strict hierarchical structure, impacts of alcohol in work settings and workers in restrictive places such as vehicles.

Comcare inspectors will be asking:

- ➢ *How does the PCBU manage psychosocial risks for harassment, including sexual or gender-based harassment in the workplace?*

> ➢ *How does the PCBU act to eliminate sexual harassment?*

> ➢ *How does the PCBU manage inappropriate behaviour?*

> ➢ *How does the PCBU manage the risks of harassment where staff are isolated, or in restrictive spaces?*

> *As well as other questions about controlling psychosocial risks associated with harassment.*

For further guidance, refer to [Model Code of Practice: Managing psychosocial hazards at work | Safe Work Australia](#) (p48-54) and [Workplace sexual harassment | Comcare](#). The [Good Practice Indicators Framework for Preventing and Responding to Sexual Harassment (2022, Respect at Work Council)](#) is another valuable resource.

24. Relationships and interactions

The PCBU considers and manages psychosocial risks related to workplace conflict or poor workplace interactions.

Poor workplace relationships or interpersonal conflict can have significant impact on health and wellbeing. These can be manifested in frequent disagreements between colleagues, inappropriate exclusion of a worker from work-related activities, disparaging, or rude comments, either from one person or multiple people, such as from clients or customers. A worker can be both the subject and the source of this behaviour.

Comcare inspectors will be asking:

> ➢ *Does the PCBU have policies or procedures to report and address unacceptable behaviour or conflict in the workplace?*

> ➢ *Does the PCBU provide training for managers and staff to foster a positive work culture?*

> ➢ *How does the PCBU communicate relevant information to staff about workplace behaviours?*

> ➢ *How do the PCBU's leaders demonstrate they respond to all complaints and suggestions seriously?*

> *As well as other questions about controlling psychosocial risks associated with relationships and interactions.*

For further guidance, refer to [Model Code of Practice: Managing psychosocial hazards at work | Safe Work Australia](#) (p48 - 54).

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Worker Engagement

The Worker Engagement component of the Psychosocial Proactive Inspection Program is intended to provide a snapshot of system awareness and effectiveness.

Comcare inspectors will be seeking to ask questions of workers either face-to-face or through the use of an online survey. Handouts for workers have been developed to ensure consistent understanding of psychosocial hazards contained in the Model Code.

Face-to-face discussions with workers are expected to be brief, but will involve discussions across business areas and work sites. Implementation of this component of the program will be negotiated with PCBUs.

The Worker Engagement Tool developed for the program allows for capture of answers in a consistent and effective manner, and covers important privacy considerations – the engagement with workers is anonymous.

Comcare inspectors will be seeking to identify awareness of systems in place as well as asking questions about:

➢ *Understanding of the worker's role in identifying and managing psychosocial risks*

➢ *Consultation*

➢ *Training, information and supervision*

Information from workers will be evaluated and referenced (in overall terms) as part of the inspector report to the PCBU.

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