

Community Law **Waikato**

Te Tari Ture ā-Hapori o Waikato

Part of the National Community Law Movement



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HEALTH AND SAFETY POLICY

POLICY & PROCEDURE

This document sets out policy and procedure.

Reference may be made to additional and separate policies for example the *Privacy Manual*.

The policy and procedure contained herein and in all other separate codes apply to ALL EMPLOYEES, VOLUNTEERS (including governance), and where applicable other individuals or contractors performing work.

Best efforts have been made to cover all scenarios however should a situation arise which is not covered prescribed (or requires update) please approach Management.

IMPORTANT NOTE: a breach or breaches of CLW policy may be deemed as misconduct and disciplinary action may follow.

Review / Amendment	Date approved / implemented
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CONTENTS

1. PURPOSE & PRINCIPLES	4
2. SCOPE OF THE POLICY	4
3. HEALTH AND SAFETY AT WORK ACT 2015	4
4. KEY DEFINITIONS	5
4.1 PCBU	5
4.2 Workers	5
4.3 Officer	5
4.4 “Duty of Due Diligence”	5
4.5 “Reasonably Practicable”	6
4.6 Management / Emergency Warden	6
4.7 Health and Safety Representatives / Committee	6
5. GENERAL DUTIES / RESPONSIBILITIES	6
5.1 PCBU	6
5.2 Workers	7
5.3 Officers	7
6. GENERAL POLICY AND PROCEDURE	8
6.1 Accident / Incidents.....	8
6.2 Hazard Management.....	9
6.3 Solvents / Chemicals and Electrical.....	9
6.4 Office Staffing	9
6.5 Security / Panic Alarms.....	10
6.6 Outreach Clinics	10
6.7 Client Contact	10
6.8 Legal Education.....	10
6.9 Travel and use of Company Vehicle	11
6.10 Smoking	11
6.11 Reception/WAITING AREA	11
6.12 Threats of self-harm or serious harm to others	11
6.13 Harassment at Work.....	12
6.14 First Aid / Medical Treatment	14
7. EMERGENCY POLICY AND PROCESS	14

7.1 Emergency Wardens to lead process.....14
7.2 Emergency Assembly Point.....14
7.3 General Evacuation Procedure14
7.3 Disaster Recovery / Business continuity.....16

1. PURPOSE & PRINCIPLES

- Community Law Waikato (“CLW”) is committed to taking all reasonable and practicable steps to ensure the health and safety of all those performing work or services, or visiting our premises, or any other persons covered by law.
- ***Health and Safety is everyone’s business, and everyone is obligated and expected to share in our commitment.***
- The purpose of this policy is to:
 - Ensure, in the commitment as above, the safety of workers and others whilst at work or carrying out work, including volunteers, contractors and or subcontractors, visitors, and any other persons covered by law; and
 - Ensure that CLW adheres to the appropriate standards, regulations, codes of practice and the Health and Safety at Work Act 2015 and any other amendments or relevant legislation; and
 - Ensure that current, clear and practical policy is in place to provide a consistent approach to the commitment and legal obligations.
- Any updates / changes will be notified to all workers and officers in writing.

2. SCOPE OF THE POLICY

- The policy covers all CLW Trustees, CLW employees, CLW volunteers, contractors, trainees, and others present at the workplace or other place where work is being carried out.

3. HEALTH AND SAFETY AT WORK ACT 2015

- The Health and Safety at Work Act 2015 (“the Act”) seeks to ensure that workers and other persons be given the highest level of protection against harm to their health, safety, and welfare from hazards and risks arising from work as is reasonably practicable.
- The Act aims to provide for a balanced health and safety framework which protects individuals from harm, provides for workplace representation, encourages unions and employer organisations to take a constructive role in promoting improvements to workplace health and safety practices, promotes compliance and the provision of health and safety advice and education, ensures that the actions of persons exercising health and safety functions are subject to scrutiny and provides a framework for continuous improvement and progressively higher standards of work health and safety.
- The Act identifies duty holders and prescribes their duties.
- Pursuant the Act, health and safety risks must be eliminated or minimised so far as is reasonably practicable in the circumstances. Duty holders will accordingly need to develop robust policies, procedures and practices that adequately identify any risks and elimination or minimisation processes to manage those risks.

- The Act requires duty holders to consider who creates the risk and then for them to control that risk. It also encourages organisations to concentrate on the greatest risks that could cause death or serious injury first and comprehensively.
- The Act also introduces the concept of due diligence. This places a positive duty on those very senior individuals to be actively involved in health and safety matters relevant to the business or undertaking in order to ensure compliance with any duty or obligation.
- The Act also requires duty holders to have practices in place that provide reasonable opportunities for workers to participate in improving health and safety on an on-going basis. Workplaces with less than 20 workers that are considered low risk are not required to (but still may) have participation systems.

4. KEY DEFINITIONS

4.1 PCBU

- As above, the Health and Safety at Work Act introduces the concept of a “person conducting a business or undertaking” (“PCBU”).
- Community Law Waikato Trust is the PCBU and has the primary duty of care to take reasonable and practicable steps to ensure the health and safety of all “workers”.

4.2 WORKERS

- “Workers” is broadly defined and includes an employee, volunteer, tradesperson, trainee, person gaining work experience, and anyone carrying out work influenced or directed by the PCBU.

4.3 OFFICER

- The Act defines an “officer” in relation to a PCBU as a person occupying a position in relation to the business or undertaking that allows the person to exercise significant influence over the management of the business such as directors or comparable positions. Accordingly, Community Law Waikato Trustees are “officers”.

4.4 “DUTY OF DUE DILIGENCE”

- A principle duty of an “officer” is to exercise “due diligence” to ensure that the PCBU complies with its duties under the Act. This means that an officer of a PCBU must exercise the care, diligence, and skill that a reasonable officer would exercise in the same circumstances, taking into account (but without limitation) the nature of the business or undertaking and the position of the officer and the nature of responsibilities undertaken by the officer. This duty is stipulated in more detail further below.
- *NOTE this duty is a personal duty (separate from the PCBU duties) which cannot be delegated, modified or transferred. A breach is a criminal offence.*

4.5 “REASONABLY PRACTICABLE”

- An important term defined under the Act is “reasonably practicable”. It means that in relation to health and safety, PCBUs must ensure they do everything they are reasonably able to do taking into account and weighing up all relevant matters including:
 - the likelihood of the hazard or risk occurring
 - the likely degree of harm involved
 - what the person concerned knows, or reasonably ought to know, about the hazard or risk and ways of eliminating or minimising it
 - the availability or suitability of ways of eliminating the hazard or risk, and
 - after assessing the extent of the risk and the available ways to eliminate or minimise the risk, the cost associated with those ways including whether the cost is grossly disproportionate to the risk

4.6 MANAGEMENT / EMERGENCY WARDEN

- During office hours all incident / accident / emergencies will be reported to Management who are designated ‘Emergency Wardens’.
- For evening clinics, the Caseworker Coordinator is the designated ‘Emergency Warden’. The person will report any incident / accident / emergency to Management.

4.7 HEALTH AND SAFETY REPRESENTATIVES / COMMITTEE

- The Act imposes an obligation of election of health and safety representatives or committees. This obligation does NOT extend where work is carried out by fewer than 20 workers. Although volunteers are defined as “workers”, they are not covered by this obligation and therefore only non-volunteer workers are taken into account for determining the application of this statutory duty.
- Community Law Waikato elects NOT to appoint a health and safety representative or committee. Worker engagement (including volunteer workers) will be undertaken through practices as outlined in this policy.

5. GENERAL DUTIES / RESPONSIBILITIES

5.1 PCBU

- Must comply with all relevant health and safety legislation.
- Ensure as far as reasonably practicable a safe working environment at all times (this includes the means of entering an existing workplace, outreach services, office layout, ventilation, light and temperature, adequate facilities such as toilets, water, rest areas, first aid resources/equipment)
- Ensure as far as reasonably practicable the health and safety of all workers whilst at work or undertaking work.
- Ensure as far as reasonably practicable that the health and safety of all other persons (such as visitors / members of public) are not put at risk by the work carried out as part of the business
- Provide resources that ensure a consistent and systematic approach to health and safety management.

- Ensure that at least one worker holds a current First Aid Certificate.
- Ensure that procedures are in place to deal with all foreseeable emergencies.
- Identify and manage hazards through a process of isolation, elimination and minimisation as far as reasonably practicable (including the maintenance of an appropriate and current register)
- Provide adequate training and supervision for all workers in relation to all health and safety matters (induction training must cover all policy and procedure including location of equipment and emergency procedure). Ongoing training must be carried out as necessary and at least once every six months.
- Maintain an accurate record of incidents / events and comply with reporting requirements.
- Engage with workers on matters related to health and safety and implement worker participation practices (this isn't mandatory for volunteers but may be adopted if the PCBU elects to do so).
- Ensure ongoing evaluation / review and update of health and safety policy / procedure.

The PCBU delegates the implementation and practical oversight of all applicable health and safety responsibilities to the CLW manager(s), with the exception of "due diligence" as outlined below.

5.2 WORKERS

Whilst at work or carrying out work, all workers are expected to:

- Take reasonable care for their own health and safety (including taking necessary rest and meal breaks).
- Take reasonable care that their acts or omissions do not adversely affect the health and safety of others.
- Comply as far as is reasonably possible with any reasonable and lawful instruction given by the PCBU, Manager(s), Emergency Warden and First Aid Officer.
- Comply with all legislation and / or regulations.
- Cooperate with any policy or procedure instructed by the PCBU or Manager(s) relating to the health and safety at the workplace.
- Contribute to developing and managing health and safety procedures.
- Report / discuss all relevant health and safety matters with Manager(s).
- NOTE this includes stress, significant fatigue (including muscle fatigue), and any adverse effects on mental health in relation to exposure to "sensitive/disturbing information" related to work carried out.
- Be familiar with the hazard register and contribute to any necessary updates.
- Use common sense when it comes to keeping work spaces clear of hazards such as spills, trip hazards, and electrical cabling; keeping entry / exits clear; setting desks and chairs to an appropriate height to avoid strain.
- If in doubt, ask, don't take chances.

5.3 OFFICERS

As above, "officers" are required to exercise "due diligence" to ensure that the PCBU complies with legislative health and safety requirements.

Key elements of "due diligence" require each officer:

- to acquire, and keep up to date knowledge of health and safety matters (generally speaking as well as matters related specifically to the PCBU).
- to gain an understanding of the nature of the PCBU's operations; the risks arising from this; and the control measures in place.
- to ensure that the PCBU has available for use appropriate resources and processes to isolate, eliminate or minimise risks to health and safety from work carried out as part of the conduct of the business.
- to monitor the performance of the centre in relation to health and safety.
- to ensure that the PCBU has appropriate processes for receiving and considering information regarding incidents, hazards, and risks and for responding in a timely way to that information
- to ensure that the PCBU complies with any duty or obligation of the PCBU under all applicable legislation / codes / regulations.
- to verify the organisation's performance in relation health and safety matters.

In order to facilitate the "due diligence" duty and "officers" influence over health and safety systems, the following best practice guidelines are adopted:

- Management is responsible for developing and publishing a safety vision / statement.
- Management is responsible for developing and implementing health and safety policy and procedure (including hazard management), which is to be reviewed as necessary and at a minimum once every six months.
- Management must provide a summary report upon the completion of any review / changes and otherwise at least once every six months (or a full report if competed externally).
- Management will report immediately to the "officers" any notifiable incidents.
- Management will request approval from the "officers" where management is of the opinion that an external audit is necessary.
- Management must ensure that adequate resources / systems / equipment is in place to meet health and safety regulations and best practice. Approval for this cost is submitted to the "officers" as and when necessary.

6. GENERAL POLICY AND PROCEDURE

6.1 ACCIDENT / INCIDENTS

- Any injuries or accidents or near misses must be reported to a Manager immediately.
- Irrespective of reporting to Management, appropriate response must be taken immediately (including calling 111; administering first aid; following any evacuation procedure – see below).
- NOTE any sites associated with a notifiable event must be isolated and left undisturbed until formal OSH reporting is completed).
- All notifiable events are to be recorded in the Accident / Incident register (electronic copy saved in the general share) in liaison with a Manager.
- The Act defines "notifiable events" as any death, notifiable injury or illness or incident.
- Unless context requires otherwise, a notifiable injury or illness, in relation to a person means any of the following injuries or illnesses that require the person to have immediate treatment (other than first aid):

- Requires or would usually require the person to have immediate treatment as an inpatient in a hospital; or
 - Requires the person to have immediate treatment (other than first aid) for an amputation of body part, serious head or eye injury or separation of skin from underlying tissue; or
 - Requires or would usually require, the person to have medical treatment with 48 hours of exposure to a substance; or
 - Any serious infection where work is a significant contribution factor
 - Any other injury or illness declared by regulations to be a notifiable injury or illness
- A notifiable incident is an unplanned or uncontrolled incident in relation to a workplace that exposes a worker to a serious risk to the personal health or safety from uncontrolled leakage of substance, implosion, explosion, fire, gas or steam, pressurised substance, electric shock, fall from a height, collapse or overturning of structure.
 - A PCBU is required to notify all “notifiable events” as soon as possible after becoming aware. This can be done via telephone or writing by a manager. Management will follow the process as outlined / instructed by Worksafe NZ.
 - A record of a notifiable event must be kept for at least 5 years from the date on which notice is given.
 - Aside from incident / accident reporting pursuant the Health and Safety legislation, any crime related incidents will be processed and reported to the NZ Police by management.

6.2 HAZARD MANAGEMENT

- Management is responsible for reviewing any potential risks and hazards on a regular basis and at the very least, once every six months.
- A Hazard Register is available in the staffroom, reception, and posted in the waiting area for public notice.
- Each risk will be assessed in terms of likelihood and consequences (naturally the more serious the consequences or higher the likelihood the more management it might require) AND the options for isolation / elimination / minimisation including the procedure.
- Workers are responsible to notify management of any potential hazards not already on the register, or for any on the register that requires an update.

6.3 SOLVENTS / CHEMICALS AND ELECTRICAL

- Due to the nature of our operation the risk related to electric current / faulty equipment is minimal, however common sense must prevail for use of ordinary equipment in the office such as the photocopier, computers, and kitchen appliances.
- NOTE exposure to toner when changing photocopier cartridges must be treated immediately (thorough washing and seek medical attention if ingested).

6.4 OFFICE STAFFING

- During business hours (including evening clinics), there must be at least two workers present AT ALL TIMES.

- After-hours access must be kept to a minimum AND must be authorised by management (except for short access such as collecting something).
- Access cards and codes are confidential to individual workers only.

6.5 SECURITY / PANIC ALARMS

- Pocket alarms are available at reception and must be taken by ALL workers to interview rooms when meeting clients.
- If a portable alarm is activated, workers will follow the Aggressive / Hostile Persons Procedure.
- Pocket alarms also have a key attached for all interview room. In the event of a “lockdown” process this key will be used to secure the door from the inside.

6.6 OUTREACH CLINICS

- Health and safety responsibilities extend to outreach work / clinics.
- Workers must follow / adopt the same principles and procedures in this document as far as reasonably practical whilst undertaking duties outside the main office.
- Workers must, as far as practicable, also familiarise themselves with the health and safety policy and procedure for each different work site regularly attended (including the emergency evacuation; hazard register; incident reporting; other aspects).
- Key areas of risk include; travel to and from work related tasks (the Safe Driving and Vehicle Use Policy applies); staff, volunteers, clients, and other persons at work sites; emergencies at work sites (such as fire).

6.7 CLIENT CONTACT

- If safety is a concern for an upcoming client interview, it must be completed via telephone unless management approves a face-to-face interview.
- If safety becomes a concern during a face-to-face interview, the CLW worker must immediately excuse themselves from the interview and seek management direction.
- Workers may NOT arrange off site (setting aside outreach clinics or other official forums such as mediation, Court etc) contact with a client / prospective client UNLESS authorised by management.
- Workers may NOT accompany a client / prospective client / member of public in a vehicle for any purpose (including taking the person to a hospital) UNLESS authorised by management.
- Workers may NOT provide a client /prospective client / member of public with the worker’s personal contact details such as telephone, email, and address. This includes personal contact via social media.
- A worker must IMMEDIATELY report to management any obsessive, aggressive, or other inappropriate behaviour by a client / member of the public (related to CLW business).

6.8 LEGAL EDUCATION

- When delivering legal education to high risk groups such as alternative education providers or to a group with the Department of Corrections, there must be at least two workers present (one can be a Department of Corrections employee).

6.9 TRAVEL AND USE OF COMPANY VEHICLE

- See *General Code of Conduct – Travel and Vehicle Use*.

6.10 SMOKING

- The Community Law Waikato office has been designated a smoke-free zone. Please check with management for designated areas.

6.11 RECEPTION/WAITING AREA

- The toy basket in the waiting area must be checked regularly for unsafe toys.
- The internal door for access to the main office zones MUST be kept locked AT ALL TIMES. The code is only available for paid employees.
- Where any person (including visitors and clients) are brought beyond this access door, all CLW policy must be strictly adhered to and management is responsible to ensure that such access is safe.

6.12 THREATS OF SELF-HARM OR SERIOUS HARM TO OTHERS

- A person who presents to a worker with threats or intentions of self-abuse or serious harm to others must be “handled” with care.
- A primary consideration (aside from immediate safety as below) is the competing interests of privacy vs disclosure for protection.
- Disclosure of personal information must comply with all law and or regulations such as the Privacy Act and the Client Care and Conduct Rules for lawyers.
- Where mandatory reporting may be applicable, the process as per the *Privacy Policy* applies and **the decision requires management approval.**
- Aside from the privacy and disclosure aspect, there are other aspects to consider depending on the individual circumstances:
 - **Ensuring that your / other’s safety is paramount.** If the person presents an immediate risk to safety you MUST follow the process as outlined in ‘Intruders / Aggressive or Hostile Person’s’ section.
 - **Immediately notify management about the situation or in their absence other available staff / support.** NOTE management will signal the appropriate process and must be contacted urgently if not available on site.
 - **In “non-imminent” situations (i.e. there is no obvious immediate risk to safety), ascertain the vulnerability of the client and level of intervention required.** This involves consultation with the individual concerned however where the person shows signs of significant distress it might not be appropriate.
 - **Two workers must be present at all times with the person concerned.** An important starting point is likely to explain to the person why we are engaging with them (including our concern and professional obligations). If the person is willing / able to engage, the worker must check aspects such as current support (professional or otherwise), whether they have previously experienced mental health issues, whether they would like for us to contact anyone on their behalf or complete a referral to an agency that can provide the assistance they need.
 - **If there is a sudden change in demeanour (such as aggression) all contact must be avoided.** If that person presents a risk to safety you MUST follow the process as outlined in ‘Intruders / Aggressive or Hostile Person’s’ section.

- NOTE the Crisis Assessment Team (DHB) have a 24 hour contact line (0800 505050) HOWEVER this contact is NOT appropriate to address immediate / urgent situations. This requires a call to ordinary emergency services 111.
- NOTE to receive general information, any worker may contact the Adult Mental Health Services 07 834 6902.

6.13 HARASSMENT, DISCRIMINATION AND BULLYING AT WORK

- Community Law Waikato has a strict ZERO tolerance policy with regards to any form of harassment, discrimination or bullying.
- All workers (including volunteers and other performing work or engaging with workers) must treat others with respect and courtesy.
- A PCBU must take all reasonably practicable steps to prevent bullying and or harassment pursuant the Human Rights Act, the Health and Safety at Work Act, the Employment Relations Act, and the CCCR.
- The PCBU is responsible for the investigation and resolution process with regards to any harassment, discrimination and bullying complaints.
- The PCBU and management must be proactive in identifying and managing the risk. This includes, but is not limited to, setting a culture of respect and safe work practices (leading a culture of zero tolerance, being open and responsive and building relationship of trust), conducting work surveys and exit interviews with regards to workplace behaviour, ensuring clear, transparent, fair and safe processes are in place to address bullying and or harassment complaints.

Definitions:

- Workplace bullying and or harassment is broadly defined as *repeated and unreasonable behaviour where a worker is intimidated, harassed (including sexual harassment), discriminated, humiliated, abused, threatened or assaulted by another worker(s) or by a member of the public in circumstances arising out of the course of his / her employment which is a risk to health and safety.*
- Bullying and or harassment is NOT firm but fair management or justified performance management or disciplinary processes. Occasional differences of opinion, conflicts and problems in working relationships are part of ordinary working life and does not automatically constitute bullying or harassment. This includes issuing reasonable instructions, direct / abrupt instructions, friendly banter (non-sexual), legitimate criticism / feedback, and assertive expression of opinion.
- Circumstances that are repeated or escalates may meet the definition of bullying and or harassment.
- Bullying and or harassment can occur between co-workers (including volunteers), positions of seniority, and clients or members of the public.

Process for bullying and or harassment complaints:

- A CLW worker who feels that he or she has been or is being bullied and or harassed, may raise the concern with or submit a complaint to the manager they report to, or another manager, or the chairperson of the CLW Board of Trustees.

- All concerns and or complaints related to bullying and or harassment must be reported to the Board of Trustees for transparency and compliance purposes (irrespective of whether an informal or formal resolution approach is taken).
- Intimidation, victimisation, discrimination or any form of retaliatory conduct in response to a bullying and or harassment complaint / concern will be treated as potential misconduct and disciplinary action will be taken.
- A worker who has raised a bullying and or harassment issue, is under no obligation to proceed with an informal or formal resolution process. However where the circumstances relate to a client or member of the public, the PBCU is under an obligation to investigate and if substantiated take all steps reasonably practicable to prevent it from continuing or reoccurring. Furthermore, where the nature of the issue or complaint is serious and or criminal in nature, it is likely the BPCU will be under an obligation to investigate and resolve the issue.
- The immediate priorities when a complaint is received are to ensure the safety of all involved, clarifying the process and options going forward, and discussing the option of confidential counselling / support.
- In addressing and or resolving an issue or complaint about bullying and or harassment, the PBCU must have regard to health and safety, accountability, privacy, principles of natural fairness and good faith, and compliance with policy and all relevant legislation and or regulation.
- The options available in response to an issue or complaint raised about bullying and or harassment include informal approaches (including direct approach, mediation) and a formal investigation approach.
- An informal resolution approach is voluntary for both the complainant and the respondent. It is not disciplinary in nature and nor does it seek to place blame (parties are free to make agreements where a breach thereafter could lead to formal investigation and or disciplinary outcomes).
- With any informal approach the PBCU must ensure both parties are supported and must still ensure that all steps are taken to ensure the behaviour related to the issue / complaint is prevented from continuing or reoccurring. This may include training, review of policy and procedure, and environmental audits.
- If a worker chooses to proceed with, or the circumstances mandate, a formal complaint, the complaint must be made in writing with clear details about dates, witnesses, and resolution. A formal investigation will follow.
- The specific process for a formal investigation will be determined on the circumstances but must be consistent with principles of natural justice, free from pre-determination, and ensure that everyone is informed, supported, and safe. If appropriate, and independent investigator may be appointed.
- Anonymity may be applicable in circumstances where disclosure of personal affairs or serious safety concerns are relevant. The general legal position is that a formal investigation will be unlikely justified unless the PBCU can provide the respondent with enough information to preserve their right to a fair process. This issue will be assessed on a case by case basis.
- Any workers who are approached in the course of an investigation will be advised of the purpose of the discussion and the fact that their statements may be a formal record.
- An investigation report will outline the findings of the investigation and management will thereafter take any steps appropriate. The complainant will be informed of the outcome and any steps or action taken in response to the outcome.

6.14 FIRST AID / MEDICAL TREATMENT

- At least one worker present at the main office is designated as the “First Aid Officer” and will hold a first aid qualification.
- This designated person must be the first point of contact for administration of any first aid / medical attention.
- If a worker or any other person present at the work place requires urgent medical treatment beyond basic first aid, the designated “first aid officer” will contact or instruct the contact to emergency services (unless already actioned by another worker).
- A first aid kit is available in the staffroom.
- The designated person will also be responsible for the security and contents of the first-aid kit.
- Whether any incident / first aid treatment warrants reporting, please check with management.

7. EMERGENCY POLICY AND PROCESS

7.1 EMERGENCY WARDENS TO LEAD PROCESS

- A minimum of two Emergency Wardens are designated and responsible for implementing procedure and issuing instructions in relation to emergencies.

7.2 EMERGENCY ASSEMBLY POINT

- In the event of an evacuation of the main office, workers and others in the office must (unless not feasible) assemble at Smith and Smith Glass (next door to our office).
- Workers and visitors are to remain in this area until the all clear is given by the emergency personnel.

7.3 GENERAL EVACUATION PROCEDURE

- Follow the Emergency Warden’s instructions.
- Leave the building if instructed via the front or rear door of the office to the outside assembly point.
- Do NOT use the lifts.
- Stay calm and maintain an orderly manner.
- Do not carry hot drinks or items which may hinder evacuation or cause injury.
- The Emergency Warden will instruct if any assistance is required with evacuating persons with disabilities. If this is not possible, instructions are to be given to emergency services on the location of the person(s).

Emergency Wardens:

- Immediately establish the circumstances giving rise to the emergency (ie fire, threat etc).
- Liaise with Management ASAP if circumstances allow.
- Use your cell phone to contact emergency services (allows you to stay connected).
- Give CLEAR and LOUD instructions for evacuation.
- If circumstances permit, check all rooms, bathrooms and stairwells.
- Account for all staff and volunteers in assembly area.

- Liaise with emergency services.
- Give instructions for workers to re-enter building once / if cleared.

POWER OUTAGE

- Follow the Emergency Warden's instructions
- Unless it is vital to leave, stay in the building.
- The Emergency Warden will liaise with service providers and inform workers of expected length of power outage
- The Emergency Warden will account for all workers / other persons such as clients to ensure nobody is "stuck" in the lift

FIRE

- Follow the Emergency Warden's instructions
- Activate the fire alarm if not already triggered - break glass and trip the switch. Fire alarms are in the foyer of the front and rear staircases on the 2nd Floor
- Follow the general evacuation procedure
- The Emergency Warden is to account for all workers / others (as far as practicable) and liaise with emergency services
- For SMALL FIRES and if it is safe to do so, the Emergency Warden may attempt to put out the fire by using the equipment provided. A Fire extinguisher (BCF type) is located in the corridor opposite the staffroom. Do not persist with attempts to extinguish the fire should it become uncontrollable.

EARTHQUAKE

- If you are outside:
Find a clear spot, drop to the ground and stay there until the shaking stops.
- If in a vehicle:
Pull over to a clear location, stop and stay there with your seatbelt fastened until the shaking stops. Once the shaking stops, proceed with caution and avoid bridges or ramps that might have been damaged.
- If you are inside:
Drop, Cover and Hold – move no more than a few steps to a safe place and drop
Follow the Emergency Warden's instructions
Expect aftershocks. Each time you feel one, drop, cover and hold
After the shaking stops, gather workers together, care for injuries and work as a team to establish a safe route to an assembly area BEFORE leaving the building
If safe to do so assemble at the evacuation assembly area
The Emergency Warden must turn off the electricity / gas at the main fuse box if it is safe
Take bags, phones, wallets and any emergency supplies you have
Assist injured people to evacuate or note their locations to pass on to emergency services
Use mobile texting to contact families. This will keep lines free for emergency services
If practicable keep a register of workers present, log when they leave and their intentions (e.g. fetch children from day-care, walk home etc.). Arrange to travel in groups.
Upon instructions from the Emergency Warden workers can head home. It's best not to all go at once, as transport and roads could be overloaded

Listen to a radio for updated emergency information and instructions

Practise – people need to know what the plan is and practise it

INTRUDER / HOLD UP / AGGRESSIVE PERSONS / VOLATILE SITUATIONS

- The health and safety of all workers / persons are paramount
- The immediate goal is to get away from any immediate danger and notify others
- Think CLEVER and FAST (use excuses, run if you must)
- Do NOT attempt to restrain an intruder / aggressive person(s)
- Where possible, the Emergency Warden must immediately be notified
- If you are trapped in an interview room or at front counter use the emergency button / pocket alarm.
- If applicable, de-escalate the situation which means remain calm and use active passive listening (nodding and acknowledging that what is being said is heard – do not argue or engage).

Lockdown Process

- Management or another worker may initiate a lockdown process at any time.
- Workers in the interview rooms will be notified of a lockdown by the blue flashing lights. The worker must lock themselves / others in (using the key on the pocket alarm) AND remain until management unlocks the door from the outside.
- Workers in the front reception area either instructing or receiving instructions for a lockdown must immediately move to the back office (along with those in the side office), lock the door by the photocopier, press the button for blue lights in the interview rooms, and notify management / others. IF workers in the front reception area thinks necessary, they may use the red emergency alarm which signals a lockdown.

BOMB OTHER THREATS

- A worker who has received a threat must report it to the Emergency Warden immediately
- Follow the Emergency Warden's instructions
- All present are to comply with any special instructions which may include the route of evacuation
- When an evacuation is ordered workers should take with them their own personal property, e.g. bags, phones etc
- Do not close windows

SUSPICIOUS PACKAGES

- A suspicious package or parcel is NOT to be touched or disturbed
- A worker who has received or noticed a suspicious package must report it to the Emergency Warden immediately
- Follow the Emergency Warden's instructions

7.3 DISASTER RECOVERY / BUSINESS CONTINUITY

- Disaster recovery and business continuity must be managed on a case by case basis.
- Numerous factors will be relevant in formulating a plan, and at a minimum the following must be evaluated; Health and Safety (including employees and other stakeholders), insurance

notification/instruction, state service / instructions / recommendation, and building and proximate environment (including equipment, client data, and other resources).

- CLW's operation is largely dependent on technology, specifically the internet. Majority of work including client files are management electronically. Systems are in place to ensure recovery / access of majority of data off site (subject to the technological infrastructure).
- Alternative business premises could be arranged if necessary.
- In the event of a disaster /event which is a significant disruption of business continuity (longer than 24 hours), Management must as soon as practicable liaise with the CLW Chairperson. A plan of action will be formulated at this meeting unless the decision is deferred.
- Management is responsible for the coordination and implementation of any action plan.